

# The University of West Alabama



## Policy & Procedure Manual For Athletic Trainers

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## **Introduction**

Welcome to The University of West Alabama and its athletic training education program, as an athletic training student or prospective athletic training student. In accepting one of these positions, you have taken on a great deal of responsibility and have put yourself in a very rewarding position that will hopefully help you meet your professional goals and objectives. We, as a staff, commend your desire to become a certified athletic trainer and are pleased to have you within our ranks. The University of West Alabama's Athletic Training Education Program is nationally accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP). It combines the National Athletic Trainers' Association Board of Certification (NATABOC) internship requirements with those requirements of an accredited curriculum into a comprehensive athletic training major offered through the Department of Physical Education and Athletic Training.

As a student member of our staff, we have great expectations of you. We expect you to be reliable, dependable, loyal, diligent, and dedicated in your efforts. We also expect you to conduct yourself with the highest degree of decorum, to be academically sound, and to represent yourself, our staff, our program, and the University with professionalism beyond reproach.

Being an athletic training student at UWA is a significant responsibility. You are not only responsible for the health and welfare of the athletes in your charge but you represent the University and our program. Any misconduct that compromises the image or integrity of this department, UWA, or puts the health of your athletes at risk is grounds for dismissal from the athletic training education program. Violations of procedures or policies of this department will be grounds for a warning from the staff. Repeated violations are grounds for dismissal. Failure to maintain progression requirements results in academic probation and/or suspension from the athletic training professional education program. In addition to academic probation or suspension, the student's enrollment in the athletic training education program may be terminated at any time if, in the judgment of the athletic training faculty, the student demonstrates academic, social, or emotional behaviors or physical problems inappropriate to the practice of athletic training. Students whose health status and/or clinical performance jeopardize the patients assigned to his/her care may also be dismissed from the athletic training education program. Students suspended from the athletic training education program may apply for re-admission to the program through the Athletic Training Curriculum Selection Committee when the deficiencies are removed. Students suspended twice from the program are ineligible to re-apply.

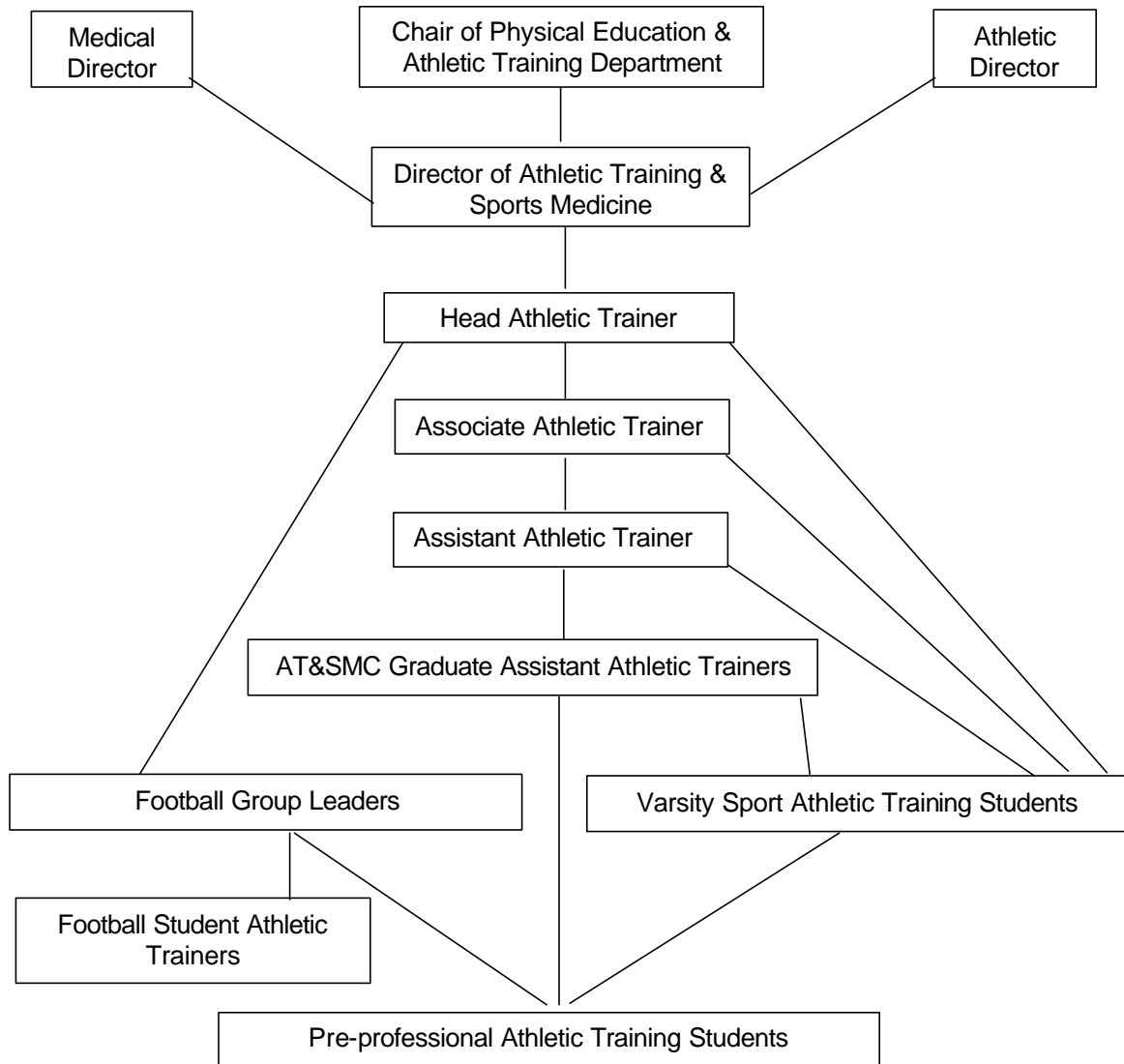
It is the athletic training and sports medicine staff's intention that your experiences here be enjoyable and educational. We will attempt to provide you with the opportunity to gain the knowledge and skills necessary to be an outstanding athletic trainer. In return, we ask for and expect your cooperation, dedication, loyalty, and enthusiasm.

Again, welcome to our staff. We are glad to have you and we look forward to a profitable, educational, and longstanding relationship.

## Standards of Operation

### Chain of Command

For the athletic training and sports medicine staff to function smoothly and consistently, the following chain of command is in effect:



Decisions on questionable matters should always be referred to the next higher-ranking individual that is immediately available. The athletic training student group leaders will be responsible for seeing that all pre, during, and post practice assignments are carried out and that the athletic training room is properly maintained. This includes the inventory of supplies, the supervision of restocking and cleaning the area, and the education of athletic training students in the proper procedures relating to the athletic training room. The athletic training student group leaders carry the ultimate student responsibility and comments or criticisms from any of the higher-ranking athletic trainers will be made to them regarding the performance of their student staff.

## Athletic Training Curriculum Admission Requirements

Revised 7/15/03

Admission to the University and to the College of Education does not constitute acceptance into the Athletic Training Education Program. Every student who wishes to prepare for athletic training certification is required to submit a written application for admission into the Athletic Training Education Program. This application should be filed with the Athletic Training Education Program Director no later than April 1 of the first year of enrollment at UWA. The Bachelor of Science degree in athletic training consists of two components: (1) The pre-professional program (usually freshman year or first year for transfers) and (2) the professional program (sophomore through senior years). All students must complete the course of study for the pre-professional and professional program as described in the University *General Catalogue*. The pre-professional program must be completed by all students and validated by the Athletic Training Education Program Director before students are considered eligible for admission to the professional program. All students must make formal application to the professional program (usually in the spring semester of the freshman year or first year for transfers) and meet all admission requirements. Completion of the pre-professional program does not guarantee acceptance into the eligibility criteria for the professional program in athletic training.

### POLICIES

#### *Admission to the Professional Program:*

To be eligible for admission to this program, in addition to meeting all requirements for admission to the University, applicants must:

1. Have a minimum quality-point ratio of 2.0 in all hours attempted in general studies curriculum requirements completed prior to application deadline.
2. Have a minimum quality-point ratio of 3.0 in all hours attempted in the athletic training major requirements completed prior to application deadline.
3. Submit complete application materials to the Athletic Training Education Program Director by April 1 (December 1 and July 1 for transfer students meeting the requirements listed below). (Usually these should be submitted during the freshman or first year in the pre-professional program. All course requirements do not have to be completed prior to filing application).
4. Submit recommendation forms from three UWA faculty members by April 1 (July 1 for transfer students meeting the requirements listed below).
5. Hold current American National Red Cross Professional Rescuer First Aid and CPR (American Red Cross or American Heart Association) certification or Emergency Medical Technician equivalency.
6. Successfully complete the Athletic Training Practicum courses AH 101 and AH 102. (Exception: Students meeting the transfer criteria listed below may be admitted without previously completing these courses but will have to successfully complete these courses as part of their curriculum).
7. Interview with the Athletic Training Curriculum Selection Committee.

#### **Transfer Students:**

Students with previous documented clinical experience in athletic training who transfer to UWA and meet the following requirements in addition to the above admission requirements may be eligible for admission to the athletic training professional program upon enrollment in the first semester at UWA:

1. Documentation of a minimum of at least 120 hours of clinical experience supervised by an NATA BOC certified athletic trainer or a state credentialed athletic trainer.
2. One of the three recommendation forms must be from the student's primary supervising athletic trainer from the previous institution. The remaining two recommendation forms must be from the faculty of the student's previous institution.

#### *Progression Requirements:*

In order to progress in the athletic training professional program, students must:

1. Achieve a minimum grade of "C" in each athletic training major course attempted. For any athletic training major course in which the student earns less than a "C" the entire course must be repeated. Students may repeat an athletic training (AH) course only once.
2. Maintain a cumulative quality-point ratio of 3.0 in all hours attempted in the athletic training major requirements.
3. Maintain a cumulative quality-point ratio of 2.0 in all hours attempted in general studies course requirements.
4. Maintenance of good standing with the University according to UWA student policies and procedures.
5. Maintain current American National Red Cross Standard First Aid Certification and Basic CPR (American Red Cross or American Heart Association) or Emergency Medical Technician equivalent.

**NOTE:** Failure to maintain any of the above progression requirements results in academic probation and/or suspension from the athletic training professional program. In addition to academic probation or suspension, the student's enrollment in the athletic training professional program may be terminated at any time if, in the judgment of the athletic training faculty, the student demonstrates academic, social, or emotional behaviors or physical problems inappropriate to the practice of athletic training. Students whose health status and/or clinical performance jeopardize the patients assigned to his/her care may also be dismissed from the athletic training professional program. Students suspended from the athletic training professional program may apply for re-admission to the program through the Athletic Training Curriculum Selection Committee when the deficiencies are removed. Students suspended twice from the program are ineligible to re-apply.

#### **Definitions:**

Unconditional Acceptance: A student may be accepted to the athletic training professional program after completing all admission requirements without deficiencies as stated in the UWA Athletic Training Curriculum Admission Requirements.

Conditional Acceptance: Students applying to the athletic training curriculum with a GPA in the range of 1.75-1.99 for all general course work and/or 2.75-2.99 for all athletic training course work may be accepted into the program conditionally if all other application requirements have been met. Students accepted conditionally will be placed on a probationary status for one academic year. Failure to correct the deficiency(s) after one academic year will lead to suspension from the Athletic Training Education Program.

Probation: Deficiencies in admission or progression requirements may result in the student being placed on probationary status. Probationary status is generally one academic year in length except when a student has clearly corrected any and all deficiencies. A student on probation may be limited in the total number of clinical hours allowed per week. Generally, students will not be given primary responsibility for a varsity sport during their probationary period. Students failing to correct all deficiencies at the end of one academic year from the date of probation will be suspended from the athletic training professional program.

Suspension: Students suspended from the athletic training professional program will not be assigned clinical experiences or responsibilities within athletic training. Students will not be allowed to take any professional level athletic training course other than to repeat courses in which they have earned less than a "C".

### Quantification of Admission to the Athletic Training Professional Program

Admission Components	Total Points Possible	
<b>General Studies GPA:</b>	1.75-1.99 = 0 2.00-2.49 = 1 2.50-2.99 = 2 3.00-3.49 = 3 3.50-4.00 = 4	4
<b>Athletic Training GPA:</b>	2.75-2.99 = 0 3.00-3.24 = 1 3.25-3.49 = 2 3.50-3.74 = 3 3.75-4.00 = 4	4
<b>Cardiopulmonary Resuscitation:</b>	YES = 1 NO = 0	1
<b>Faculty Recommendation: (3)</b>	<68% = 0 69-76 = 1 77-84 = 2 85-92 = 3 93-100 = 4	4
<b>Faculty Overall Recommendation:</b>	Admit Unconditionally= 4 Admit conditionally= 3 No Recommendation= 2 Do Not Admit at this time= 1 Reject= 0	4
<b>Professional Athletic Training Application:</b>	0-7	7
<b>Interview:</b>	Excellent = 4 Above Average = 3 Satisfactory = 2 Below Average = 1 Unacceptable = 0	12
<b>Clinical Hours:</b>	0-119= 0 120-239= 1 240-359= 2 360-479= 3 480>= 4	4

## I. Mission Statement:

The Athletic Training Education Program in the Department of Physical Education & Athletic Training functions within the mission and goals of the institution. The University acknowledges its role in addressing the major educational, social, cultural, and economic issues of the region. The primary mission of the Athletic Training Education Program is to provide quality education programs through which students may obtain the knowledge and psychomotor skills necessary to practice as an athletic trainer certified by the National Athletic Trainers' Association Board of Certification. Importance is placed upon the provision of opportunities within the curriculum for the development of skills encompassing the domains of Athletic Training. Strong emphasis is placed on the practical clinical experience coupled with specific professional course work. Recognizing the importance of excellence in teaching and instruction, the faculty, in its commitment to the combination of diverse clinical and intellectual experiences, collaborates in educating students. In fulfilling its mission, the program also seeks to extend educational opportunities beyond the classroom by providing sports medicine services to the University community as well as its region. Through successful completion of the Athletic Training Education Program, graduates are prepared to enter the profession of Athletic Training and assume a leadership role in the implementation of changes evolving in the sports medicine arena.

## II. How the Mission is Achieved Through Structure and Content:

### A. Structure

The number of course hours in the undergraduate program in athletic training is 120. 60 hours of athletic training requirements and 60 hours of general studies requirements, which consist of six (6) hours of written composition, twelve (12) hours of humanities and fine arts, eleven (11) hours of natural science and mathematics, twelve (12) hours of history, social, and behavioral sciences, and nineteen (19) hours of other core requirements.

### B. Content

The 1999 Role Delineation of the National Athletic Trainers' Association concludes that the profession is divided into six major areas or domains. These domains are:

1. Prevention of Athletic Injuries
2. Recognition, Evaluation, and Assessment of Athletic Injuries
3. Immediate Care of Athletic Injuries
4. Treatment, Rehabilitation, and Reconditioning of Athletic Injuries
5. Organization and Administration
6. Professional Development and Responsibility

In defining these domains and in attempting to assign the elements of athletic training it is evident that many elements transcend several domains rather than fitting in only one domain. These elements are best reflected in the following Athletic Training competencies and clinical proficiencies.

1. Acute Care of Injuries and Illnesses
2. Assessment and Evaluation
3. General Medical Conditions and Disabilities
4. Health Care Administration
5. Nutritional Aspects
6. Pathology of Injuries and Illnesses
7. Pharmacology
8. Professional Development and Responsibilities
9. Psychosocial Intervention and Referral
10. Risk Management and Injury Prevention
11. Therapeutic Exercise
12. Therapeutic Modalities



## **Educational Objectives of the Athletic Training Curriculum**

Satisfactory performances in the courses and clinical experiences in the program prepare the graduate to:

1. Recognize when presenting pathology requires management, treatment, and rehabilitation by the athletic trainer, and when professional attention from other than the athletic trainer is required.
2. Initiate and complete appropriate evaluation, management, treatment, and rehabilitation when presenting pathology indicates the need for athletic training.
3. Synthesize athletic training science through integration of the biological, physical, social, and behavioral sciences in providing athletic training focused on movement dysfunction.
4. Demonstrate a personal value system that reflects appreciation of the worth of an individual, the recognition of the rights of others, and also that acknowledges the importance of self and others to be responsible for individual actions.
5. Demonstrate professional competence that embodies professional ethics.
6. Identify, organize, and utilize resources, both personal and material, to effectively develop and efficiently provide health care services for the physically active.
7. Use the scientific approach to problem solving in carrying out professional responsibilities.
8. Identify the athletic training or related health care needs of a community and develop and implement programs that lead toward meeting those needs.
9. Communicate efficiently and effectively with correct usage of verbal (spoken and written) communication methods and nonverbal methods.
10. Utilize both athletic training personnel resources and other health care personnel resources in such a way as to reflect an understanding of their complementary roles in working toward the common goal of providing the best possible services in athletic care and health promotion.
11. Apply rational teaching/learning theories and methods in health care, academic and community environment.
12. Continue self-development, personally and professionally, based on self-evaluation, individual needs, and on recognition of own strengths and limitations.
13. Maintain identity as an athletic trainer and promote the development of the Athletic Training profession.
14. Apply information management skills in the multifaceted role of the athletic trainer.

## **Job Descriptions & Staff Responsibilities**

### **Director of Athletic Training & Sports Medicine/Professor**

1. Prevention, evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA varsity athletes
2. Evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA AT&SMC patients
3. Administration & coordination of athletic training service contracts with secondary schools, community colleges, etc.
4. Administration & coordination of athletic training clinical contracts with off campus affiliated clinical sites
5. Clinical supervision of the Athletic Training Room clinical site
6. Clinical supervision of intramurals
7. Teaching assignments for athletic training faculty
8. Teaching load of 18-24 hours in PEAT
9. Approval of varsity athlete prescriptions
10. Clinical instruction of athletic training students
11. Selection & purchasing of athletic insurance policies
12. Coordination of football travel arrangements
13. Academic advisor for athletic training and physical education (graduate)
14. Chair, athletic training curriculum committee
15. Athletic training consultant to UWA community and service area
16. Selection & coordination of all sports medicine physicians & allied health personnel
17. Coverage of secondary school/community college, etc. events as assigned
18. Approval of high school mileage and reimbursement forms
19. Procurement and execution of all grant activity for UWA related to athletic training & sports medicine
20. Coordination of physician visits to UWA
21. Chief administrator of athletic training budgets
22. Inventory and distribution of keys for all athletic personnel
23. Coordination of graduate assistant athletic trainers
24. Coordinate GA & athletic training student high school clinical rotations
25. Recruitment and hiring of athletic training staff
26. Coordination of professional continuing education for athletic training staff
27. Design, administration, organization, and updating of UWA Athletic Training website

### **Head Athletic Trainer/Instructor**

1. Prevention, evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA varsity athletes
2. Evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA AT&SMC patients
3. Supervision of all athletic training services to UWA varsity athletes
4. Clinical supervision of football practice and competition
5. Clinical supervision of other sports practice and competition as needed
6. Teaching load of 10-14 hours in PEAT
7. Approval of UWA athlete prescriptions
8. Clinical instruction of athletic training students
9. Establish bid list for athletic training supplies
10. Academic advisor for PE/athletic training
11. Athletic training curriculum committee member
12. Athletic training consultant to UWA community and service area
13. Coordinate and administer UWA athletic physicals
14. Coverage of non-varsity athletic events as assigned
15. Coordinate staff and student standard first aid/CPR education & certification
16. Consult football coaches on inventory and equipment purchases
17. Coordinate the fitting of football equipment
18. Principal administration of UWA varsity athlete medical files, insurance information, & personal health information
19. Chief administrator to insurance claims with athletic secretary
20. Supervise the use of state vehicles for varsity athlete medical purposes
21. Coordinate final decisions on return of injured athletes to participation with team physician
22. NCAA & UWA drug testing site coordinator

### **Associate Athletic Trainer/Instructor/Clinical Coordinator**

1. Prevention, evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA varsity athletes
2. Evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA AT&SMC patients
3. Procurement, Maintenance, Inventory, and Return of all varsity athletic training supplies/SAT Supplies & Kits
4. Clinical supervision of football practice (pre-season) and competition
5. Clinical supervision of baseball practice and competition
6. Clinical supervision of softball practice and competition /Host Athletic Trainer for GSC Softball Tournament
7. Clinical supervision of other sports practice and competition as needed
8. Teaching load of 10-14 hours in PEAT
9. Approval of UWA athlete prescriptions
10. Clinical instruction of athletic training students
11. Coordinate athletic training student clinical rotations\mentorship programs
12. Academic advisor for athletic training
13. Sports Medicine Club faculty/staff advisor
14. Supervision of GSC courtesy sheets & related correspondence for all sports
15. Annual revision and updating of the UWA Policy & Procedure Manual for Athletic Trainers
16. Athletic training curriculum committee member
17. Athletic training consultant to UWA community and service area
18. Coordinate and administer area high school physicals
19. Coverage of secondary school/community college, etc. events as assigned
20. Coordinate final decisions on return of injured athletes to participation with team physician
21. Coordinator of sport summer camp athletic training services
22. Maintenance of athletic training bulletin board
23. Maintenance of athletic training alumni addresses, numbers, etc.
24. Coordinate drug education for varsity athletics

### **Assistant Athletic Trainer/Instructor**

1. Prevention, evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA varsity athletes
2. Evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA AT&SMC patients
3. Teaching load of 10-14 hours in PEAT
4. Academic advisor for physical education
5. Athletic training curriculum committee member
6. Clinical supervision of rodeo practice and competition
7. Clinical supervision of cheerleader practice
8. Clinical supervision of other sports practice and competition as needed
9. Clinical instruction of athletic training students
10. Coverage of secondary school/community college, etc. events as assigned

### **Adjunct Assistant Athletic Trainer/Clinical Instructor**

1. Clinical instruction of athletic training students
2. Clinical supervision of men's basketball practice and competition
3. Clinical supervision of women's basketball practice and competition
4. Clinical supervision of other sports practice and competition as needed
5. Prevention, evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA varsity athletes
6. Evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA AT&SMC patients

### **Graduate Assistant Athletic Trainer #1**

1. Prevention, evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA varsity athletes
2. Evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA AT&SMC patients
3. Clinical supervision of volleyball practice and competition
4. Clinical supervision of other sports practice and competition as needed
5. Clinical instruction of athletic training students
6. Athletic training consultant to UWA community and service area
7. Coverage of secondary school/community college, etc. events as assigned
8. Visitation to area high schools as assigned
9. Coordination of communication and follow-up with area high schools & allied health personnel as assigned

10. Assist with didactic and laboratory instruction of courses in Athletic Training Education Program as assigned
11. Supervision of computer Injury Tracking System

#### **Graduate Assistant Athletic Trainer #2**

1. Prevention, evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA varsity athletes
2. Evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA AT&SMC patients
3. Clinical supervision of sports practice and competition as needed
4. Clinical instruction of athletic training students
5. Athletic training consultant to UWA community and service area
6. Coverage of secondary school/community college, etc. events as assigned
7. Visitation to area high schools as assigned
8. Coordination of communication and follow-up with area high schools & allied health personnel as assigned
9. Assist with didactic and laboratory instruction of courses in Athletic Training Education Program as assigned
10. Updating athletic training students' curriculum binders/GPA
11. Maintenance of athletic training student clinical files
12. Maintenance of athletic training student academic files
13. Development & updating of prospective athletic training student list & addresses, numbers, etc

#### **Graduate Assistant Athletic Trainer #3**

1. Prevention, evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA varsity athletes
2. Evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA AT&SMC patients
3. Clinical supervision of sports practice and competition as needed
4. Clinical instruction of athletic training students
5. Athletic training consultant to UWA community and service area
6. Coverage of secondary school/community college, etc. events as assigned
7. Visitation to area high schools as assigned
8. Coordination of communication and follow-up with area high schools & allied health personnel as assigned
9. Assist with didactic and laboratory instruction of courses in Athletic Training Education Program as assigned
10. Inventory, issue, and organization of course text books
11. Inventory, issue, and organization of all athletic training clothing and supplies.
12. Annual inventory of all UWA athletic training equipment
13. Maintenance, revisions and inventory of rehabilitation protocols

#### **Graduate Assistant Athletic Trainer #4**

1. Prevention, evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA varsity athletes
2. Evaluation, treatment, referral & rehabilitation of injuries/illnesses to UWA AT&SMC patients
3. Clinical supervision of sports practice and competition as needed
4. Clinical instruction of athletic training students
5. Athletic training consultant to UWA community and service area
6. Coverage of secondary school/community college, etc. events as assigned
7. Visitation to area high schools as assigned
8. Coordination of communication and follow-up with area high schools & allied health personnel as assigned
9. Assist with didactic and laboratory instruction of courses in Athletic Training Education Program as assigned
10. Maintenance & return of all x-rays
11. Supervision & maintenance of vendor files
12. Supervision and maintenance of private patient files
13. Installation and maintenance of educational software on athletic training computers

### **Professional Demeanor Policy**

1. The use of illegal drugs will not be tolerated: anyone caught on or away from campus using or selling drugs or drug paraphernalia will be subject to removal from the Athletic Training Education Program as ruled on by The University Disciplinary Committee. All athletic training students are subject to drug testing in the same manner as UWA varsity athletes. All athletic training students are expected to adhere to the UWA Athletic Department Drug Policy and are subject to disciplinary actions as detailed.
2. Any actions committed on or away from campus that are illegal and punishable by any law where the student is acting in a capacity, or representing the University in any capacity that puts the Athletic Training Education Program or The University in a poor public position may lead to probation, suspension, or termination of enrollment in the Athletic Training Education Program as ruled on by The University Disciplinary Committee.
3. Failure to meet or maintain the academic requirements of the Athletic Training Education Program will result in probation, suspension, or termination of enrollment in the program. For possible reinstatement, the student must go through the application process again as stated in the University Catalogue.
4. Any action deemed as, construed as, or pertaining to sexual harassment as defined in The University Student Handbook by any student in the Athletic Training Education Program will result in referral to The University Disciplinary Committee for appropriate action and possible removal from the Athletic Training Education Program.
5. All athletic training students are expected to completely follow the policies and procedures of the UWA motor pool.
6. Parking at Homer Field House is illegal for any student except in the areas denoted as student parking. Illegal parking will be subject to citations by The University Campus Police.
7. All students wishing to file a grievance must do so in writing to the Director of Athletic Training & Sports Medicine. A meeting will be arranged with all parties involved to attempt to resolve the grievance. If it can not be resolved, it will be referred to other administrative personnel within The University.
8. Failure to comply with any of the Policies and Procedures of the Athletic Training Education Program can result in punishment, suspension, or termination of enrollment in the Program. The student will be informed in writing of disciplinary action and will be given due process. If the offending action is severe enough to warrant suspension or termination, the student will be referred to The University Disciplinary Committee.

### **Clinical Assignment Policy**

1. Athletic training students will be assigned to clinical rotations based upon a variety of factors which include but are not limited to the following: previous experience and clinical rotations, clinical experiences needed prior to anticipated program completion, indicated professional practice preferences, clinical proficiency and competency, professional responsibility and dependability, extracurricular activities, part-time employment, academic performance, class schedules, and other factors as felt to be pertinent by the athletic training education program faculty.
2. All students must report to any and all assigned clinical assignments on time. Students must call supervising ATC in advance if they will miss or be late to an assigned duty. If unable to cover a practice, game, etc. or assigned sport, advance notice must be given to the staff and it is the student's responsibility to find another athletic training student (in the professional component of the Athletic Training Education Program) to work in their place. Failure to report to duties and unexcused absences will lead to probation, suspension, or termination from the Athletic Training Education Program.
3. Acceptance of clinical assignments involving UWA varsity sport teams means that we can depend on the student to be present for all assigned practices, events, games, and treatment/rehabilitation, unless an emergency arises.
4. Only students accepted into the professional component of the Athletic Training Education Program may attend away games, work on our sidelines, and/or substitute for practice coverage.
5. During preseason and/or postseason varsity camps, athletic training students are expected to abide completely by all rules imposed on the respective team. These include appearance, housing, visitation, meals, alcohol usage, and curfew.
6. Athletic training students are to abide by the respective rules of their assigned varsity sport when traveling on a road trip with their assigned varsity sport.
7. When in the athletic training room, regardless of whether on duty or not, be prepared to be asked to provide treatments or perform tasks as deemed necessary by the athletic training staff.
8. While in the athletic training room, or covering UWA varsity practices, the use of profanity, horse play, or actions unacceptable to the allied health care professional, will not be tolerated.
9. All rules of the NCAA, NIRA, and GSC governing varsity practices, events, or competitions are to be followed by the athletic training students.

10. All students, graduate assistants, and staff are required to adhere to the Health and Safety Policy of The University of West Alabama Athletic Training Education Program.
11. All students, graduate assistants, and staff are required to read and sign a HBV vaccination waiver prior to being allowed to work within the Athletic Training Education Program.
12. No student is allowed to use a modality without specific instructions from a clinical instructor and the student having demonstrated competency with the modality.
13. Students are required to be Professional Rescuer First Aid & CPR certified before admission into the program and must gain re-certification each year.
14. OSHA guidelines are to be followed very closely. All students stating they have read the guidelines and universal precautions and understand them and will adhere to them must sign a consent form. Also, a training session on the OSHA guidelines and universal precautions is required each year of all students.
15. Appropriate emergency procedures are discussed and demonstrated with each new student. Each student must take part in a yearly in-service on the appropriate techniques of emergency procedures.
16. All emergency and potentially important phone numbers are posted at specific locations should an emergency situation arise. All members of the Athletic Training Education Program will be informed about these numbers and where they are located.

### **Fair Practice Work Policy**

Athletic Training Students (ATS) are not to serve in the capacity of a Certified Athletic Trainer. Athletic training students are not to act in the capacity of managers, secretarial support staff, or coaches, but are expected to work closely with their supervising ACI or ATC in their respective roles. Requests to perform tasks other than athletic training related duties are not to compromise their educational experience.

Once a student has successfully completed and been evaluated on an athletic training competency and/or clinical proficiency skill, he/she may begin to utilize these skills on a daily basis, under the supervision of the clinical instructor, during the field experience.

We expect an athletic training student to be present and active in all academic and clinical roles as part of his/her overall education; failure to do so results in a student compromising his/her own educational experience. Students will be allowed to hold part time jobs outside of the ATEP *only if* the job does not interfere in any way with the assigned responsibilities as determined by the ATEP staff. Clinical education and field experiences take place primarily from 6:30 a.m. to 8:00 a.m., approximately 1:00 p.m. to 6:00 p.m., or 6:00 p.m. to 9:30 p.m., depending upon the clinical assignment. On occasion these may meet earlier in the morning, depending on the practice schedules of the athletic teams that are included as part of the field experience. Students desiring to secure a part time employment situation must take this into account when scheduling their time. Although the program and staff understand students look for part time employment to assist with financing their education, the student *will not* be released from clinical education experiences and must meet all requirements of the ATEP as a primary commitment.

All students desiring to obtain part-time employment during the fall and spring semesters must submit a completed *Outside Employment Notification Form* to the Program Director for approval in advance of beginning the employment.

Any enrolled program student who violates this policy (at any time during his/her enrollment) without expressed written consent from the ATEP Program Director will be reprimanded according to the following guidelines:

- The *Class Attendance Policy* and *Clinical Experience Attendance Policy* will be in full effect to address most instances occurring as a result of work policy violations.
- First offense: the student will receive written and verbal warning of failure to follow Policy and Procedures. This warning will become part of the ATS's permanent portfolio.
- Second Offense: Verbal and written notification will be documented in student portfolio AND the student will be suspended from clinical experiences for 1 full week. At no time (beyond satisfying academic requirements) will the student be allowed to participate in any athletic training events or clinical experiences. If the student (through assignment with an ACI) is primarily working / traveling with a specific sports team, the ACI may select another ATS to stand in for the term of the suspension. (NOTE: in satisfying academic requirements during the term of suspension, a student will be removed from primary sport(s) and fulfill all hours within the Athletic Training Facility at hours approved by the ATEP staff)
- Third Offense: Verbal and Written notification AND the student will be suspended from athletic training events and clinical experiences (not to compromise academic requirements – see above) for a term in excessive of 1 full month and at the discretion of the program director. Other measures may be imposed at the discretion of the Athletic Training committee.
- Fourth Offense: Verbal and written notification and recommendation for removal from the ATEP.

Students are not paid for their participation in clinical and field experiences and are encouraged to review UWA student employment guidelines. Some first responders may receive athletic scholarships, college work-study, or other forms of compensation from the athletic department.

### **Travel Policy**

As part of the ATEP experience, ATS will be provided the opportunity to travel with various athletic teams throughout the course of their educational experience. Travel can only be counted toward your competency in the ATEP if accompanied by an ACI/ ATC. If you are traveling without direct supervision of your ACI/ATC, you will be considered a first responder. Refer to First Responder Policy and Responsibilities. It is your responsibility to review with your ACI/ATC the policies and procedures for travel. Some areas to review may include:

- Emergency Care Policy
- Expected Conduct
- Record Keeping Policies
- Kit (supplies)
- Emergency telephone numbers of host team and facility and contact information of UWA ATCs
- The first responder should always carry the emergency contact and insurance information on all of the athletes involved with the sport.

Remember you are representing not only yourself, but also your team, school, and ATEP, so conduct yourself accordingly. You need to understand your limitations as first responders. DO NOT put yourself in a position that may jeopardize you legally and/or ethically. Athletic training students must follow the respective team rules and guidelines when traveling with athletic teams. Failure to comply will result in reassignment to a different clinical experience and possibly probation/suspension status within the Athletic Training Education Program.

Travel without an ACI is on a voluntary basis and with an understanding of the tasks that they are allowed to perform. Volunteers are allowed to serve as first responders at events in which the host institution provides an ATC on site to assist the ATS should a situation arise that is outside the limitations of a first responder. Additionally, the head coach of the sport has the ultimate responsibility of making decisions regarding the health status of the athletes under his/her authority in the event that an ATC employed by UWA is not present.

UWA ATCs are allowed to perform the following as a First Responder when traveling with a team without the supervision of an ACI/ATC:

- Preventative taping, wrapping, and padding
- Preventative stretching techniques
- Primary evaluation of acute injuries to determine need for referral or activation of Emergency Medical Services
- Immediate care of acute injuries following the Rest, Ice, Compression, and Elevation principles.
- Application of ice packs to individuals free of contraindications
- Wound care utilizing OSHA procedures as outlined in annual workshops and the Policy and Procedure manual for UWA Athletic Trainers
- Emergency splinting of injured extremity
- Documentation of the above tasks performed

UWA ATCs are not to perform the following tasks as a First Responder when traveling with a team without the supervision of an ACI/ATC:

- Evaluation of acute injuries to determine health status
- Application of electrical, acoustical, and mechanical therapeutic modalities
- Prescription of therapeutic exercise
- Decision to return injured athlete to activity

### **Protocol for Out of Town Events**

1. Upon arrival at an event locate the host institution's medical personnel to discuss availability of medical care.
2. Consult the host certified athletic trainer in the event of an injury.
3. If the injured student athlete is referred to a hospital or a clinic, accompany the student athlete and ensure that all necessary information is available.
4. Call the Head Athletic Trainer or the UWA ATC responsible for the team and inform them of the athlete's status.
5. When traveling, pack all pertinent insurance documents and emergency phone numbers for parent notification.
6. Provide the head coach with any and all information pertinent to his/her decision-making regarding the health status of the athletes under his/her authority.

**Unsupervised Athletic Training Student Travel**

University of West Alabama (UWA) Athletic Training Students (ATS) are not required to travel with UWA varsity sport teams unless a UWA Approved Clinical Instructor (ACI) is also present on the trip. Athletic Training Students are encouraged to travel to increase their exposure to a variety of injuries, illnesses, facilities, personnel, etc. In the circumstance that a UWA ACI is unable to travel, ATSs will be allowed to travel unsupervised on a volunteer basis. While this travel is on a voluntary basis, volunteers are expected to abide by all policies and procedures of the ATEP. Once an ATS volunteers to travel, the ATS is fully expected to responsibly handle the assignment just as the ATS is expected to responsibly handle other assignments on and off campus with and without ACI supervision.

ATSs allowed to travel unsupervised on a volunteer basis must have an understanding of the tasks that they are allowed to perform. Volunteers allowed to travel are encouraged to utilize the assistance of the host institution’s ATC on site to assist the ATS should a situation arise that is outside the following guidelines. Additionally, the head coach of the sport has the ultimate responsibility of making decisions regarding the health status of the athletes under his/her authority in the event that an ATC employed by UWA is not present.

UWA ATSs are allowed to perform the following as a First Responder when traveling with a team without the supervision of an ACI/ATC:

- Preventative taping, wrapping, and padding
- Preventative stretching techniques
- Primary evaluation of acute injuries to determine need for referral or activation of Emergency Medical Services
- Immediate care of acute injuries following the Rest, Ice, Compression, and Elevation principles.
- Application of ice packs to individuals free of contraindications
- Wound care utilizing OSHA procedures as outlined in annual workshops and the Policy and Procedure manual for UWA Athletic Trainers
- Emergency splinting of injured extremity
- Documentation of the above tasks performed

UWA ATSs are not to perform the following tasks as a First Responder when traveling with a team without the supervision of an ACI/ATC:

- Evaluation of acute injuries to determine health status
- Application of electrical, acoustical, and mechanical therapeutic modalities
- Prescription of therapeutic exercise
- Decision to return injured athlete to activity

Student must initial and date below for each event that they choose to travel to unsupervised.

I \_\_\_\_\_, have volunteered and been instructed on proper procedures for  
Printed name of ATS  
 traveling without the supervision of an UWA ACI.

Date	Sport	ATS Signature	ACI Approval	Date	Sport	ATS Signature	ACI Approval



## **First Responder Policy and Responsibilities**

Athletic Training Students (ATs) will be provided clinical assignments with UWA sponsored sports and athletic activities under the direct supervision of a staff ACI or ATC. Inevitably, there will be occasions when an ATC may not be present. In the event of this occurrence the athletic training student will act as a first responder until an ATC is present. For a student to act as a first responder the following criteria must be met by the athletic training student:

- Must be currently certified in American Red Cross or American Heart Standard First Aid, CPR, & AED training. (Having an EMT or higher license also meets this qualification)
- Must be enrolled in the professional component of the athletic training program.
- Must be competent in the UWA emergency procedures outlined in the Policy & Procedures Manual for Athletic Trainers as verified by an ACI.
- Must have successfully demonstrated the ability to perform the skills necessary to stabilize an athlete in an emergency situation by completing the skill check-offs in AH 101 & AH 102.
- Must be familiar with the location of the emergency equipment, the emergency contact numbers, and the nearest phone (land or cellular).
- Must have documented attendance in OSHA training.
- Must be competent in the use of Personal Protective Equipment, such as: latex or vinyl gloves and breathing masks.

The medical director or team physicians are the ultimate medical authority on any injury or injury situation when present. When absent the authority falls to the staff ACI/ATC. The staff ATC/ACI's are the ultimate authority in the athletic training room or in situations occurring at the practice/competition site (refer to the chain of command in the Policy & Procedures Manual for Athletic Trainers). All UWA coaches are certified in Standard First and CPR or higher. The head coach of the sport has the ultimate responsibility of making decisions regarding the health status of the athletes under his/her authority in the event that an ATC/ACI employed by UWA is not present.

When a staff ACI or ATC is not present the student will act according to the following set of guidelines that a first responder may do on site:

- Follow the basic principles of standard first aid (Primary Survey followed by a Secondary Survey).
- Determine if the injury is a life-threatening situation by using the emergency action principles of standard first aid (check for alertness/responsiveness, breathing, & circulation), if it is determined that a life-threatening emergency exists, enact the EMS system and follow the UWA emergency action plan for the respective facility. Realize that the head coach of the sport, who has ultimate responsibility for the athletes under his/her authority, may opt to manage the emergency in a different manner. All such emergencies should be reported to the supervising ACI or ATC as soon as possible regardless of any actions taken or not taken by the head coach.
- If the injury/illness is determined to not be an emergency, the first responder should perform a secondary survey to the best of their ability and refer the injured athlete to the supervising ACI or ATC as soon as possible. Reports should be verbal and in written form (documented varsity athlete injury form). Realize that the head coach of the sport, who has ultimate responsibility for the athletes under his/her authority, may opt to manage the non-emergency in a different manner. Regardless of any actions taken or not taken by the head coach, the first responder should still report the injury/illness to the supervising ACI or ATC as soon as possible. In dealing with questions concerning the status of injured athletes, refer to the Policy & Procedures Manual for Athletic Trainers for injury reporting protocol.
- The first responder should always carry the emergency and insurance information on all of the athletes involved with the sport.
- Referral to the local team physicians (usually during regular clinic hours) can also be performed in the absence of the supervising ACI or ATC. These referrals should be reported to the supervising ACI or ATC as soon as possible.
- Always follow the physician's directions explicitly.
- Referral of an athlete to the local team physician during student health service hours can be made at any time, but should always be reported to the supervising ACI or ATC as soon as possible.
- In the event of a sudden illness, (such as: diabetic, anaphylactic, heat, cold, or poisoning emergencies); the first responder can act in accordance with the emergency plan after enacting the EMS system. The attending first responder can also help with administering prescribed bronchial dilating inhalers or epinephrine pens after completing the AH 202 course.
- The first responder can also render immediate management techniques, such as: spine boarding, fitting and use of crutches, and manual conveyance techniques after completing the AH 101 and AH 102 courses.
- ATs/First responders can also perform the following without the supervision of an ATC or ACI.

- Preventative taping, wrapping, and padding
- Preventative stretching techniques
- Primary evaluation of acute injuries to determine need for referral or activation of Emergency Medical Services
- Immediate care of acute injuries following the Rest, Ice, Compression, and Elevation principles.
- Application of ice packs to individuals free of contraindications
- Wound care utilizing OSHA procedures as outlined in annual workshops and the Policy and Procedure manual for UWA Athletic Trainers
- Emergency splinting of injured extremity
- Documentation of the above tasks performed
- ATS/First responders may not perform the following without the supervision of an ATC or ACI.
  - Evaluation of acute injuries to determine health status
  - Application of electrical, acoustical, and mechanical therapeutic modalities
  - Prescription of therapeutic exercise
  - Decision to return injured athlete to activity

### General/Confidentiality

In dealing with people, common sense must be your guideline. Always stay within the limits of your position and knowledge. Do not discuss any athletic training room activities (injuries, treatments, doctor's reports, etc.) with others. 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.** These guidelines must be adhered to strictly.

I \_\_\_\_\_, have been instructed on proper procedures for acting without the supervision of a UWA ATC or ACI and understand my responsibilities and limitations as a first responder.

Signature	Date
Witness signature	Date

### Class Attendance policy

The Athletic Training Education Program faculty are responsible for the design and instruction of the academic courses contained within the curriculum. The faculty feel that these courses, combined with clinical education and experience, are vital to the overall success of students in the Athletic Training Education Program. As such, the faculty feel that students enrolled in the ATEP should attend 100% of all class meetings. Therefore all athletic training students will be required to attend and be actively involved in all ATEP 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. Roll will be taken at the beginning of classes and faculty are not obligated to amend the roll for students arriving after that time. Furthermore, 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.)

Athletic training students may occasionally be absent from courses while engaging in another aspect of athletic training education (traveling with a team, taking athletic to physician, etc.) 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). Habitual tardiness or absence from academic courses will be addressed by the following guidelines:

- Exceeding more than three absences: The final letter grade earned through course assignments and examinations will automatically be lowered by one letter grade and recorded with the Registrar.
- Exceeding more than six absences: The final letter grade earned through course assignments and examinations will automatically be lowered by two letter grades and recorded with the Registrar.

- Exceeding more than nine absences: The final letter grade earned through course assignments and examinations will automatically be lowered by three letter grades and recorded with the Registrar.
- In all cases a record of this negligence will be placed in the student's permanent folder which will factor in to consideration for continuance in the program.

*(NOTE: as the ATEP staff are not the primary instructors in other courses (i.e. English, Math, etc), we cannot hold attendance to these classes under these guidelines. Although we insist on student being responsible for their own education, absences from these courses will not be applied to this policy. As always, UWA Academic Attendance policies will apply and shall be followed.)*

### **Clinical Experience Attendance Policy**

The clinical experience portion of the athletic training education program is where 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 rotations (both on and off campus) and assignment to an ACI/ATC and are a required portion of the student's educational experience. A student enrolled in the ATEP is required to attend and actively participate in **all** scheduled/assigned clinical experiences. Therefore all athletic training students will be required to attend and be actively involved in all ATEP clinical experiences as assigned. Additionally, being "tardy" for any clinical assignment will be considered an absence under the terms of this policy. Students are expected to be ready to initiate the clinical assignment at the designated time. Those students not ready, including appropriate dress and equipment, to initiate the clinical assignment as described will be considered tardy. Roll will be taken at the clinical assignment and clinical instructors are not obligated to amend the roll for students arriving after that time. Furthermore, faculty may choose to refuse admittance to anyone who arrives late to the clinical assignment (dismiss 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 supervising ACI/ATC allowed to excuse a student from a clinical experience. Those requests for excused absences (including dates and reason) must be submitted in writing to the Clinical Coordinator one week prior to the absence. These documents will be kept on file in the ATS's portfolio. Failure to comply with this procedure will result in the absence being treated as unexcused/unapproved.

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 student's responsibility to communicate with all appropriate instructors and staff when these instances do arise. Again, the student should make every effort in advance of the absence to follow this notification procedure. Only extreme circumstances will be considered by the Program Director.

Athletic training students may occasionally be absent from clinical assignments while engaging in another aspect of athletic training education (traveling with a team, taking athletic to physician, etc.) In these instances students are encouraged to provide advance notice to all their supervising ACI/ATCs. Habitual tardiness or absence from clinical assignments will be addressed by the following guidelines:

Records of absences and tardies will become a part of the student's permanent record. Any student who is tardy or absent from assigned clinical experiences will be reprimanded by the following guidelines:

- Second Absence: the student will be assigned an additional one week rotation in morning treatment/rehabilitation.
- Third Absence: the student will be suspended from on – campus clinical experiences for 1 calendar week. At no time will the student be allowed to participate in any athletic training events or clinical experiences on campus during this week.
- Fourth Absence: the student will be removed from primary sport(s) assignments and fulfill all clinical experience hours within the Athletic Training Facility at hours approved by the ATEP staff.
- Fifth Absence: the student will be removed from all on-campus athletic training events and clinical experiences for the remainder of the semester. Other measures including suspension from the ATEP may be imposed at the discretion of the Program Director in consultation with the Athletic Training faculty.
- In all cases a record of this negligence will be placed in the student's permanent folder which will factor in to consideration for continuance in the program.

## **ATHLETIC TRAINING STUDENT OBLIGATIONS**

Athletic training students are obliged to follow guidelines set down by this department relating to the performance of their tasks. Athletic training students are expected to follow these parameters as closely as possible. The obligations are as follows:

### **Availability**

- Arrive at practice at least 30 minutes or more as indicated before the beginning of practice and remain until all post-practice activity is complete or until dismissed.
- Be in the athletic training room to assist with morning and night treatments during your scheduled hours.
- Schedule all personal appointments away from athletic training room and clinical hours.
- Personal business should not be conducted in the athletic training room. This can and will hamper the function of the staff or patient/athlete care.
- When unable to make an assigned duty, call one of the staff athletic trainers or your group leader in advance where arrangements can be made to cover your absence.

### **Punctuality**

- Students should be where assigned on time or early. If anything, be five minutes early.
- Be ready to work when entering the facility. Look for something to do before sitting and talking.
- Have your team ready to go on time. If unable to talk and tape simultaneously, don't talk.
- When anticipating arriving late, call immediately.
- The UWA AT&SMC rule to punctuality: to be early is to be on time, to be on time is to be late, and to be late is unforgivable.

### **Academics**

- Athletic training students are responsible for providing the staff athletic trainers with a schedule of classes each quarter as soon as registration is completed (also report any changes in schedule as soon as possible).
- Plan to graduate on time.
- Athletic training students are to remain in good academic standing (2.0 in all basics and 3.0 in all athletic training courses).
- Athletic training students who fall behind in their academics are subject to suspension and/or dismissal from the athletic training curriculum.

### **Clinical Hours Verification**

- Athletic training students are required to keep track of their clinical hours for course requirements as well as for licensure in some states.
- Hours are to be recorded daily and signed by the supervising athletic trainer on the yellow verification sheets.
- Verification sheets are to be turned in each month for placement in your permanent file.
- Students will record one hour for each hour they are in the athletic training room working or engaged in athletic training activity. Partial hours are recorded to the nearest ¼ hour. When rounding to the nearest ¼ hour, you must work 8 minutes or more of the ¼ hour to round up. If you work less than 8 minutes of the ¼ hour, you should round back.
- Students cannot record any hours they are on a road trip unless a certified athletic trainer accompanies them. In this situation, 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).
- Hours accrued through any outside athletic training activity should be agreed upon by discussion with staff athletic trainers and verified by the supervising athletic trainer.
- The supervising staff athletic trainer is responsible for checking the recorded hours on each form and approving it with his/her signature.
- Hours spent at high schools do not count unless a certified athletic trainer directly supervises you.

### **Travel**

- Be ready to go if requested by a staff athletic trainer to accompany him/her on a trip.
- At least one of the athletic training students assigned to varsity sports teams are usually expected to travel with the team unless there are significant extenuating circumstances.

- If one of the athletic training students cannot travel as assigned, five days notice must be given so that a substitute can be found or other arrangements can be made.
- Athletic training students are required to adhere to all travel regulations, which apply to the team.
- Upon arrival, the student athletic should introduce themselves to the host athletic trainer, be sure of arrangements, make any special requests in advance of the event, and firm up emergency procedures.
- In any travel situation be early for the departure time. Anyone not ready will be left behind.
- When traveling expense is incurred for meals, make sure receipts are obtained. Athletic trainers failing to obtain proper receipts will not be reimbursed.

### **Professional Appearance Policy**

As a member of the allied health professional staff at The University of West Alabama, students are required to maintain a professional and appropriate appearance. This is a necessary measure to present a professional image to our UWA faculty, staff, and students and well as maintaining a positive public image for the Athletic Training program and profession.

It is the student's responsibility to be in appropriate dress at all times when working as a member of the UWA athletic training staff. *At no time will a student's absence or tardy report for athletic training duties be excused for a student being dismissed for inappropriate dress.*

1. A student working in the capacity of an ATS must wear UWA Athletic Training Issue Apparel, UWA Sport Medicine Club apparel or apparel for a UWA Varsity Athletic team (shirts/pullovers).
2. UWA Athletic Training Apparel may only be worn when the student is working as an ATS or as a first responder for one of our sports.
3. Shirts will be tucked in neatly at all times when performing duties as an ATS or when in the athletic training room for any reason (**no exceptions**).
4. 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 excess amounts of holes, etc).
5. Shorts/pants: Shorts must all be of appropriate length (standing straight up, tips of fingers must not pass hem of the shorts) and clean (no cutoffs, without rips, or holes). Pants must be neat, of appropriate length, and style (jeans, wind-pants, khakis)
6. At all times, shoes worn in the athletic training room must be closed toed and closed backed (no sandals or flops will be worn).
7. All shirts must be of length to be able to be tucked into the shorts or pants; they must also have sleeves that cover over both shoulders.
8. You may wear nice dress clothing, as long as it meets the above criteria other than having UWA on it, when working in the ATR or on assignment at practices.
9. Game dress will be uniform (UWA athletic training polo shirt, khaki shorts/ khaki pants/ wind pants). The only variations to this game dress uniform will be in instances where the sport's staff requests the ATS to "dress up" or other considerations are made by the ATSMC staff (all variations must be approved prior to competition).

In order to maintain the professional appearance of the students of the athletic training program, the following areas will also be considered part of the code.

1. Earrings on male students are unacceptable. Females may wear earrings if appropriate (may not be long or dangling). Visible body piercings will not be allowed.
2. Hairstyles should be neat and maintained. For males, hair may not extend below the shirt collar and facial hair must be kept neatly trimmed. Facial hair should be kept to a minimum or neatly trimmed if having a moustache or beard. Make it a point to be cleanly shaven (no stubble), especially at athletic events, physicals, or on doctor's visits. For females with long hair, it must be pulled back/put up in a neat and functional fashion.
3. Jewelry (necklaces, bracelets, watches, rings, etc) must not interfere with the proper delivery of patient care.
4. Hats may be worn "front-wards" and must be neat and clean. They will not display vulgar, obscene/offensive images nor display logos of other universities. Discretion is left in the hands of UWA staff as to what may be inappropriate.
5. Nothing considered, as a "fad" will be acceptable.

Students admitted to the program will be provided with two (2) UWA athletic training staff T-shirts and one (1) UWA athletic training polo. Additional clothing is available for purchase by the student at a reduced cost. Students applying to

the program or those in the practicum classes must also wear appropriate UWA athletic training apparel, which is available for purchase or at the UWA Bookstore.

Remember you represent the athletic training education program and you should never do anything to embarrass yourself, your fellow students, the program or the university. It is considered inappropriate to wear athletic training clothing to social events (parties, clubs, etc) and events not related to the program's mission and goals.

***The ultimate decision on the attire or appearance being appropriate for the ATS to carry out clinical assignments is at the discretion of the ACI supervising the student at the respective venue. In the event of a disagreement between the ACI and the ATS, the ultimate decision will be deferred to the Head Athletic Trainer, Associate Athletic Trainer, and/or the Program Director.***

### **Athletic Participation**

- Athletic training students are allowed to participate in most varsity sports with the understanding that they must attain hour requirements around their athletic requirements.
- Athletic training students must get the approval of the Director of Athletic Training before making plans to participate in varsity sports.
- Athletic training students will not be excused from athletic training room duties, practices, or treatments to participate in intramural practices or games.

### **Competency**

- All students are required to exhibit competency as outlined by NATA.
- Successful completion of the Practicum Competency Check-offs is required before admittance into the program.
- The staff will perform evaluations on the athletic training students annually.
- Competency evaluations will be written and oral.

### **Record Keeping Policy**

- All varsity athletes and all other patients entering the athletic training room must sign in on the appropriate clipboard *each and every* time they enter the athletic training room for evaluation, treatment, rehabilitation or other injury/illness care.
- All varsity athletes with injury or illness must complete a Varsity Injury Form. The form must be completed and signed by the attending athletic training student and the attending staff athletic trainer.
- All high school athletes and private patients must fill out a Private Patient Form every time they come in for initial evaluation or re-evaluation follow-up. This form must be filled out and returned to the graduate assistant responsible for the school or the staff member who evaluated them. All Private Patient Forms are returned to the staff member who evaluates them or if the student performs the evaluation returned signed to Director of Athletic Training
- All athletes and patients reporting for treatment/rehabilitation must be logged into the treatment logbook.
- All medicines/drugs issued to varsity athletes or anyone else must be logged into the drug logbook.
- After each designated treatment/rehabilitation period is completed, all information from the logbooks will be entered into the computer on Sportsware 2000.
- All athletes or private patients evaluated on campus by the team physicians from Alabama Sports Medicine & Orthopaedic Center must be logged in the black, physician visit logbook.
- All athletes reporting for long-term rehabilitation for an injury must be logged into the personal rehabilitation logbook.
- When running copies for the athletic training staff, obtain paper from the athletic training staff.

### **Treatments**

- All treatments rendered in the athletic training room are posted on the daily treatment log.
- Athletic training students should use only those modalities with which they are familiar and competent. Modalities should be used under the direct supervision of a staff athletic trainer.
- Standard treatment practices should be followed, do not vary from standard practices without discussion and approval of a staff member.
- If there is any doubt as to how to proceed with treatment always be as conservative as possible.
- This is not a self-service organization, an athlete must be treated by an athletic trainer; athletes are not permitted to initiate their own treatments.
- All athletic trainers should supervise the treatments of their athletes/patients.

- Always briefly evaluate the athletes' progress before and after each treatment. Don't get caught up in a routine. Daily re-evaluation of the athlete is important to their treatment/rehabilitation.

## Rehabilitation

Rehabilitation is required for all injured athletes. Never return an athlete to competition or practice that has not rehabilitated and exhibited satisfactory functional capacity. In practically every case, all injured athletes should begin a rehabilitation program on the first day of injury. The team physicians, physical therapists, and staff athletic trainers design an athlete's rehabilitation program. There are certain standards of rehabilitation designed for specific injuries, which should be followed by the athletic training students unless exceptions are discussed with the staff athletic trainer or team physician. Do not experiment without prior approval.

The rehabilitation session is recorded on the daily treatment log, the personal rehabilitation log and on Sportsware 2000. Specific comments are made on the personal rehabilitation log, as are any changes in the program or the athlete's status.

It is vital that rehabilitation progress be monitored exactly. Take measurements often and accurately, record your findings and consult with others on the staff. Never proceed without a firm evaluation of the previous step.

## Medication

All members of the athletic training staff are directed by the team physician to **administer** only over-the-counter (OTC) medication. This includes Tylenol, Bufferin, Sin-U-Tab, Ascriptin, Chloraseptic, Mylanta, Maalox, Alka-Seltzer +, Emetrol, etc. **The University purchases these medications for use only by our varsity athletes. All OTC medications that are administered to any athlete at UWA should be logged appropriately in the drug log book located in the medicine cabinet.**

Never administer medication without first determining the need of the athlete, any allergies, and if any other medication is being taken. If any question regarding the use or mixing of medication arises, consult the PDR in the athletic training room or the team physician. Also, no more than a one dose supply should be administered at any time. All drugs administered should be documented in the drug logbook.

Any medications other than the OTC's are to be dispensed or administered by the team physicians or pharmacists. Prescription medications are to be handled only by the team physicians or pharmacists and the athlete to whom they are prescribed. Any question regarding medications should be directed to the team physicians, staff athletic trainers, pharmacists, or the PDR. **Do not guess.**

All athletes who require prescription medicine are to obtain a prescription signed by the team physician. He will write the sport of the athlete on the prescription. The Head Athletic Trainer, Associate Athletic Trainer, or Director of Athletic Training & Sports Medicine must then sign their approval on the prescription. This prescription is to be filled at The Drug Store only. The prescription will be charged to the athletic department only if the team physician has written the sport on it and if the staff athletic trainer approves it in writing.

## Staff Meetings

The athletic training staff will usually meet at a time to be designated once a month for the purpose of discussing upcoming activities, games, duties, or problems. All athletic training students are expected to attend and be prepared to take notes and answer pertinent questions. Whenever possible, questions, ideas, or problems concerning the staff should be aired at meetings. Unscheduled staff meetings may be called by the staff athletic trainers and should be attended like scheduled meetings. All meetings will be posted at least 24 hours in advance.

## 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, they should first look to the staff athletic trainer with direct responsibility for the athletic training student. Each party will register their complaint separately so that the moderator may hear both sides and then meet with the staff athletic trainer to discuss resolutions.

The same procedure applies for 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 UWA Grievance Policy, as published in the Tiger Paw Student Handbook, will ultimately be followed for grievances that are not easily resolved.

## 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. This staff should do everything in its power to make sure an injured opponent is treated with the best of medical care, regardless of the score. Hopefully, if our guests are treated properly here, they will reciprocate the same attitude and availability when we visit them. Prior to the season, the Associate Athletic Trainer along with the athletic training students assigned to each sport should send a letter containing a GSC courtesy sheet to the opposing teams. It should contain a list of materials provided and available while they are here for the game, as well as a courtesy sheet outlining the medical staff available. The supplies provided for each sport are outlined in the Handbook of the Gulf South Conference.

## Travel Expense

When traveling out of town on University business, keep cash receipts of all expenses, such as fuel, meals, hotel, parking, etc. Upon return, fill out a travel voucher and attach all receipts. If you lose or fail to obtain your receipts, then you will not be reimbursed. After completing the travel voucher, submit it along with the receipts to the Head Athletic Trainer for approval. Travel expenses should be kept to a minimum and meals should be eaten at the University cafeteria whenever possible. As much as possible, attempt to keep the price of meals under \$5.00 per meal.

## Restocking and Inventory

The field set-up group will do the restocking of travel kits and trunks during the post-practice period after each use for that week. Athletic training students assigned a specific kit for a specific sport are responsible for checking and/or restocking their kits before going to the next trip, practice, or game. The stocking of these kits and trunks will be governed by the needs of the sport and the Head Athletic Trainer. The issuing of supplies for these kits will be provided by the athletic training student assigned to be in charge of cage #2. A supply requisition must be filled out 24 hours in advance and approved by a staff athletic trainer and returned to the student in charge of cage #2.

## Keys

- Keys will only be issued if there is a need determined by the staff athletic trainers.
- Only the keys necessary for performance of assigned duties will be issued.
- Any key having been issued that is no longer needed for assigned duties is to be returned immediately.
- **Keys are not to be loaned to anyone** including other members of the staff, roommates, or personal friends.
- Unauthorized personnel in any facility should never be left unattended especially the athletic training, locker, and equipment rooms.
- Athletic trainers are responsible for their own keys and the places to which they allow entrance.
- Keys are for use at work. **DO NOT** leave them at home or in a vehicle.
- Keys should be kept on your person at all times while at work, not lying around to be stolen.
- Keys that are lost or stolen should be immediately reported to the Director of Athletic Training & Sports Medicine, Campus Police, and Key Control. The fee may be up to \$25.00 for each key.

## Book policy

- Athletic training students accepted into the professional component of the Athletic Training Education Program can expect to receive textbooks as detailed below.
- No athletic training student will receive books until accepted into the professional component of the Athletic Training Education Program.
- No student will receive books the following semester enrolled if they receive a “D” or “F” in any course during the previous semester or at any time during while on probation or suspension.
- Texts will not be issued for the following athletic training core courses: AH101, AH102, AH200, AH201, AH202, AH300, AH320, AH321, AH322, AH323, AH324, AH325, AH330, AH331, AH340, AH341, AH350, AH409, AH410, BY231, BY232, BY233, BY234, PE250, PE251, PE273, PE 442, PE443, PE444, PE445, PE446, PY428 or courses approved as athletic training electives.. You are expected to develop your own professional library and should be purchasing these texts to help you develop a personal reference library.
- Athletic training students will not be issued books unless the book request form is completed correctly.
- All books issued to athletic training students must be returned as soon as the last final exam is taken or on the date specified by the head athletic trainer. Failure to do so will result in your being placed on financial hold and you will not be issued books the next semester enrolled.



### **Taking Athletes to Physician**

At different times throughout the year, our athletes will require medical attention outside of Livingston. When this occurs we will transport them in a University motor pool vehicle to the location of the physician or health care facility. Usually, one or more of the athletic training students provide the transportation. There are several requirements that you must adhere to as follows:

1. You must have a valid driver's license.
2. You must possess automobile insurance that covers your use of other vehicles.
3. Use only the gas credit cards issued to you for gas or oil in the state vehicles.
4. When using a state vehicle always obey all the laws pertaining to the use of public roads.
5. When an athlete is in with a physician always ask to go in with the athlete for the evaluation. Make sure you take note of all physician comments about the athlete and later relay it back to the appropriate staff athletic trainer.
6. If transporting an athlete to HEALTHSOUTH Medical Center, you are expected to observe surgery with prior approval.
7. Always take enough money to pay for your meals and the athletes'. Obtain receipts and fill out a travel voucher when you return for reimbursement. Each person has a \$5.00 limit per meal limit.
8. Always record your beginning mileage and ending mileage in the logbook kept in the state vehicles. Also, record the destination and total miles incurred, as well as the name and sport of the athlete.

### **ATHLETIC TRAINING ROOM PROCEDURE**

Decisions in the athletic training room are made through a chain of command beginning with the team physician. If the team physician is not present, the process begins with the highest-ranking athletic trainer. The staff member always makes decisions on procedure, treatment, rehabilitation, or participation.

The routine of the athletic training room is a mixture of athletic training, business and office procedures, all of which require meticulous attention. The paperwork must be kept up to date and filed accurately, the supplies must be inventoried and restocked promptly and above all, the treatment and rehabilitation of the athletes must be up to standard. The following is an outline of daily athletic training room activity.

### **Injury Prevention**

- Always thoroughly clean coolers and water bottles after each use.
- Maintain a clean, efficient, and orderly athletic training room at all times.
- Check weight charts regularly and restrict athletes from competition if necessary.
- See that all lockers are kept up and safe so as to, prevent injury on wires, nails, locks, hinges, and hasps.
- Inspect all courts and fields for wet spots, and irregular surfaces.
- Inspect all fields for glasses, bottle tops, rocks, holes, wood, or other hazardous conditions.
- Keep non-participating personnel in their area far away from sidelines, competition, and live drills.
- Always strive to improve methods, techniques, treatments, and knowledge.
- Make sure all athletes are kept in proper fitting, safe equipment.
- Warn athletes about mixing medications and alcohol.
- Keep a close eye on heat illness prone athletes.
- Encourage football players to remove headgear when not in use.
- Make sure all football players use all required protective equipment, including hip pads, knee pads, spine pads, and mouthpiece.
- Do not allow athletes to drink after each other with cups or water bottles.
- Do not allow athletes to put water bottles in mouth or open water coolers.
- Players should not touch the water sprayers.
- Do not allow athletes to wear unwashed practice gear, use each other's towels, or wear clothing that has not been adequately dried.
- Check fences, doors, dummies, sleds, and other equipment for sharp edges.
- Make sure that all worn screw-on cleats are changed to prevent metal from showing through.

### **Daily Schedule**

- Regular scheduled staff meetings and unscheduled staff meetings are normally held during the 6:00 to 7:00 a.m. period or the 8:00 to 9:30 p.m. period.

- Regular scheduled morning treatments are 6:30 to 8:00 A.M. during the fall semester and football spring training and 7:00 to 8:00 A.M. during the remainder of the year.
  - \* At least four athletic training students assigned on a weekly rotating basis.
  - \* All injury reports must be filed for varsity athletes, private patients, & high school athletes.
  - \* All personal rehabilitation forms are updated as to include progress, rehabilitation, and daily information.
  - \* Injury reports are compiled for delivery to coaches.
  - \* Athletic training room is cleaned, ice bags emptied, supplies checked, and tables restocked after each treatment.
  - \* All books, journals, and publications are placed and filed in their respective places.
  - \* Towels are collected and placed in the washing machine.
- Rehabilitation and treatment is provided by appointment from 8:00 A.M.-12:00 P.M.
  - \* Rehabilitation and treatment of only those athletes who absolutely cannot attend A.M. treatments
  - \* One to two students may be assigned for each hour.
  - \* Filing or clerical work is done at this time.
  - \* Private patients are supervised for rehabilitation during this time.
  - \* Athletes may need to be taken to the student health center at this time.
- Afternoon treatment and practice preparation from 1:00 to 3:00 P.M.
  - \* All assigned athletic training students should report to the training room by 1:00 P.M.
  - \* Pre-practice taping will be completed 20 minutes prior to commencement of team meetings or practice.
  - \* Pre-taping and other miscellaneous duties will be carried out at 1:00 P.M. upon the athletic training students' arrival.
  - \* Pre-practice set-up will be completed during the team meeting and 20 minutes before scheduled practice begins.
  - \* One group of athletic training students will be assigned to pre-practice set-up during taping on a weekly rotating basis.
  - \* All athletic training room equipment will be collected after each practice and stored in the appropriate place in the athletic training room or storage area.
  - \* The athletic training room will be cleaned thoroughly after each practice.
  - \* Towels are brought up from the laundry room, folded and stored away.
  - \* One group will be assigned inside duty from 3:00 P.M. until practice is over on a weekly rotating basis.
  - \* The inside group during practice will wash any towels needing to be washed.
- Regular scheduled P.M. treatments are 3:00-7:00 or until complete.
  - \* Absolutely no athletic training room equipment is issued without being logged in the UWA Equipment Check-out Log
  - \* Each athletic training student is responsible for picking up after his/her team
  - \* Kits and trunks are to be restocked each day after their use
  - \* Athletes are not allowed in any supply cabinets, tables, or lockers in the athletic training room
  - \* The athletic training room is cleaned and mopped by the athletic training students after each treatment session
  - \* All logbooks are updated as to include progress, rehabilitation, and daily information
  - \* All rehabilitation forms are to be updated daily
  - \* All equipment and supply catalogues, etc. are filed in their respective places
  - \* The last athletic trainers leaving the athletic training room are to make absolutely, sure that all cabinets, lockers and doors to the athletic training room are securely locked
  - \* Absolutely no one except the sports medicine staff is allowed to remain in the athletic training room when it is unattended.

### **Areas to be cleaned**

Please remember that the Athletic Training & Sports Medicine Center is an allied health care facility. It should be kept extremely clean at all times. The appearance of our athletic training facility makes a statement about The University of West Alabama's Athletic Training Education Program and its staff.

- All tables and shelves should be wiped.
- All modalities and carts should be rearranged, wiped off, and all equipment put away.
- All whirlpools should be cleaned and polished.
- Floors should be swept and mopped every night.
- Taping areas should be straightened and restocked after every taping session
  - storage lockers and cabinets neat and orderly
  - dirty laundry put in proper containers, washed, folded, and put away each night

### **Athletic Training Room Library**

The majority of the books, magazines, periodicals, pamphlets, and other publications in the athletic training room are the personal property of the Director of Athletic Training & Sports Medicine. The athletic training library is for the use of the athletic training staff. If an athletic training staff member wishes to check out a publication, then he/she must write their name, the title, author, publisher, volume, and issue number, etc. in the black check-out log book in the Director's office. **This privilege is for the athletic training staff only.** Absolutely no one else may borrow or checkout any publications without written permission or in-person approval by the Director at any time. Once the Director grants permission, the above procedure should be followed exactly with the borrower signing the book. Any staff member failing to follow and comply with the above policy and procedure exactly will lose this privilege for an indefinite period of time. The above procedure also applies to any and all audio-visual materials.

All audio-visual aids are listed on the computer terminals located in the athletic training room. Each videotape is listed by category, and can be found in this method. If you have any questions about how to locate a video that you may need, please contact one of the athletic training staff members.

### **Telephone**

- **The athletic training room telephones are for official University business only!!**
- Absolutely no athletes are allowed to use the telephone at any time for any reason without prior approval by the athletic training staff.
- The telephone in the athletic training room is for the athletic training & sports medicine staff only. The coaches and the graduate/student assistant coaches have their own telephones. Their use of the athletic training room telephones should be kept to an absolute minimum.
- Any student that abuses the use of the telephone will lose their telephone privileges for an indefinite period of time.
- The procedures for using the telephone are outlined by the University and should be followed at all times.

### **Mail Service**

- Only mail pertaining to University business should be charged to the University.
- Personal letters may be mailed through the University mail service if they are stamped adequately.
- **Athletic training students are not allowed to receive any sort of mail through the Athletic Department. Athletic training students are required to acquire post office boxes to receive mail.**
- **Any personal mail sent to the athletic training room will be returned to the sender.**
- You will be issued a mailbox within the athletic training room; this is not for personal mail. It is solely for the purpose of issuing you memos, messages, and announcements; you may also receive mail that pertains to athletic training in the athletic training room. You should check this mailbox on at least a daily basis.

### **Supplies, Materials, & Equipment Policy**

1. All students, graduate assistants, and staff will be issued OSHA personal protective equipment(s) at no charge. This personal protective equipment must be carried by the member of the Athletic Training Education Program at all times when covering events where exposure can occur. You will be issued a resuscitation mask, if you lose your mask you will be charged a replacement fee or your grades will be tagged.
2. All students will be issued, at no charge, a fanny pack, scissors, and basic first aid supplies to keep on themselves at all times. If you lose or misplace your fanny pack, kits, or scissors you will be charged the replacement fee.
3. The use of supplies, materials, and equipment of the Athletic Training Education Program is a privilege. Any use during regular hours is subject to the discretion of the athletic training staff.
4. Removal of supplies, materials, and equipment of the athletic training objects for personal use is prohibited.
5. Any usage of supplies, materials, and equipment of the Athletic Training Education Program for professional purposes must be approved and are to be returned as soon after completion of their intended purpose as possible. Failure to do so may lead to fines, grades being tagged, or filing of criminal charges for stealing, as well as possible probation, suspension or termination from the Athletic Training Education Program.
6. It is your responsibility to take care of any issued material. Damaged issued material is your responsibility and you will be held financially responsible for it.
7. It is your responsibility to acquire in advance, any material or supplies you may need to cover the assigned sport.
8. All students removed or suspended from the program must return all materials, clothing, and books issued before clearing financial hold.

9. If you leave the Athletic Training Education Program, it is your responsibility to return all shirts, fanny packs, kits, scissors and breathing masks or have your grades tagged and charged the replacement value of these items.

### **ASSIGNMENT OF SPORTS**

The assignment of athletic training students to any team coverage is dependent of the staff athletic trainers' observation and evaluation of the students' skill, knowledge, dedication, and enthusiasm. If an athletic training student exhibits little or no progress or regard for his/her position, he/she may never achieve team coverage. If, on the other hand, a student displays a high degree of skill and knowledge, shows him/herself to be reliable, enthusiastic, and a willingness to work, he/she may be assigned team coverage over an available, more experienced student who has not proven themselves as worthy. The number of athletic training students assigned to team coverage is usually as follows:

Football (Fall & Spring)	8 to 10 athletic training students
Men's Basketball	2 athletic training students
Women's Basketball	2 athletic training students
Volleyball	2 athletic training students
Baseball	3 (1 for away games)
Softball	2 (1 for away games)
Rodeo	2 athletic training students (1 for away trips)
Cross Country	1 athletic training student
Intramurals	2 athletic training students from Athletic Training Room Duty on a rotating basis
Cheerleaders	2 (these athletic training students may also work football)
Athletic Training Room Duty	8 to 10 athletic training students

Athletic training students are expected to work with all sports; however, you can expect to be assigned one primary sport responsibility each semester once you are accepted into the professional component of the program. There is a possibility that you may be switched between or temporarily assigned to another sport during peak workloads and during the inactivity of another sport. Assignments or reassignments will be made at the discretion of the Clinical Coordinator in consultation with the Director of Athletic Training & Sports Medicine and the Head Athletic Trainer. It is not feasible for an athletic training student to be assigned coaching responsibilities.

It should be obvious that athletic training students are expected to work with their assigned sport for the entire semester. Assignment of students to team coverage will be made by the athletic training staff. Assignments to sports are subject to change at any time, and the staff withholds the right to do this for various reasons.

### **ATHLETIC TRAINING STUDENT RELATIONSHIPS**

The athletic training student comes in contact with other members of the Athletic Department and the public quite often. It is helpful to know the limits of this contact in order that some unfortunate circumstances can be avoided. Following are brief guidelines to use in dealing with others during your assigned activities.

#### **Athletic training students to Staff Athletic Trainers**

- The staff athletic trainer is the ultimate authority in the athletic training room (see chain of command).
- The staff athletic trainers' orders/requests are to be carried out as promptly as possible and not to be passed to subordinates.
- It is perfectly acceptable to ask questions of a staff athletic trainer about anything pertinent. Ask, do not challenge in front of patients/athletes.
- If there are any grievances, they are to be directed to the staff athletic trainer first or to the Head Athletic Trainer or Director of Athletic Training & Sports Medicine where the appropriate course of action will be decided upon.
- The Graduate Assistant Athletic Trainers are members of the STAFF.

### **Athletic training students to Team Physicians**

- The medical director or team physicians are the ultimate medical authority at the University.
- Always follow the physician's directions explicitly.
- Referral to the team physicians during clinic can only be made upon request along with the staff athletic trainers.
- Referral of an athlete to the local team physician during student health service hours can be made at any time, but always inform one of the staff members that you have done this.
- If you are present when an athlete is being examined by a team physician, present the case to the physician including sport, history, the details of the injury, and your impressions.
- Whenever you are accompanying a student athlete to an on-site visit with a physician always accompany the student athlete into the examination, be attentive and be able to inform the athletic training staff on the status of the student athlete or their injury.
- Remember, these physicians are extremely busy, they may run behind schedule or seem abrupt at times, but they are vital to the performance of our jobs and should be treated with respect at all times.

### **Athletic training students to Coaches**

- The Head Athletic Trainer, Associate Athletic Trainer, and Assistant Athletic Trainer are ultimately responsible for reporting injuries or the status of student athletes to the respective coach.
- If a coach asks you a question about an athlete or their injury answer it to the best of your knowledge, do not speculate. If a question still remains, refer the coach to the staff athletic trainer.
- If you are assigned team coverage you are responsible for reporting injuries, status, pending and/or missed medical appointments, and rehabilitation progress of your athletes to your coach and the staff athletic trainers on a daily basis in the absence of one of the staff athletic trainers.
- Adhere to the coach's rules as though you were a member of the team; avoid giving the appearance of having special privileges.
- Injury reports are to be made to the coaches at least two hours prior to practice time. Remember, as an athletic trainer, you are the communication link between the physician and the coach.

### **Athletic training students to Athletes**

- Treat each and every athlete the same, with respect.
- Do not discuss an athlete's injury with another athlete or friend.
- Refer the athlete to a staff athletic trainer if he/she has a question that you can not answer. Do not speculate.
- Avoid close personal relationships with athletes in season; it could put you in a compromising situation.
- If any problems arise with an athlete, refer the problem to a staff athletic trainer or the athlete's coach.
- Do not provide an alibi for athletes.
- Do not issue special favors.
- All athletes are to be taped and/or completely treated a minimum of 20 minutes prior to the start of practice or competition.

### **Athletic training student to Athletic training student**

- Treat one another with respect and with a professional attitude.
- Share the work as assigned, always do your part.
- Be fair with those students under you.
- Be constructive in your criticism, helpful in your comments.
- Refer confrontations and problems to a staff athletic trainer.
- Always attempt to challenge each other to grow in skill and knowledge attainment.

### **Athletic training student to the Public and Media**

- Accept their attention, graciously, don't seek it out.
- Present yourself with conduct and manner becoming to an allied health care professional.
- Be courteous.
- Refrain from arguments regarding athletes, athletics, coaches or teams.
- Do not be the "inside source" for your friends or the media. Remember that you signed a Confidentiality Statement.
- Avoid making statements concerning the status of an injured athlete; refer them to one of the staff athletic trainers.

- Remember your first responsibilities are to your athletic training duties. Conversations with friends or favors for others have to wait.

#### **Athletic training students to Salespersons or Vendors**

- You are more than welcome to listen to sales pitches made to staff athletic trainers and to ask questions, but refrain from talking business.
- Do not accept free samples, unless instructed to by a staff athletic trainer.
- Make no commitments.
- Endorse no products.
- Sign nothing.
- Do not allow yourself to be photographed using a product that can be identified or used as advertisement.

#### **Athletic training students to Athletic Director**

- The athletic director has the ultimate responsibility for all aspects of the athletic program and reports directly to the University president.
- If the athletic director asks you a question about an athlete or their injury answer it to the best of your knowledge, do not speculate. If a question still remains, refer the athletic director to the staff athletic trainer.

#### **General/Confidentiality**

In dealing with people, common sense must be your guideline. Always stay within the limits of your position and knowledge. Do not discuss any training room activities (injuries, treatments, doctor's reports, etc.) with others. 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.** These guidelines must be adhered to strictly. Disregarding these instructions will result in prompt dismissal from the athletic training & sports medicine program.

### **INDIVIDUAL SPORT RESPONSIBILITIES & PROCEDURES**

Each sport has different responsibilities with which athletic training students are expected to comply. These responsibilities are as follows:

#### **Football**

1. Everyone not involved with another sport will rotate some with football throughout the year.
2. At home games usually only 10 athletic training students will be assigned.
3. Usually only 8 athletic training students will be assigned at away games.
4. Everyone will work at practice, with each student assigned a position and coach that they will work with on each given day. Each group will carry a sprayer or water bottles to supply water to athletes on a continual basis.
5. At practice, one group will be responsible for pre-practice field set-up on a weekly basis, which includes the following:
 

◆ sufficient amounts of ice in ice chests	◆ ice towel buckets and towels	◆ white supply trunk
◆ sufficient amounts of water in water coolers	◆ rehab equipment	◆ emergency equipment
◆ water sprayers	◆ hose(s)	◆ orange field kit
◆ water sprayers	◆ cups	
6. After practice all equipment and supplies are to be returned. They are also to be washed or restocked and returned to the proper storage area.
7. At home games the field set-up group will be responsible for providing the following items to our sidelines:
 

◆ 4 water coolers	◆ 1 spine board	◆ orange field kit
◆ 8 ice chests	◆ 1 bag of air splint	◆ 1 red water tables
◆ 4 water sprayers	◆ 2 pair of crutches	◆ 2 examination tables
◆ 2 ice towel buckets w/towels	◆ 2 hoses	◆ physician's kit
◆ 10 sleeves of cups	◆ Field Kit	
	◆ Cramer Tape Supply Kit	

The opposing sidelines will be provided the following: 1 examination table, 1 red water table, 4 water coolers, and 2 - 50 gallon barrels of ice. (Note any item requested within reason will be provided to the opposing team.) All supplies and equipment is to be cleaned and returned to its proper place after the game.

8. Post game drinks will be provided to the opposing team after each home game. The opposing locker room group will be responsible for acquiring 75 – 12-ounce soft drinks and icing them prior to the opposing teams’ arrival. The drinks will be placed in the Pruitt Hall Athletic Training Room to be used at the discretion of the opposing team. Also, the athletic training students assigned to the opposing team will provide any service deemed appropriate for the opposing team.
9. The home locker room group will be responsible for setting up 1 water cooler, 1 cooler of Powerade and cups in our locker room 2 hours prior to the game. They will also make sure that the orange locker room kit is set up. They will stay in the locker room as long as players are there to assist with any of their needs. At 10 minutes prior to halftime they will set up 30 cups of water and 30 cups of Powerade. They will also have at least 5 ice bags made prior to the players returning to the locker room. After halftime they will clean and return all supplies and equipment to its proper storage place.
10. Away game responsibility. Prior to leaving on Fridays, the athletic training students who will travel with the team will report for loading of the bus and van. (usually this is done after Thursday’s practice) The following is a list of material that goes under the bus: a pre-set number of drinks iced in ice chests (clearly marked Friday or Saturday), 4 ice chests with ice, and 4 water coolers with ice only. Each bus also must have 1 water cooler with ice, cups, and 1 orange kit on it.

The following items are placed on the equipment van:

- |  |                          |                            |
|--|--------------------------|----------------------------|
| ◆ 2 water coolers for Powerade           | ◆ 10 sleeves of cups     | ◆ 4 water sprayers         |
| ◆ 2 ice towel buckets and 6 towels       | ◆ Field Supply Trunk     | ◆ 2 pair of crutches       |
| ◆ Powerade packets                       | ◆ 1 hose                 | ◆ 1 spine board            |
| ◆ 4 time out water bottles and 2 holders | ◆ Cramer Tape Supply Kit | ◆ 2 taping tables          |
|  | ◆ 2 cup holders          | ◆ 1 package of air splints |
|  | ◆ physician’s kit        |                            |

11. All individual athletic training student responsibilities will be outlined in the game assignment sheet issued each week to those assigned to work the game.

### **Volleyball, Men’s & Women’s Basketball**

All three of these sports will be assigned two athletic training students for principle coverage. The athletic training students are responsible for preparing and sending a GSC courtesy sheet to all teams that visit UWA. Also, each athletic training student will enter all insurance and emergency information for each of their athletes in the computer and keep a copy in their kit at all times. Each athletic training student will attend all practices and home games. Only one athletic training student will travel with the team to away games on a rotating basis. Each athletic training student is assigned the sport for the entire year (including off-season workouts) unless some unforeseen event or reason arises. Each athletic training student is to arrive at least one hour prior to the start of each practice for taping and pre-practice set-up. Each sport requires the following items for set-up: 1 water cooler and cups, 1 ice chest with sufficient ice, individual player squirt bottles filled with water, towels, and 1 stocked supply kit. All taping and pre-practice treatments are to be conducted in the Pruitt Hall Athletic Training Room. The Pruitt Hall Athletic Training Room should always have the following items:

- |                               |                            |   |
|-------------------------------|----------------------------|---|
| ◆ 1 exercise bike             | ◆ 2 pair of crutches       | ◆ towels                                  |
| ◆ rehab equipment as needed   | ◆ cups                     | ◆ 2 water cooler rolling tables           |
| ◆ 2 stocked taping tables     | ◆ 1 spine board            | ◆ 1 stocked, working steam hydrocollator. |
| ◆ 1 stocked first aid cabinet | ◆ 1 package of air splints |   |

For home games, set-up should include the following:

- |   |  |
|---|--|
| ◆ 1 ice chest on each bench   | ◆ 1 sleeve of cups on each bench                                   |
| ◆ 1 water cooler on each bench                                      | ◆ 1 rolling cart   |
| ◆ towels for both benches   | ◆ 1 stocked kit on our sideline                                    |
| ◆ ice bags & elastic wraps in the visiting teams ice chests         | ◆ individual water squirt bottles for our athletes on our sideline |
| ◆ (for basketball only, provide 6 drinks to each set of officials). |  |

When visiting teams arrive early and have practice times the day before the games, the athletic training students assigned to the respective sports are responsible for opening the Pruitt Hall Athletic Training Room and setting up water and ice for the visiting teams during their practice. After the visiting teams' practice all materials should be cleaned and returned to their respective areas and all doors locked.

## Rodeo

Two athletic training students are assigned for principal coverage. Each assigned athletic training student will attend all practices and competitions. As a general concept, athletic trainers should recognize that rodeo is a dangerous sport and certain injuries are to be anticipated. Also, cowboys and cowgirls tend to have a different attitude toward competition as compared to other athletes. It takes a particular mind-set and love of the sport to accept the risks and to be successful. Rodeo athletes tend to be reluctant to ask for, and receive medical attention. Provided below are some specific guidelines for rodeo athletic training students.

1. The University of West Alabama medical insurance coverage requires that an athletic training student be present at all scheduled practices and competitions.
2. The rodeo athletic training student must dress in traditional western apparel at all times when they are present at a scheduled competition. This means cowboy hat, long sleeve western style shirt, and jeans. Shirts may be provided by UWA and must be worn by athletic trainers.
3. Athletic trainers should not be in the bucking chute or timed event chute areas unless providing medical attention or at the request of a coach or participant. Athletic trainers should position themselves so that they have a full view of the arena, and are able to provide quick access to injured athletes.
4. When present in the arena or holding pen area, athletic trainers should be aware that potentially dangerous animals are present and take necessary precautions.
5. Do not attempt to have casual conversation with cowboys or cowgirls immediately prior to their competition, unless initiated by a coach or participant.
6. Always walk through the arena prior to any scheduled competition or practice to check for foreign objects. Also, after any modifications are made to the UWA arena or bucking chute area, and at all away competitions, check for any sharp edges that may cause injury.
7. The National Intercollegiate Rodeo Association requires that EMTs be present at all scheduled competitions. In the event that it is necessary to transport a participant off the site, the competition must be halted until EMTs and an emergency transport vehicle are present. The NIRA Regional Director, who is present at all competitions, makes this decision. Feel free to express any concerns to the NIRA Regional Director.
8. At all competitions it is the responsibility of the athletic trainer to identify themselves to the EMTs that are present, and to establish a coordination mechanism for the handling of emergency situations. In addition, at home competitions, it is the responsibility of the athletic trainer to brief EMTs on rodeo protocol.
9. Understand that part of the "cowboy attitude" is to get up and walk out of the arena. You may provide assistance, if necessary. In extreme situations, it is the athletic trainer's decision to transport the injured participant. After any serious fall, once outside the arena, the participant should be evaluated thoroughly.
10. In the event of an injury, only qualified medical personnel should be around the injured person. After a primary evaluation, it is the athletic trainer's decision to summon the EMTs into the arena.
11. It should be understood that rodeo athletes frequently continue to participate with non life-threatening injuries. If continuation is allowed, use careful judgement about the potential for permanent damage and the potential for an injury to become life threatening. This decision is to be made by the athletic trainer, and is not debatable.
12. You may provide emergency first aid and assist members of other teams, if requested within time, budget, and supply limitations. *In providing this assistance, keep in mind that you may incur liability for UWA.*  
**Remember to use good judgement in providing advice on injuries in these situations and keep in mind that the ultimate decision on the status of the athlete is the coach or representative of that team or club.**
13. At the UWA rodeo complex the following items should be present at all times.

◆ 1 spine board	◆ 1 ice chest with ice	◆ all emergency information
◆ 1 package of air splints	◆ 1 water cooler	◆ athlete insurance information.
◆ 2 pair of crutches	◆ 1 stocked kit	
14. For protocols concerning injury evaluation, care, and rehabilitation, as well as emergency situations, and universal precautions, athletic trainers should refer to the Athletic Training Handbook located in the UWA Athletic Training Room.



15. In the event that an emergency arises, do not hesitate to call 911, and have the athlete transported. One of the assigned athletic trainers should accompany the injured athlete to the health care facility and the other stay with the other athletes. As soon as possible, contact the Head Athletic Trainer or one of the staff athletic trainers and inform them of the situation.

### Baseball & Softball

Both of these sports will be assigned two and possibly three athletic training students for principle coverage. The athletic training students are responsible for preparing and sending a GSC courtesy sheet to all teams that visit UWA. Also, each athletic training student will enter all insurance and emergency information for each of their athletes in the computer and keep a copy in their kit at all times. Each athletic training student will attend all practices and home games. Only one athletic training student will travel with the team to away games on a rotating basis. Each athletic training student is assigned the sport for the entire year (including off-season workouts) unless some unforeseen event or reason arises. Each athletic training student is to arrive at least one hour prior to the start of each practice for taping and pre-practice set-up. Each sport requires the following items for practice set-up:

- ◆ 1 water cooler & cups
- ◆ 1 ice chest with sufficient ice
- ◆ individual player squirt bottles filled with water (if used)
- ◆ towels
- ◆ 1 stocked supply kit

For home game set-up, each dugout will be provided with:

- ◆ 100 cups/game
- ◆ Biohazard Container
- ◆ 1 water cooler
- ◆ 1 ice chest with ice (visiting team's will have bags & elastic wraps)

The following items will be on site at all times:

- ◆ 1 pair of crutches
- ◆ 1 spine board
- ◆ 1 package of air splints

For away games the following should be taken with you

- ◆ 1 kit
- ◆ insurance information
- ◆ emergency information
- ◆ 1 pair of crutches

### Cross-Country

This sport will have only one athletic training student assigned principle coverage. They will be responsible for entering all insurance and emergency information for each of their athletes in the computer and keep a copy in their kit at all times. The athletic training student will attend all practices and events with the team. The athletic training student will also work with football during times when cross-country is not practicing or competing.

At practices and home events the student will provide

- ◆ 1 ice chest with ice
- ◆ individual squirt bottles
- ◆ supply kit with emergency & insurance information
- ◆ 1 water cooler
- ◆ cups

Be prepared to assist with visiting athletes (they probably will not have an athletic trainer on site).

At away events (it is the coach's discretion as to whether you will travel) you will take:

- ◆ individual squirt bottles
- ◆ 1 water cooler
- ◆ supply kit.

At home events, other athletic training students will be assigned to set up first aid stations throughout the course.

### Cheerleading

This sport will have two athletic training students assigned for principle coverage. They will be responsible for entering all insurance and emergency information for each of their athletes in the computer and keep a copy in their kit at all times. The athletic training students will attend all practices and events with the team. The athletic training students will also be assigned football responsibilities. At practices the athletic training students will provide only 1 supply kit with emergency information & insurance information.

### Intramurals

Two athletic training students will be assigned to cover all intramural activities throughout the year. They will be responsible for evaluating and referring any injury to the proper health care facility. They will only need to have a stocked supply kit at all events. **We will not be responsible for providing the supplies necessary for taping or wrapping any student to participate in intramural activity.**

## NATA CODE OF ETHICS

### Preamble

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

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

#### Principle 1:

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

- 1.1 Members shall not discriminate against any legally protected class.
- 1.2 Members shall be committed to providing competent care consistent with both the requirements and the limitations of their profession.
- 1.3 Members shall preserve the confidentiality of privileged information and shall not release such information to a third party not involved in the patient's care unless the person consents to such release or release is permitted or required by law.

#### Principle 2:

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

- 2.1 Members shall comply with applicable local, state, and federal laws and institutional guidelines.
- 2.2 Members shall be familiar with and adhere to all National Athletic Trainers' Association guidelines and ethical standards.
- 2.3 Members are encouraged to report illegal or unethical practice pertaining to athletic training to the appropriate person or authority.
- 2.4 Members shall avoid substance abuse and, when necessary, seek rehabilitation for chemical dependency.

#### Principle 3:

Members shall accept responsibility for the exercise of sound judgment.

- 3.1 Members shall not misrepresent in any manner, either directly or indirectly, their skills, training, professional credentials, identity or services.
- 3.2 Members shall provide only those services for which they are qualified via education and/or experience and by pertinent legal regulatory process.
- 3.3 Members shall provide services, make referrals, and seek compensation only for those services that are necessary.

#### Principle 4:

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

- 4.1 Members shall recognize the need for continuing education and participate in various types of educational activities that enhance their skills and knowledge.
- 4.2 Members who have the responsibility for employing and evaluating the performance of other staff members shall fulfill such responsibility in a fair, considerate, and equitable manner, on the basis of clearly enunciated criteria.
- 4.3 Members who have the responsibility for evaluating the performance of employees, supervisees, or students, are encouraged to share evaluations with them and allow them the opportunity to respond to those evaluations.
- 4.4 Members shall educate those whom they supervise in the practice of athletic training with regard to the Code of Ethics and encourage their adherence to it.
- 4.5 Whenever possible, members are encouraged to participate and support others in the conduct and communication of research and educational activities that may contribute knowledge for improved patient care, patient or student education, and the growth of athletic training as a profession.

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

**Principle 5:**

Members shall not engage in any form of conduct that constitutes a conflict of interest or that adversely reflects on the profession.

5.1 The private conduct of the member is a personal matter to the same degree as is any other person's except when such conduct compromises the fulfillment of professional responsibilities.

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

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

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

### **SEXUAL HARASSMENT (NATA Brochure)**

#### **WHAT EVERY ATHLETIC TRAINER SHOULD KNOW**

Most athletic trainers work in environments where physical contact, competition, and pressure for opportunities are intense, and where failure often has quick consequences for athletes and those who work with them. The potential for sexual harassment is high in environments such as these.

Sexual harassment is not just a problem for its victims. Anyone responsible for workplace decisions or employee supervision is responsible for understanding and preventing sexual harassment and may be held liable for failing to do so. Sexual harassment includes much more than most people think.

This brochure provides general summaries of what sexual harassment is, what athletic trainers' responsibilities are, what victims can do, and where NATA stands. Laws, regulations and case law vary by jurisdiction and change over time - this brochure does not provide individual legal guidance and is no substitute for knowing the law in your area.

#### **What is Sexual Harassment?**

Sexual Harassment is any form of unwelcome conduct based on a victim's gender. There are two basic types. Most people understand the first type, *quid pro quo*, in which the victim is promised some kind of benefit or fears some kind of harm in exchange for sexual favors. Sexual favors include requests for dates and social events as well as requests for any kind of sexual touching.

The second type of harassment, hostile environment harassment, is more commonly alleged and does not require any threat or promise of benefit: sexual harassment occurs if a harasser by his or her conduct or failure to act creates or allows a hostile, offensive or intimidating environment. An environment may be hostile even if no touching occurs; jokes, pictures, innuendo, comments about a person's body or appearance, sexual remarks about others, gestures and looks, and even more subtle collections of practices may create one.

#### **What responsibility does an athletic trainer have for sexual harassment?**

If an athletic trainer is an employer, is a manager of employees, or is a person responsible for workplace policies, he or she has a variety of responsibilities to attempt to prevent sexual harassment and to deal properly with it when it happens. These responsibilities have been growing rapidly in recent years and athletic trainers are cautioned to stay well informed of their legal responsibilities.

An employer could be liable for sexual harassment of the *quid pro quo* type even if it had no knowledge of the harassment, and even if the victim did not object and suffered no harm.

An employer may be liable for hostile environment harassment if it knew of the harassment, took insufficient action to stop it, or had no effective means in place for reporting, investigating or remedying the harassment (with no adverse consequences for the victim).

An employer is generally responsible for trying to prevent and police harassment against employees from any source, not just from other employees. This means that employees must be protected against harassment from athletes, coaches, fans, customers, vendors, doctors, athletic trainers and others, to the extent possible.

Courts increasingly determine whether harassment against women occurred based on whether a reasonable woman (not a reasonable man) might feel threatened or harassed.

### **What can a victim do?**

A person can be a victim of sexual harassment if she or he is the target of the harassment, if she or he is harmed because someone else is a target (for example, if someone else gets preferred treatment), or if she or he works in a sexually hostile environment.

Appropriate actions will vary greatly with the situation and governing laws and policies. A person may feel victimized or ill-treated and not legally be a victim of sexual harassment; so (1) becoming informed, (2) keeping proper records, and (3) acting calmly are generally prudent.

Employers are legally expected to have and publish investigation and protection procedures for victims. The law requires that employers (1) act promptly, (2) take all complaints seriously, (3) document the investigation, (4) conduct all interviews privately and confidentially, and (5) prevent avoidable harm to the victim. Many employers make available same-gender representation and alternative reporting channels. Victims should investigate their internal options.

Victims often have a variety of legal courses of action in addition to internal procedures including breach of contract, workman's compensation claims, common law tort actions, state and federal statutory claims, and EEOC or other regulatory agency actions. Expert advice, not just the impassioned views of friends and relatives, should be sought. Keeping proper records increases a victim's options and chances of positive resolution. Non-legal resolutions should be analyzed as well.

### **Where does the NATA stand?**

Sexual harassment violates the NATA's Code of Ethics and can be grounds for sanctions, including termination of membership.

## **HEALTH & SAFETY POLICY OF THE UWA ATHLETIC TRAINING EDUCATION PROGRAM**

**Safeguards are taken for the health and safety of patients, students, graduate assistants, and faculty/staff. These are:**

1. Each athletic training student is required to have received a Hepatitis B Vaccine or signed a waiver prior to entry into the program.
2. Modalities are checked and serviced periodically for potential problems.
3. No student is allowed to use a modality without specific instructions from a clinical instructor and the student having shown competence with the modality.
4. Students are required to be Standard First Aid & CPR certified before admission into the program and must gain re-certification each year. Each student will also be AED certified if the materials needed are available for this type of certification.
5. First year students must successfully pass two practicums in athletic training classes and attend the preseason in-service program prior to performing athletic training activities in the athletic training room.
6. OSHA guidelines are followed very closely. All students stating they have read the guidelines and universal precautions and understand and will adhere to them must sign a consent form. Also, a training session on the OSHA guidelines and universal precautions is required each year of all athletic training students.
7. The local health department is retained to dispose of medical waste and sharp objects.
8. Appropriate emergency procedures are discussed and demonstrated with each new athletic training student.
9. Each athletic training student must take part in a yearly in-service on the appropriate techniques of emergency procedures.
10. All emergency and potentially important phone numbers are posted at specific locations should an emergency situation arise.

### **Bloodborne Pathogens Exposure Control Plan**

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

#### **1. Exposure Determination**

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 The University of West Alabama working directly with University athletes or

athletes participating on the University campus as part of a program sponsored by or hosted by The University of West Alabama.

The job classifications and associated tasks for these categories are as follows:

- A. Athletic Training Staff members will be expected to provide emergency treatment for life-threatening emergencies, including administering mouth-to-mouth resuscitation and controlling bleeding occurring due to participation in athletics. Also, the staff member may be involved in assisting team physicians with suturing, draining blisters, applying band-aids, or shaving calluses.
- B. Graduate Assistants and Athletic training students will often be required to perform the same tasks when the situation requires.

## **2. Implementation Schedule and Methodology**

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:

### **A. Compliance Methods**

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.

Engineering and work practice controls will be used to eliminate or minimize exposure to employees at this facility. Where occupational exposure remains after institution of these controls, personal protective equipment shall be used (**refer to the Policies & Procedures Manual: All staff, graduate assistants, and athletic training students will use personal protective equipment in dealing with any potentially infectious material**). At this facility, sharps containers, waste disposable bags, and clearly marked biohazardous waste containers will be used as engineering controls.

The above controls will be examined and maintained on a regular basis, with attention given to the contents of the engineering controls to insure removal once the containers reach 1/2 to 3/4 of capacity. The effectiveness of the controls shall be reviewed on a semiannual basis by an individual appointed by the Head or Associate/Assistant Athletic Trainers.

Hand washing facilities are also available to the employees who incur exposure to blood or other potentially infectious materials. OSHA requires that these facilities be readily accessible after incurring exposure. At this facility, there are two hand-washing facilities located in the athletic training room, in each athletic locker room, in each coach's locker room, and in each of the public restrooms. There are no available facilities at game/practice sites. As an alternative, a 10% bleach and water solution and isopropyl alcohol are stored in each athletic trainer's kit on the site. If this alternate method is used, the hands are to be washed with soap and running water as soon as feasible following any exposure.

After proper removal and disposal of personal protective gloves or other personal protective equipment, employees shall wash their hands and any other potential contaminated skin area immediately or soon as feasible with soap and water.

If employees incur exposure to their skin or mucous membranes, then those areas shall be washed or flushed with water as appropriated or as soon as feasible following contact.

### **B. Needles**

Contaminated needles and other contaminated sharps objects will not be bent, recapped, removed, sheared, or purposely broken. Following usage needles or other contaminated sharps objects will be disposed of in a clearly marked biohazardous, sharps container. OSHA allows for one exception to the rule governing the disposal of needles, if the procedure requires that the contaminated needles be recapped or removed and no alternative is feasible, and the action is required by the medical procedure. If such action is required, then the recapping or removal of the needle must be done by the use of a mechanical device or a one handed technique. At this facility recapping or removal is only permitted while assisting one of the team physicians in a procedure necessitating this act.

### **C. Containers for Reusable Sharps**

Contaminated sharps that are not reusable are to be placed immediately, or as soon as possible after use, into appropriated sharps containers. At this facility, the sharps containers are puncture resistant, labeled with a biohazard label, and are leak proof. The sharps container is located in the cabinet above the first aid area of the main athletic

training island. An individual appointed by the Head Athletic Trainer has the responsibility for disposal of the sharps container when it becomes ¾ full. The container need only be checked as necessitated by its use.

#### **D. Work Area Restrictions**

In work areas where there is a reasonable likelihood of exposure to blood or other potentially infectious materials, employees are not to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses. Food and beverages are not to be kept or placed on treatment tables, taping decks, or countertops when blood or other potentially infectious materials are likely to be present.

Mouth pipetting or suctioning of blood or other potentially infectious materials is prohibited.

All procedures will be conducted in a manner that will minimize splashing, spraying, splattering, and generation of droplets of blood or other potentially infectious materials.

#### **E. Specimens**

Specimens of blood or other potentially infectious materials, such as urine, will be placed in a container that prevents leakage during the collection, handling, processing, storage, and transport of the specimens.

The container used for this purpose will be labeled or color-coded in accordance with the requirements of the OSHA standards. It should be noted that this standard provides for an exemption for specimens from the labeling/color-coding requirements of the standard, provided the facility uses Universal Precautions in the handling of all specimens and the containers are recognizable as container specimens. This exemption applies only while the specimens remain in the facility.

If outside contamination of the primary container occurs, the primary container shall be placed within a secondary container that prevents leakage during the handling, processing, storage, transport, and/or shipping of the specimen.

#### **F. Contaminated Equipment**

Equipment that has become contaminated with blood or other potentially infectious materials shall be examined before servicing or shipping and shall be decontaminated as necessary unless the decontamination of the equipment is not feasible.

#### **G. Personal Protective Equipment**

All personal protective equipment used at the facility will be provided without cost to employees. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious materials. The protective equipment will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach employees' clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time that the protective equipment will be used. The protective equipment necessary for the athletic training room primarily consists of latex gloves. These gloves will be stored on the main athletic training room island, in the first aid cabinet of the taping room, and in all athletic training kits used by the staff, graduate assistants and students, and in all individual fanny packs. These gloves will be available at all times and at no cost to the staff, graduate assistants, or students.

There is also other protective equipment made available to everyone at no cost to the staff, graduate assistants, and students. They are listed below.

##### Personal Protective Equipment

- |                        |                                      |
|------------------------|--------------------------------------|
| ◆ One-way Pocket Masks | ◆ Examination Gloves (vinyl & latex) |
| ◆ Protective eyewear   | ◆ Face Shield                        |

All personal protective equipment will be cleaned, laundered, and disposed of by the employer at no cost to the employees. The employer at no cost to employees will make all repairs and replacements.

All garments that are penetrated by blood shall be removed immediately or as soon as feasible. All personal protective equipment will be removed before leaving the work area.

Gloves shall be worn where it is reasonably anticipated that employees will have hand contact with blood, other potentially infectious materials, non-intact skin, and mucous membranes. Gloves will be used for the following procedures:

- |                           |                     |
|---------------------------|---------------------|
| ◆ Applying bandages       | ◆ Draining blisters |
| ◆ Applying wound closures | ◆ Shaving calluses  |

- ◆ Cleaning open wounds
- ◆ Handling urine specimens
- ◆ Cleaning evaluation tables
- ◆ Cleaning spills of potentially infected materials
- ◆ Evaluating oral/dental injuries or conditions
- ◆ Applying direct pressure to open wounds
- ◆ Handling/changing wound dressings

Disposable gloves used at the facility are not to be washed or decontaminated for reuse. They are to be replaced as soon as practical when they become contaminated or as soon as feasible when or if they are torn, punctured, or when their ability to function as a barrier is compromised. Utility gloves may be decontaminated for reuse provided that the integrity of the glove is not compromised. Utility gloves will be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration or when their ability to function as a barrier is compromised.

The facility will be cleaned and decontaminated daily when the training room is used by athletes. Decontamination will also take place after any blood or other potentially infectious material has been exposed in the athletic training room. Decontamination will be accomplished by using a 10% bleach and water solution available in the cabinet under each sink counter and in all athletic trainers' kits.

Any broken glassware that may be contaminated will not be picked up directly with the hands. Cardboard sheets should be used to corner and lift any broken pieces. All broken glass or material should be placed in a sharps container for disposal.

#### **H. Regulated Waste Disposal**

All contaminated sharps shall be discarded as soon as feasible in sharps containers located in the facility. Sharps containers are located in the areas listed above.

Regulated waste other than sharps shall be placed in appropriate containers with color-coded waste bags. Such containers are located in the Homer athletic training room, Pruitt Athletic Training Room, taping room, baseball field and softball field.

These containers are supervised by the designated person(s), and are disposed of by the Sumter County Health Department.

#### **I. Laundry Procedures**

Laundry contaminated with blood or other potentially infectious materials will be handled as little as possible. Such laundry will be placed in appropriately marked bags where it is used. This laundry will not be sorted or rinsed in the area of use. It will then be removed by the individual responsible for laundry using personal protective equipment, and washed separately in bleach.

All employees who handle contaminated laundry will use personal protective equipment to prevent contact with blood or other potentially infectious materials.

#### **J. HIV/HBV Exposure**

##### Post-Exposure Evaluation and Follow-Up

When an employee incurs an exposure incident, it should be reported to the Head or Assistant Athletic Trainer. All employees who incur an exposure will be offered post-exposure evaluation and follow-up in accordance with the OSHA standard. This follow-up will include the following:

1. Written documentation of the route of exposure and the circumstances related to the incident as soon as feasible following the exposure. This is to be returned to the Head or Assistant Athletic Trainer
2. If possible, the identification of the source individual and, if possible, the status of the source individual. The blood of the source individual will be tested after consent is obtained for HIV/HBV infection.
3. Results of testing of the source individual will be made available to the exposed employee with the exposed employee informed about the applicable laws and regulations concerning disclosure of the identity and infection of the source individual.
4. The employee will be offered the option of having their blood collected for testing of the employee's HIV/HBV serological status. The blood sample will be preserved for up to 90 days to allow the employee to decide if the blood should be tested for HIV serological status. However, if the employee decides before that time that testing will or will not be conducted then the appropriate action can be taken and the blood sample discarded.
5. The employee will be offered post-exposure prophylaxis in accordance with the current recommendations of the U.S. Public Health Service.

6. The employee will be referred to appropriate counseling centers concerning precautions to take during the period after the exposure incident. The employee will also be given information on what potential illness to be alert for and to report any related experiences to appropriate personnel.
7. The Head Athletic Trainer will be designated to assure that the policy outlined above is effectively carried out as well as to maintain records related to this policy.

#### **K. Interaction with Health Care Professionals**

A written opinion shall be obtained from the health care professional that evaluates employees of this facility. Written opinions will be obtained in the following instances:

1. When the employee is sent to obtain the Hepatitis B vaccine.
2. Whenever the employee is sent to a health care professional following an exposure incident.

Health care professionals shall be instructed to limit their opinions to:

1. Whether the Hepatitis B vaccine is indicated and if the employee has received the vaccine, or for evaluation following an incident.
2. That the employee has been informed of the results of the evaluation.
3. That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials. (Note: The written opinion to the employer is not to reference any personal medical information).

#### **L. Training**

Training for all employees will be conducted before initial assignment to tasks where occupational exposure may occur. Training for employees will include an explanation of the following:

1. The OSHA Standard for Bloodborne Pathogens
2. Epidemiology and symptomatology of bloodborne disease
3. Modes of transmission of bloodborne pathogens
4. The exposure plan (i.e., points of the plan, lines of responsibility, how the plan will be implemented, etc.)
5. Procedures that might cause exposure to blood or other potentially infectious material at this facility.
6. Control methods to be used at the facility to control exposure to blood or other potentially infectious materials.
7. Personal protective equipment available at this facility
8. Who should be contacted concerning exposure to blood or other potentially infectious materials.
9. Post-exposure evaluation and follow-up.
10. Signs and labels used at the faculty.
11. Hepatitis B vaccine program at the facility.

#### **M. Record Keeping**

All records required by the OSHA standard will be maintained by an employee appointed by the Head Athletic Trainer. All provisions required by the standard will be implemented by August 1, 1998. The athletic training staff will be responsible for conducting the training to the graduate assistants and athletic training students during preseason orientation. All employees will receive annual refresher training within one year of the employee's previous training. The OSHA Standard for Bloodborne Pathogens and the outline for the training material will be kept in the office of the Head Athletic Trainer and in the policies manual at the Athletic Training Room Desk by the main entrance.

#### **N. Athletics Health Care Responsibilities**

The following information was taken from the 2003-2004 NCAA Sports Medicine Handbook, Sixteenth edition, August 2003, page 39.

The following recommendations are designed to further minimize risk of bloodborne pathogen transmission in the context of athletics events and to provide treatment guidelines for care givers. These are sometimes referred to as "**universal precautions**", but some additions and modifications have been made as relevant to the athletics arena.

1. Pre-event preparation includes proper care for wounds, abrasions, cuts or weeping wounds that may serve as a source of bleeding or as a port of entry for blood-borne pathogens. 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.



2. The necessary equipment and/or supplies important for compliance with universal 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.
3. 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. Any participant whose uniform is saturated with blood, regardless of the source, must have that uniform evaluated by appropriate medical personnel for potential infectivity and changed if necessary before return to participation.
4. 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.
5. Personnel managing an acute blood exposure must follow the guidelines for universal precaution. Sterile latex gloves should be worn for direct contact with blood or body fluids containing blood. Gloves should be changed after treating each individual participant and after glove removal, hands should be washed.
6. Any surface contaminated with spilled blood should be cleaned in accordance with the following procedures: With gloves on, the spill should be contained in as small an area as possible. After the blood is removed, the surface area of concern should be cleaned with an appropriate decontaminate.
7. Proper disposal procedures should be practiced to prevent injuries caused by needles, scalpels and other sharp instruments or devices.
8. After each practice or game, any equipment or uniforms soiled with blood should be handled and laundered in accordance with hygienic methods normally used for treatment of any soiled equipment or clothing before subsequent use. This includes provisions for bagging the soiled items in a manner to prevent secondary contamination of other items or personnel.
9. Finally, all personnel involved with sports should be trained in basic first aid and infection control, including the preventive measures outlined previously.

**The University of West Alabama  
Athletic Training Education Program  
OSHA Compliance Statement**

Blood borne pathogens are disease causing microorganisms that may be present in human blood. Two pathogens that are of special importance to athletic trainers are Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV). Hepatitis B directly affects the liver by resulting in swelling, soreness, and the loss of normal functions to the liver. Human Immunodeficiency Virus affects the immune system by destroying the T-cells which helps prevent disease. At this time, there is no known cure for either. At this time there is a vaccine for prevention of HBV that is available.

All individuals working within The University of West Alabama Athletic Training & Sports Medicine Center are anticipated to come in contact with blood or other infectious materials while performing their duties. The potential for exposure not only exists in the athletic training rooms, but also on the practice and/or competition fields.

**These potential areas of exposure and disease transmission as well as, techniques of transmission prevention are documented and outlined in the “Health and Safety Policy of The University of West Alabama Athletic Training Education Program”, I have been given. I have read, understand, and will follow the “Health and Safety Policy of The University of West Alabama Athletic Training Education Program”. I also understand that I must take part in yearly in-service programs on the OSHA guidelines and universal precautions.**

**Year 1 Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Staff Signature / Witness** \_\_\_\_\_ **Date** \_\_\_\_\_

**Year 2 Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Staff Signature / Witness** \_\_\_\_\_ **Date** \_\_\_\_\_

**Year 3 Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Staff Signature / Witness** \_\_\_\_\_ **Date** \_\_\_\_\_

**Year 4 Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Staff Signature / Witness** \_\_\_\_\_ **Date** \_\_\_\_\_

**Year 5 Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Staff Signature / Witness** \_\_\_\_\_ **Date** \_\_\_\_\_

**The University of West Alabama  
Athletic Training Education Program  
Hepatitis B Vaccine Waiver Form**

All athletic trainers, who have been identified as being at risk for exposure to blood or other potentially infectious materials, are offered the Hepatitis B vaccine. The three stage vaccine is offered through The University of West Alabama's team physician, Dr. William Simpkins or the Marengo County Health Department (Demopolis, AL) at minimal cost to the athletic training student. Dr. Simpkins cost is \$260 and Marengo County Health Department \$5 to administer the vaccine and approximately \$60 for the prescription at The Drug Store in Livingston. The Sumter County Health Department will provide the vaccine and injection FREE if you are Nineteen Years of age or younger.

I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring the Hepatitis B Virus (HBV). I wish to be vaccinated at this time at one of the above locations.

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**Student Signature**

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**Date**

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**Student Signature**

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**Date**

I have been given the opportunity to be vaccinated. However, I decline the vaccine at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with the Hepatitis B vaccine, I can receive the vaccination series at the above expense through one of the above locations.

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**Student Signature**

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**Date**

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**Student Signature**

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**Date**

**CONFIDENTIALITY STATEMENT**  
for  
**ATHLETIC TRAINING STUDENTS**

I, \_\_\_\_\_, understand that information in the  
Please Print Full Name  
offices of the Athletic Training Room and the Athletic Department of The University of West Alabama is confidential and may not be divulged to anyone except the person who owns the information, those faculty, staff, or administrators who have need to know and those individuals or agencies who fulfill the requirements under the Federal Educational Rights and Privacy Act of 1974, as amended (FERPA) and the Health Insurance Portability and Accountability Act (HIPAA). If I release confidential information or discuss confidential information outside of the office, I understand that I will be immediately discharged from the Athletic Training Education Program.

I have read the above statement and agree to maintain the confidentiality of all information that I have access to through this office.

\_\_\_\_\_  
Athletic Training Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

## EMERGENCY PROCEDURES

### UWA Key Medical Personnel & Emergency Contacts

Name	Title	Work Phone	Home Phone
Dee Outlaw	Director of Athletics	(205) 652-3785	(205) 655-2221
Brad Montgomery, MAT, ATC	Head Athletic Trainer	(205) 652-3696	(205) 652-6821
Karen S. Straub, MS, ATC	Associate Athletic Trainer	(205) 652-3452	(205) 369-4285
Mike Smith, MS, ATC	Assistant Athletic Trainer	(205) 652-3509	(864) 201-3616
R. T. Floyd, EdD, ATC	Director of Athletic Training & Sports Medicine	(205) 652-3714	(205) 652-6185
Athletic Training Graduate Assistants' Office	Graduate Assistants Athletic Training	(205) 652-3451 (205) 652-3489	Elliott Carter (601) 595-5800 Jeremy Criscuolo (203) 623-9534 Matt Dalrymple (256) 394-8319 Bruno Sudito (518) 928-9878
William R. Simpkins, M.D	Team Physician	(205) 652-2686	(205) 652-2208
James R. Andrews, M.D.	Team Orthopaedist	(205) 930-0061 or 939-3000	(205) 871-2628 car phone (205) 936-8203
Richard Sanders, M.D.	Medical Director, Team Orthopaedist	(205) 930-0061 or 939-3000	(205) 991-0718
Lyle Cain, M.D.	Team Orthopaedist	(205) 930-0061 or 939-3000	(205) 568-4133
Renee' Riley, M.D.	Orthopaedic Fellow	(205) 930-0061 or 939-3000	
Craig Rubenstein, M.D.	Family Practice/Sports Medicine Fellow	(205) 930-0061 or 939-3000	
Other numbers to contact team physicians in Birmingham	Alabama Sports Medicine & Orthopaedic Center	(205) 939-3000 or 930-0061 after hours number (205) 930-7044	Surgery viewing room (205) 930-7407
HEALTHSOUTH Medical Center		(205) 930-7000	
Darrell Hoggle, DMD	Team Dentist	(205) 652-7114	(205) 652-2269
T. C. Looney, DMD	Team Dentist	(205) 652-9521	(205) 652-7731
Ambulance Service	City of Livingston Ambulance Service	911	(205) 652-9525
Police Department	City of Livingston Police Department	911	(205) 652-9525
Campus Police	UWA Campus Police	(205) 652-3682	
Local Hospital	Hill Hospital, York, AL	(205) 392-5263	
Jason Hughes	Sports Information Director	(205) 652-3596	(205) 652-6106
Kathy Truelove	Football/Athletic Training Secretary & Insurance Claims	(205) 652-3483	(205) 652-
Penny Dew	Athletic Department Secretary	(205) 652-3784	(205) 652-7977
	Homer Field House Athletic Training Room	(205) 652-3450 (205) 652-3263	1-800-621-7742 in state 1-800-621-8044 out of state
	Pruitt Hall Athletic Training Room	(205) 652-3455 (205) 652-3403	1-800-621-7742 in state 1-800-621-8044 out of state
Football Practice Field	Call UWA Physical Plant	(205) 652-3601	
Baseball Complex	Tartt Baseball Field	205) 652-2579	
Softball Complex	UWA Softball Complex		
Rodeo Complex	Don C. Hines Rodeo Complex	(205) 652-4100	
Fax Numbers	Athletics, Sports Information, & Athletic Director	(205) 652-3600	
Fax Number	Athletic Training & Football	(205) 652-3799	

## **Athletes to the Hospital**

Athletes that need immediate attention by the hospital or the team physician should be transported to Hill Hospital in York, Alabama. Upon arrival the attending athletic trainer should notify the nurse on duty of the problem. The nurse will then contact the team physician and/or the x-ray technician. The attending athletic trainer should make himself/herself available to talk with the physician if necessary unless he is needed to help care for the athlete. The attending athletic trainer should keep in mind that he is not finished with his/her job because he/she has delivered the athlete to the hospital. **DO NOT** leave the athlete until the hospital staff and physicians are in control of the situation and you have been relieved. The attending athletic trainer is responsible for the athlete's equipment and clothing. He or she should bring the equipment and clothing, back to the university and place it in the athlete's locker and then deliver the personal clothes to the athlete. The attending athletic trainer is to report to their supervising athletic trainer, as soon as he or she is no longer needed at the hospital.

## **Road Trip Emergency Medical Procedure**

Whenever traveling with a university athletic team and an athlete requires hospitalization or a physician's attention, you should always adhere to the following procedure.

- If at all possible, wait until you reach Livingston before seeking medical attention. However, the athlete's health and well being is most important. If you are in doubt, quickly seek the closest medical attention. Always err on the side of good judgment.
- If you are near the opponent's hometown, always seek help from the opponent's athletic trainer and team physician, if possible.
- Always introduce yourself to the opponent's athletic trainer and/or team physician before the athletic contest begins. If an emergency arises, they will already be familiar with you.
- Always offer your services to an injured opponent, even if you are at his home facility. In certain situations you may be the most knowledgeable in the area of sports medicine if the opponent does not have an athletic trainer or physician present. Never force yourself or your services on an injured opponent; leave the decision to them and their coach.
- Always carry insurance and medical history information on your athletes in your kit.
- Whenever our athletes need medical attention out of town, first file all bills to his/her insurance, then any subsequent bills should be charged to the athlete at his/her home address. Copies should be sent to the head athletic trainer at the university's address (UWA, Station #14, Livingston, AL 35470).
- Contact the head athletic trainer as soon as possible if the injury is serious. The head athletic trainer may then contact the athlete's parents and/or spouse.
- Attending athletic trainers may stay with the injured athlete at the hospital if necessary. This should not be done unless there are other university athletic trainers to cover potential injuries of the remaining team members. There is always the possibility of a more serious injury to another team member.
- If the head or other staff athletic trainers cannot be reached by telephone, then the student athletic trainer should leave his/her number with the University Campus Police and have them locate a staff athletic trainer as soon as possible.
- Only medical treatment that is absolutely necessary should be administered by non-university medical personnel; if possible, all secondary medical treatment should be handled by the university medical staff.

## **Emergency Procedure at Home Competitions or Practices**

The highest ranking athletic trainer stays with the injured athlete until transportation is complete or the situation is turned over to EMT's and/or team physician(s). This procedure applies to potential serious head injuries, potential spinal cord injury, vertebral fractures and dislocations, heat stroke victims, cardiac patients, any unconscious athlete, any athlete with convulsions, or any serious unstable condition. It is the responsibility of the other athletic trainers to quickly find out as much as possible about the involved athlete and his condition before departing with the athlete to the medical facility. This is important, as he/she will need to relate this information to other medical personnel. Each and every UWA athletic trainer should make themselves aware of the surroundings in relation to emergencies upon arrival at every practice to look for potential injury situations that can be prevented. Each UWA athletic trainer has a responsibility if an emergency arises. Once it is determined that the EMS system must be activated, attempt to help by doing one of the following things:

1. **The athletic trainer should always try to remain calm in any crisis; also as the athletic trainer approaches the injured athlete he/she should quickly examine the scene and secure it before trying to help the athlete.**

2. With the scene secure the athletic trainer should try to talk to the athlete. If the athlete is unresponsive then the athletic trainer should assume that the athlete has at least a head or spinal injuries and secure the c-spine. If other athletic trainers are present the athletic trainer with the most seniority will aid in the evaluation, also another athletic trainer will go and activate the local EMS unit only at the request of the senior athletic trainer (on the scene).
3. The athletic trainer holding the c-spine should be able to check or conduct a primary survey checking the airway, breathing, and circulation. The other athletic trainer(s) should start gathering information about the injury from other players or witnesses.
4. If the athlete is conscious and coherent the assisting athletic trainer should question the athlete about his/her injury, i.e., what happened or what were you doing when, etc. The assisting athletic trainer should do a secondary survey while the athlete is talking.
5. If possible find if the athlete has any predisposing factors, i.e., diabetes, previous heat problems, etc. Also, if the injury is not head or spinal cord related the athletic trainer holding the c-spine may release it only after permission from the most senior athletic trainer on site.
6. The athletic trainer should always be aware of the possibility of the athlete going into shock at any time after an injury no matter how minor the injury may appear, and the athletic trainer must be prepared to manage it. The athlete should not be moved under most circumstances with the exception of heat illness.
7. The athletic trainers evaluating and attending to the athlete should stay with the athlete and wait for the ambulance to arrive and transport the athlete. Another athletic trainer should go to the entrance of the practice area and wait for the ambulance to arrive and direct them to the scene. When the ambulance arrives, one of the athletic trainers will relay all information including vital signs, evaluation results, and any special problems to the EMT's. Another athletic trainer should get the insurance and medical history information of the athlete. The athlete's insurance information is to be taken to the hospital by the athletic trainer riding with the athlete on the ambulance.
8. One athletic trainer is to ride in the ambulance with the athlete to the health care facility. Another will get the state vehicle and follow the ambulance to the hospital.
9. Always have someone contact the head athletic trainer or one of the senior athletic trainers immediately if they are not on site.
10. Never leave the scene unless another athletic trainer is on site to monitor the remaining athletes as the practice or game continues.
11. If it is a visiting team, assist the attending visiting athletic trainer however they deem appropriate without breaking the above actions.

#### **Volleyball, Men's and Women's Basketball Emergency Procedures (Pruitt Hall)**

1. The athletic trainer(s) should evaluate the injured athlete. If there is an emergency then one of the athletic trainers should go to the Pruitt Hall Athletic Training Room and call the local EMT's and give them the emergency information. They should also call the head athletic trainer or one of the senior athletic trainers and inform them of the situation.
2. While one athletic trainer is calling for help, the other attending athletic trainer should be doing a primary survey. If the injury is not believed to be a head or spinal injury, then the attending athletic trainer should perform a secondary survey. The athletic trainer who called 911 should report back to the attending athletic trainer and then go outside and wait for the ambulance and EMT's to arrive.
3. Any other athletic trainer in attendance should stay around the scene, identify themselves and offer assistance. The attending athletic trainer(s) should always be prepared to treat them for shock at any time after the injury and should know the best way to manage it. At any time after the head athletic trainer and/or senior athletic trainer(s) arrive at the scene the attending athletic trainer should be willing to turn the athlete over to them with all of the information collected thus far.
4. When the ambulance arrives at the gymnasium the athletic trainer waiting on them will lead them, via the established EMS route, to the injured athlete and help them in any way possible. When the EMT's arrive at the scene the attending student athletic trainer should give them the vital signs and all of the background information about the athlete. Also, a copy of the athlete's insurance form and emergency information should be provided and be prepared to leave with the athlete in the ambulance.

#### **Baseball Emergency Procedures (Tartt Field)**

1. When an injury occurs, the athletic trainers should go on to the field to evaluate the injured athlete. If the injury is life threatening, one of the athletic trainers should go to the press box or coach's office and activate the local

- EMS service and inform them of the emergency. Also, call the head athletic trainer or one of the senior staff athletic trainers and tell them of the injury. He/she should then report back to the attending athletic trainer.
2. While one athletic trainer is enacting the EMS system the attending athletic trainer should do a primary survey and check the level of consciousness, if possible, or if the case of a head or spinal injury hold c-spine and wait. After the non-attending athletic trainer enacts the EMS system and has reported to the attending athletic trainer, he/she should help the attending athletic trainer do a primary survey and/or a secondary survey on the athlete. When that is complete the non-attending student athletic trainer should go and make sure that the ambulance has easy access to the field and that all necessary gates are open via the established EMS route.
  3. The attending athletic trainer must be aware that the athlete could go into shock at any time after an injury, so it is very important that the athletic trainer be able to recognize the early signs of shock and be able to manage it. The athlete should not be moved unless absolutely necessary.
  4. When the ambulance arrives at the field and the EMT's approach the athlete, the attending athletic trainer should give them all of the information gathered such as, the mechanism of injury, vital signs, time of injury, and progressing level of consciousness. When the ambulance is preparing to leave one of the athletic trainers should have a copy of the athlete's insurance and brief medical outline and leave with the athlete to go to the hospital.

### **Softball Emergency Procedures (UWA Softball Complex)**

1. When an injury occurs, the athletic trainers should go on to the field to evaluate the injured athlete. If the injury is life threatening one of the athletic trainers should use to the nearest phone (cellular phone, The UWA Student Union Building, or the UWA Physical Plant) to activate the local EMS service and inform them of the emergency. Also, call the head athletic trainer or one of the senior staff athletic trainers and tell them of the injury. He/she should then report back to the attending athletic trainer.
2. While one athletic trainer is enacting the EMS system the attending athletic trainer should do a primary survey and check the level of consciousness, if possible, or if the case of a head or spinal injury hold c-spine and wait. After the non-attending athletic trainer enacts the EMS system and has reported to the attending athletic trainer, he/she should help the attending athletic trainer do a primary survey and/or a secondary survey on the athlete. When that is complete the non-attending student athletic trainer should go and make sure that the ambulance has easy access to the field and that all necessary gates are open via the established EMS route.
3. The attending athletic trainer must be aware that the athlete could go into shock at any time after an injury, so it is very important that the athletic trainer be able to recognize the early signs of shock and be able to manage it. The athlete should not be moved unless absolutely necessary.
4. When the ambulance arrives at the field and the EMT's approach the athlete, the attending athletic trainer should give them all of the information gathered such as, the mechanism of injury, vital signs, time of injury, and progressing level of consciousness. When the ambulance is preparing to leave one of the athletic trainers should have a copy of the athlete's insurance and brief medical outline and leave with the athlete to go to the hospital.

### **Football Emergency Procedures (Tiger Stadium)**

1. When a football player is injured on the playing field the head athletic trainer, assistant athletic trainer, or director of sports medicine, and the student athletic trainer on primary field watch go to the athlete to evaluate the problem. If the athlete is unconscious when they arrive the closest person to the head of the athlete should hold cervical stabilization, while one of the other athletic trainers performs a primary survey. On the sidelines, the athletic trainer with secondary injury management should be able to see one of the attending athletic trainers and watch for the signals for the emergency equipment. The signals for the c-collar and spine board are as follows: for the c-collar both hands clasped around the neck and for the spine board take both hands with thumbs extended and point to the spine with them. Also, the athletic trainers should take the face mask removal tool out of the white trunk when they get the c-collar, to cut off the face mask, if necessary.
2. If the one of the staff athletic trainers believe the injury to be life threatening or a serious head injury then they should send for the emergency equipment and the team physician. One of the athletic trainers should then proceed to the ambulance and direct them in to the scene (or go into Homer Field House and enact the EMS from one of the phones if the ambulance happens to not be on the scene).
3. While that is going on, the athletic trainer with emergency transportation should get the insurance and emergency information from the field kit to take with them on the ambulance. The team physician should be with the injured athlete by this time and should be doing a diagnostic examination. Another athletic trainer will get the state vehicle and follow the ambulance to the health care facility and report by phone any outcome to the senior staff athletic trainers. Make sure all equipment is gathered and returned when you return form the health care facility.



### **Football Emergency Procedures (Practice Field)**

1. When an athlete is injured the athletic trainer closest to the athlete should carefully approach the athlete and secure the scene before trying to help the athlete.
2. The first athletic trainer at the scene must establish the level of consciousness of the athlete. If the athlete appears dazed or unconscious the athletic trainer must assume the athlete has a spinal injury and should stabilize the cervical spine. After this is done that athletic trainer should do a quick primary survey checking the airway, breathing, and circulation. When a senior staff athletic trainer arrives at the scene the athletic trainer holding c-spine should give all the information found so far to him/her. The senior staff athletic trainer should make the decision to call the ambulance. One athletic trainer will go to the UWA physical plant and call 911 (or use on-site cellular phone). Another will clear a pathway from the gate to the scene, via the established EMS route. Another will get all emergency equipment needed and bring it to the scene.
3. The senior staff athletic trainer should do a secondary survey and check the vital signs of the injured athlete. The athletic trainer should also be aware that the athlete may go into shock at any time after the injury, so he/she must be looking for any sign of shock while evaluating the athlete and be prepared to manage it.
4. When the ambulance arrives at the field the senior staff athletic trainer should give the EMT's all information about the athlete including vital signs, level of consciousness, and mechanism of injury. One athletic trainer should have the athlete's insurance and emergency information ready and he/she should be ready to leave with the athlete to go to the hospital. Another athletic trainer will get the state vehicle and follow the ambulance to the health care facility. Make sure all equipment is gathered and returned when you return from the health care facility.

### **Rodeo Emergency Procedure (UWA Rodeo Complex)**

1. When an injury occurs, both athletic trainers should go in to the arena to evaluate the injured athlete (**make sure the scene is safe to enter; animals**). If the injury is life threatening one of the athletic trainers should go to the phone located in the coach's trailer or Rodeo Barn (or onsite cellular phone) and activate the local EMS service and inform them of the emergency. Also, call the head athletic trainer or one of the senior staff athletic trainers and tell them of the injury. He/she should then report back to the attending athletic trainer.
2. While the non-attending athletic trainer is enacting the EMS system the attending athletic trainer should do a primary survey and check the level of consciousness, if possible, or in the case of a head or spinal injury hold c-spine and wait. After the non-attending athletic trainer enacts the EMS system and has reported to the attending athletic trainer, he/she should help the attending athletic trainer do a primary survey and/or a secondary survey on the athlete. When that is complete, one of the athletic trainers should go and make sure that the ambulance has easy access to the arena and that all necessary gates are open via the established EMS route.
3. The attending athletic trainer must be aware that the athlete could go into shock at any time after an injury, so it is very important that the athletic trainer be able to recognize the early signs of shock and be able to manage it. The athlete should not be moved unless absolutely necessary.
4. When the ambulance arrives at the field and the EMT's approach the athlete, the attending athletic trainer should give them all of the information gathered such as, the mechanism of injury, vital signs, time of injury, and progressing level of consciousness. When the ambulance is preparing to leave one of the attending athletic trainers should have a copy of the athlete's insurance and brief medical outline and leave with the athlete to go to the hospital.

### **Cross country Emergency Procedure (anywhere on campus)**

1. When an injury occurs, the athletic trainer should approach the athlete to evaluate the injury. If the injury is life threatening the athletic trainer should have either the coach or another teammate go to the nearest phone (**undetermined at this time, due to daily changes in practice areas**) or use an onsite cellular phone and activate the local EMS service and inform them of the emergency. Also, call the campus police and have them inform the head athletic trainer or one of the senior staff athletic trainers of the injury. He/she should then report back to the attending athletic trainer.
2. While someone is enacting the EMS system, the attending athletic trainer should do a primary survey and check the level of consciousness, if possible, or if the case of a head or spinal injury hold c-spine and wait. After enacting the EMS system and reporting to the attending athletic trainer, he/she should be instructed to help the attending athletic trainer by going and clearing a path to the injured athlete and directing EMS personnel to the scene. (**There cannot be an established EMS route due to practice not restricted to one location**)

3. The attending athletic trainer must be aware that the athlete could go into shock at any time after an injury, so it is very important that the athletic trainer be able to recognize the early signs of shock and be able to manage it. The athlete should not be moved unless absolutely necessary.
4. When the ambulance arrives at the field and the EMT's approach the athlete, the attending athletic trainer should give them all of the information gathered such as, the mechanism of injury, vital signs, time of injury, and progressing level of consciousness. When the ambulance is preparing to leave the athletic trainer should have a copy of the athlete's insurance and brief medical outline to leave with the EMT's. The attending should make sure they find out where the athlete is being taken by EMS. Once the ambulance has left, the attending athletic trainer should relay the information to the one of the senior staff athletic trainers.

### **Cheerleading Emergency Procedure (Anywhere on campus)**

1. When an injury occurs, the student athletic trainer should approach the athlete to evaluate the injury. If the injury is life threatening the student should have either the coach or another teammate go to the nearest phone (**undetermined at this time, due to daily changes in practice areas**) or use an onsite cellular phone and activate the local EMS service and inform them of the emergency. Also, call the campus police and have them inform the head athletic trainer or one of the senior staff athletic trainers of the injury. He/she should then report back to the attending athletic trainer.
2. While someone is enacting the EMS system the attending athletic trainer should do a primary survey and check the level of consciousness, if possible, or if the case of a head or spinal injury hold c-spine and wait. After enacting the EMS system and reporting to the attending athletic trainer, he/she should be instructed to help the attending athletic trainer by going and clearing a path to the injured athlete and directing EMS personnel to the scene. (**There cannot be an established EMS route due to practice not restricted to one location**)
3. The attending athletic trainer must be aware that the athlete could go into shock at any time after an injury, so it is very important that the athletic trainer be able to recognize the early signs of shock and be able to manage it. The athlete should not be moved unless absolutely necessary.
4. When the ambulance arrives at the field and the EMT's approach the athlete, the attending athletic trainer should give them all of the information gathered such as, the mechanism of injury, vital signs, time of injury, and progressing level of consciousness. When the ambulance is preparing to leave the athletic trainer should have a copy of the athlete's insurance and brief medical outline to leave with the EMT's. The attending athletic trainer should make sure they find out where the athlete is being taken. Once the ambulance has left, the attending student should relay the information to one of the senior staff athletic trainers.

### **EMERGENCY PLAN RELATED INFORMATION**

**Weather events:** In the case of inclement weather, the attending athletic trainer will recommend to the head coach that practice or competition be terminated (the ultimate decision will be with the attending athletic trainer). Decisions will be based on NCAA recommendations concerning threatening weather. All personnel will immediately seek shelter at designated areas, (football practice-Moon Hall loading dock, football game-Homer Field House locker room, baseball-dugout or locker room, softball-dugout or locker room, rodeo-barn, cross country-nearest safe shelter to the area they are running at). Of note, once a game or competition has begun, the umpire or official holds the responsibility of game termination. The athletic director has the authority to override the official's decision in the case of inclement weather. Also, all issued weather warnings will be heeded by all of UWA's athletic teams. The University's Campus Police are to go to each venue and warn them of any impending thunderstorm or tornado warnings. Refer to the Lightning Safety Policy.

### **Location of all phones**

Phones for emergency actions are available for the following sports at the following locations in the event that an onsite cellular phone is not accessible:

1. **Tiger Football stadium:** access to a phone is located within James P. Homer field house on either the first or second floors: in the taping room (#116), equipment room (#113), secretary's office (#221), and the athletic training room (#216).
2. **Football practice field:** access to a phone at the practice field is located across the street in Moon Hall (physical plant). After regular hours you must enter the left hand, side door to reach a phone in the first office to the right.
3. **Pruitt Hall Gymnasium:** phone access in Pruitt Hall is located in Room #28 (PE Office) or #32 (athletic training room).

4. **Don C. Hines Rodeo Complex:** Phone access is located in the barn office, which the first door to the right past the main entrance to the barn. Additionally, there is a phone located within the rodeo coach's trailer.
5. **UWA Softball Complex:** At this time there is **no** phone access at the site. The nearest location is to send someone to call at the Student Union Building to use the phone, upstairs by the main entrance.
6. **Tartt Baseball Field:** Phone access is located in the Baseball Press Box, behind home plate or in the coaches' offices, 2<sup>nd</sup> floor above the 1<sup>st</sup> base dugout.

## UNIVERSITY OF WEST ALABAMA ATHLETIC DEPARTMENT Lightning Safety Policy

Lightning is a dangerous phenomenon. Athletic teams that practice and compete outdoors are at risk when the weather is inclement. The Athletic Training staff has developed a lightning safety policy to minimize the risk of injury from a lightning strike to University of West Alabama athletes, coaches, support staff and fans. To monitor lightning the Athletic Training staff will utilize both the Flash-to-Bang Method and a SkyScan Lightning/Storm Detector. Our policy is in accordance with the *2003-2004 NCAA Sports Medicine Handbook* regarding lightning safety.

**GENERAL POLICY:** A member of the Athletic Training Staff (certified or student staff) will monitor the weather and make the decision to notify the head coach or officials of dangerous situations and recommend the suspension of activity in the event of lightning. Exceptions will be made for any activity where an Athletic Training staff member is not in attendance, whereby the supervising coach will have the ability to suspend activity. The decision to suspend activity will be based on:

- ◆ Two subsequent readings on the SkyScan Lightning/Storm Detector in the 8-20 mile range regardless of the presence of visible lightning. (This device is portable and will be in the possession of the athletic training staff member or supervising coach.) and/or
- ◆ Utilization of the **Flash-to-Bang Method** (Count the seconds from the time the lightning is sighted to when the clap of thunder is heard. Divide this number by five to obtain how far away, in miles, the lightning is occurring.) *2003-2004 NCAA Sports Medicine Handbook*. If it reveals lightning to be within 6 miles (a 30 second count between the flash of lightning and the bang of thunder) activity is to be suspended and everyone should seek shelter immediately.

**PRIOR TO COMPETITION:** A member of the Athletic Training staff and/or Athletic Director will greet the officials, explain that we have a means to monitor the lightning, and offer to notify the officials during the game if there is imminent danger from the lightning. The Athletic Director and game officials will then decide whether to discontinue play.

**ANNOUNCEMENT OF SUSPENSION OF ACTIVITY:** Once it is determined that there is danger of a lightning strike, the Athletic Training staff member will notify the head coach and/or official and subsequently immediately remove all athletes, coaches, and support staff from the playing field or practice area/facility.

**EVACUATION OF THE PLAYING FIELD:** Immediately following the announcement of suspension of activity all athletes, coaches, officials and support personnel are to evacuate to the nearest enclosed grounded structure.

**OUTDOOR INSTRUCTIONS:** If no safe structure or location is within a reasonable distance, find a thick grove of small trees surrounded by taller trees, a dry ditch without water, or seek a flat area (do not chose an open area where you will be the highest object). When there, crouch down wrapping your arms around your knees and lower your head to minimize contact with the ground and wait for the storm to pass. (*2003-2004 NCAA Sports Medicine Handbook*)

**REMEMBER:** an automobile, golf cart, or open shelter are not ideal shelters, but will offer you some protection from a lightning strike. Do not touch any metal structures directly after a lightning strike.

### **At UWA**

- Football Practice: Evacuate to the loading dock of Moon Hall (Physical Plant)
- Football Game: Evacuate to the locker room in Homer Field House

- Softball Game or Practice: Evacuate to the dugouts (both teams)
- Baseball Game or Practice: Evacuate to the dugouts (both teams)
- Cross Country Race or Practice: Nearest suitable structure. (see above for outdoor instructions)
- Rodeo: Evacuate to the barn or nearest suitable structure (see above for outdoor instructions)

**Away Events:** All UWA athletic teams participating outdoors will travel with the SkyScan Lightning/Storm Detector. A member of the Athletic Training staff will notify the host Athletic Training staff member and game officials before competition and explain that we have a means to monitor the lightning. We will offer to notify the officials during the game if there is imminent danger from the lightning. The UWA Athletic Training staff reserves the right to discontinue playing, in the event the game officials have not suspended play with the knowledge of inclement weather.

**EVACUATION OF THE STANDS:** During a competition, once the decision to suspend activity has been made, a representative of the athletic department will announce via the PA system:

1. Fans are advised to immediately seek shelter in the nearest enclosed, grounded shelter. (Football-Pruitt Hall, Armory, or vehicles, Softball-Student Union Building or vehicles, Baseball-vehicles, Rodeo-Barn or vehicles)
2. REMEMBER: an automobile, golf cart, or open-sided shelter may not protect you from a lightning strike so these are not adequate shelters.

**RESUMPTION OF ACTIVITY:** During practice, activity may resume under the following conditions. This decision will be based on:

- ◆ Thirty minutes AFTER the last lightning strike within an 8-20 mile range on the SkyScan Lightning Detector.
- ◆ Thirty minutes AFTER the last lightning strike within a 6-mile range using the Flash-To-Bang method. During a game situation the activity will resume once the Athletic Director, Athletic Training staff member and officials have conferred and the above criteria have been met.

**OTHER LIGHTNING SAFETY TIPS:** (2003-2004 NCAA Sports Medicine Handbook)

1. There should be no contact with metal objects (bleachers, fences, golf clubs, bats)
2. Avoid single or tall trees, tall objects and standing in a group.
3. If there is no other shelter you may seek refuge in a hardtop vehicle. It is not the rubber tires that protect from lightning; it is the hard top metal roof that dissipates the lightning around the vehicle.
4. The existence of blue skies and/or absence of rain are not protection from lightning. Lightning can strike 10 miles from the rain shaft.
5. **DO NOT LIE FLAT ON THE GROUND**
6. Avoid using a land line telephone. Cell phones are a safe alternative if in a safe structure.
7. Avoid standing water and open fields
8. If in a forest, seek shelter in a low area under a thick grove of small trees.
9. **If you feel your skin tingling immediately crouch and grab your legs and tuck your head as described above to minimize your body's surface area.**
10. Persons who have been struck by lightning do not carry an electrical charge. Therefore, enact the EMS system and provide emergency care. CPR is what is most often required. If possible, move the victim to a safe location.
11. For additional information refer to the National Lightning Safety Institute at [www.lightningsafety.com](http://www.lightningsafety.com)

**DIRECTIONS FOR USING THE SKYSCAN LIGHTNING DETECTOR.**

1. Prior to practice or competition, monitor weather forecast via the Internet or by calling local agencies for up to date information.
2. Check for any National Weather Service-issued thunderstorm "watches" and "warnings".
3. Monitor the weather for the following: sudden decrease in temperature, increase in air movement, sudden increase in humidity, visible dark clouds (though these do not have to be present for a lightning strike to occur)
4. Communicate with officials and/or head coach prior to activity about potential for bad weather and our monitoring system.
5. Locate the SkyScan Lightning/Storm Detector in an area removed from other electronic devices or machinery, which could cause a false triggering.
6. The SkyScan Lightning/Storm Detector is designed to work in a vertical position.
7. Turn the unit on, by depressing the on/off switch

8. Allow the unit to perform a self-check and make sure all lights are working correctly.
9. If you are using the AC Adapter, depress the "Battery Save" button twice to extend the life of the back up batteries.
10. Press the tone button to activate the warning tone. (This must be done every time the lightning detector is turned on.)
11. Set the range of detection by depressing the "Range Select" button until the 8-20 mile light is illuminated.
12. Each time the SkyScan detects a lightning stroke it emits an audible warning tone for **1 second** (it is not very loud so if there is ANY chance of bad weather you must have the SkyScan out where you can see and hear it).
13. Following the beep the lightning Range Indicator column will light up for approximately 3 seconds. The single indicator corresponding to the range of the detected stroke will blink for approximately 25 seconds.
14. Activity will be suspended when:
  - A. The SkyScan registers 2 consecutive lightning strokes within the 8-20 mile range
  - B. The Flash/Bang Method reveals lightning within a 6 mile range (30 second or less count between the flash of lightning and the bang of thunder)
15. Once you have determined that there is imminent danger of a lightning strike, communicate to the head coach and/or head official.
16. Evacuate the field and stands to an enclosed-grounded building. REMEMBER, a golf cart, automobile, or open shelter does not provide protection from a lightning strike. If there is no available shelter IE, cross-country, each individual should see an area that is flat and in the open. Crouch down wrapping your arms around your knees and remain in that position until the danger of lightning has passed.
17. Activity may be resumed only IF the danger of a lightning strike is no longer present. This decision to resume activity is to be made by a member of the Athletic Training Staff, Athletic Director or Head Official.
18. The SkyScan can also detect severe weather conditions (high winds, tornadoes, etc) that may pose a threat to human life. The severe weather audible warning lasts for 15 seconds and the corresponding indicator on the unit lights up.

#### FLASH-to-BANG Lightning Detection Method

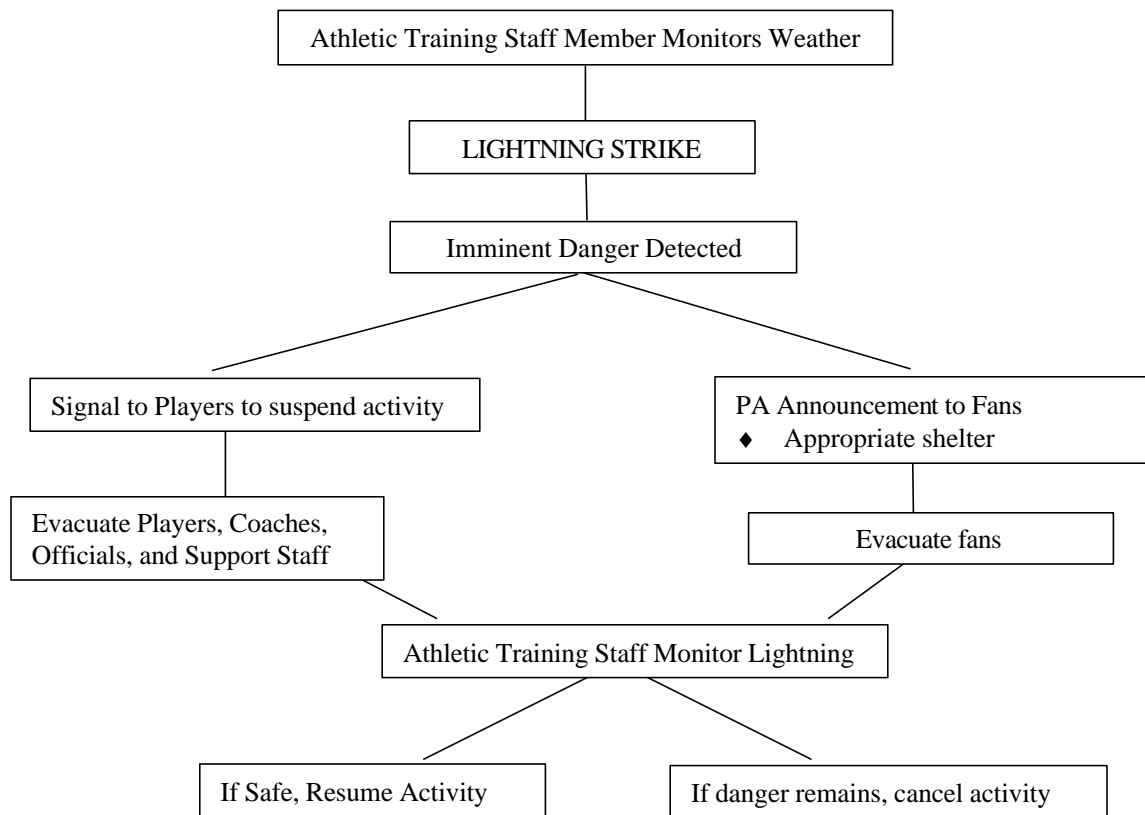
This method of lightning detection should be used in conjunction with the SkyScan.

1. Prior to practice or competition, monitor weather forecast to include calling local agencies for up to date information.
2. Watch for the flash of lightning.
3. Begin to count (one one thousand, two one thousand . . . .)
4. Stop counting when you hear the bang of thunder.
5. Take this number and divide by 5. This will give you an approximation of how far away the lightning is (5 seconds = 1 mile). EXAMPLE: You see a flash of lightning and you begin to count. You reach 45 before you hear the bang of thunder.  $45 \div 5 = 9$ . The lightning would be approximately 9 miles away. Using this method you would suspend activity with lightning at or within 6 miles.
6. Activity is resumed with the permission of a member of the Athletic Training Staff 30 minutes after the last lightning detected at or within 6 miles.

#### SCRIPT FOR CONVERSATION WITH OFFICIAL

Hello, my name is \_\_\_\_\_. I am a member of the University of West Alabama Athletic Training Staff. I would like to speak with you regarding our lightning safety procedures. On site we have a lightning detector which I will use to monitor lightning. In accordance to NCAA recommendations, lightning detected within 8-20 miles is considered to pose an imminent threat. Per UWA's lightning safety policy, when the lightning detector reveals 2 consecutive strikes within the 8-20 mile range OR the flash/bang method reveals lightning less than 6 miles we strongly recommend suspending activity until the danger of a lightning strike has passed. We have a communication system to inform all participants and any fans.

### Chain of Action for Lightning Emergencies



#### Lightning Detection Procedures for Athletes during Non Supervised Activities

Examples: athletes using facilities in the off season, or outside of regular practice hours

Lightning is a dangerous phenomenon. Athletic teams that practice and compete outdoors are at risk when the weather is inclement. The safest measure to take is to proceed indoors whenever you see thunderclouds forming and remain until the storm passes. Just because you can not see lightning does not mean you are not at risk if you are outdoors. Other warning signs of impending bad weather include: sudden decrease in temperature, sudden change in humidity, increase in air movement, and visible dark storm clouds (though these are not always present during a lightning strike). The Athletic Training staff has a lightning detection policy in place for practices and games; however, we are aware that athletes often use UWA’s athletic facilities when there is no supervision by the coaches. In the event athletes are using the facilities without supervision, the Athletic Training staff would like to educate you and encourage you to use FLASH-to-BANG method to monitor the proximity of the lightning. **THE FLASH-to-BANG Method is an approximation of the distance of the lightning NO METHOD OF LIGHTNING DETECTION CAN DETECT EVERY STRIKE.**

The Flash-bang method of lightning detection:

#### 1. Auditory: Flash-to-Bang Theory

To use this method, count the seconds from the time the lightning “flash” is sighted to when the clap of thunder “bang” is heard. Divide this number by five to obtain how far away (in miles) the lightning is occurring. For example, if fifteen seconds are counted between seeing the “flash” and hearing the “bang”, fifteen divided by five equals three. Therefore, the lightning flash is approximately three miles away.

- ◆ Each five seconds equal one mile
- ◆ If the time between seeing the “flash” and hearing the “bang” is between 15-30 seconds (3-6 miles), teams should take precautions and seek shelter.

\*The National Severe Storms Laboratory recommends that by the time the spotter obtains a “flash-to-bang” count of fifteen seconds, all individuals should have left the athletic site and reached “safe shelter”.

PA ANNOUNCEMENT DURING INCLEMENT WEATHER

May I have your attention? We have been notified of approaching inclement weather. Activity will cease until we have determined it is safe and the risk of lightning is diminished. We advise you to seek shelter in the following areas:

AT UWA:

1. Football Game: Evacuate to Pruitt Hall Gymnasium, the armory, or your vehicle
2. Softball Game: Evacuate to the Student Union Building or your vehicle
3. Baseball Game: Evacuate to your vehicle
4. Cross Country Race: Suitable Structure, ditch without water, group of trees, your vehicle, etc.
5. Rodeo: Evacuate to the Rodeo Barn or your vehicle

Though protection from lightning is not guaranteed, you may seek shelter in an automobile.

Thank you for your cooperation.

COMPLIANCE STATEMENT FOR ALL ATHLETIC DEPARTMENT PERSONNEL

As a member of the University of West Alabama Athletic Department, I attest that I have read, understand, and will adhere to the University of West Alabama Athletic Department Lightning Safety policy.

Signature of staff member	Date
Witness signature	Date

**AED Policy**

Due to recent events where athletes have died as a result of sudden cardiac death, the University of West Alabama now has an automated external defibrillator (AED). The brand of the AED we have is the Zoll AED Plus. Its technical support is through SEMA, Inc. Medical Equipment and Supplies from whom we purchased the device. The AED is very user friendly and can be used by any staff athletic trainer, first responder, athletic training student, coach, or athletic department administration certified in AED usage by either the American Red Cross or American Heart. EMT or higher certification also meets the criteria for usage. Following is the guidelines for usage by an AED certified staff member. Of note, remember the highest risk group we will deal with is probably the fan in bleachers. Be prepared for a spectator to go into cardiac arrest and do not hesitate to use our AED on a spectator.

- ❖ When the AED is not in use at an athletic event or practice the AED will be stored in the Head/Assistant Athletic Trainer’s Office.
- ❖ Have the AED on site at each athletic facility or practice venue (currently, due to the fact that we only have one, this is not possible). The Director of Athletic Training & Sports Medicine, Head Athletic Trainer, or the Associate Athletic Trainer will determine the designation of the AED. The Director of Athletics will also be informed of the venue location of the AED. When selecting the site of the AED, the following must be taken into consideration:
  - Whether the sport is High Risk or Low Risk as denoted by the NCAA (high risk sports should have precedent over low risk sports). At UWA, football, rodeo, and men & women’s basketball are the highest risk sports, followed by volleyball, baseball & softball. The lowest risk sports are men & women’s cross-country.
  - The total number of participants and/or fans at the specific venues
  - All home contests will supersede practices, unless EMS is on site. If EMS is on site and activity is going on at another site (football and volleyball concurrently for example), our AED should be at the non-EMS covered site.

- When there are multiple sites the most centralized site should be chosen, all athletic trainers or first responders at the other sites are informed of this and have the ability to contact the site person (by land line or cellular phone) with the AED where it can be easily moved to another site quickly if an emergency arises.
- Remember Title IX; women have an equal right to all athletic medical equipment. When deciding on location, do not locate the AED at the male site always. Use the above criteria for decision-making, not gender.
- ❖ When an emergency arises and the AED is on site, it should be easily attainable from the emergency equipment location at each site.
- ❖ When it is determined by following the primary survey of standard first aid (responsiveness, breathing, circulation) that a cardiac emergency is taking place, the AED should be used only after enacting the EMS system. Another athletic training staff member, coach, athlete, or bystander can perform this action.
- ❖ After EMS is enacted, position supine, open airway, begins rescue breathing, and applies chest compressions in the correct sequence until the AED is in place.
- ❖ Apply the pads to the bare chest of the athlete in the fashion described on the pads or on the cover of the AED.
- ❖ Turn the AED on by pressing the on button
- ❖ Clear everyone from touching the victim to allow the AED to monitor the heart rhythm, Make sure the victim is not lying in water.
- ❖ After rhythm analysis is completed follow instructions of AED to deliver shock, begin CPR, or monitor vitals until EMS arrives (again make sure nobody is touching the victim when shock is to be delivered).

**Remember the AED is a fragile device. Care should be used when handling the AED. It should not be dropped, shaken, or stored where it could get wet or exposed to extreme heat. There is also a battery check on the exterior that should be checked periodically. As long as there is not an X in the window the batteries are charged. Replacement batteries are eight (8) Type 123 Lithium batteries.**

Priority for AED usage will be based on the following conditions:

- Competition/Scrimmage has priority over practice.
- Home games have priority over away games.
- Team priority:
 

1. Football	6. Softball
2. Men's Basketball	7. Cross Country
3. Women's Basketball	8. Volleyball
4. Baseball	9. Cheerleading
5. Rodeo	

Parameters used to determine priority include:

- Sudden cardiac death (SCD) occurs in male athletes more than female athletes.
- SCD occurs in black athletes more than any other race of athletes.
- Men's basketball has the highest reports of SCD followed closely by football.
- Blunt injuries to the chest can cause ventricular fibrillation.

### **Hours of normal operation of key personnel**

The UWA Athletic Training & Sports Medicine Center is open in the Fall Semester from 6:30am until 6:30pm, Monday through Friday. During the Spring Semester, the athletic training room will be open from 7:00am until 5:30pm. Additionally, the athletic training room will be open from 8:00am until 10:00am every Saturday during the Fall Semester. Regular treatment times for UWA athletes will be from 6:30am until 8:00am in the fall, 1:00pm until 3:00pm, and 5:00pm until 6:30pm. In the spring, the times will be from 7:00am until 8:00am, 1:00pm until 5:30pm. Any other treatment time for UWA athletes will be scheduled at the discretion of the attending athletic trainers.

Dr. William R. Simpkins, Local Team Physician, will be open Monday through Friday from 9:00am until 12:00 and 3:00 pm until 5:00pm, except on Wednesday when his office closes at noon. Any need of an athlete to see the physician will be handled through the athletic trainers and referred to Dr. Simpkins. Usually, clinic for all university students is from 12:30pm until 1:30pm at his office.

Alabama Sports Medicine and Orthopaedic Center is open Monday through Friday from 9:00am until 5:00pm. Arrangements for visits with any of the physicians will also be made through the athletic trainers.

The physician's clinic provided by the Alabama Sports Medicine and Orthopaedic Center will be performed by Dr. Lyle Cain and the fellows of Dr. James R. Andrews and Dr. William G. Clancy. The clinic will be on every Wednesday



during the Fall Semester from 9:00am until 11:00am. During the Spring Semester, clinic will be on every other Wednesday from 9:00am until 11:00pm. All athletes with injuries or injury follow-up will be scheduled during these times for evaluation.

**Therapeutic Modalities & Rehabilitation equipment available for use**

The James P. Homer Athletic Training Room has a wide variety of therapeutic modalities and rehabilitation equipment. The Pruitt Hall Athletic Training Room has a limited amount of therapeutic modalities and rehabilitation equipment. Due to the proximity of the two facilities, when there is a need for a specific therapeutic modality or piece of rehabilitation equipment in the Pruitt Hall Athletic Training Room it is moved from the James P. Homer Athletic Training Room and returned after usage.

**Therapeutic Modalities located in James P. Homer Athletic Training Room**

- Ice Machines (2)
- Eiden Galvanic Stimulator (1)
- Ice Storage Bin (1)
- Ice Cups
- Paraffin Bath
- Portable TENS unit (1)
- Shortwave Diathermy (1)
- Portable EMS unit (1)
- EMG Biofeedback unit (1)
- Whirlpools (2)
- Jobst Cryo-temp (1)
- Portable Cervical Traction Unit
- Jobst Intermittent Compression Unit (1)
- Aircast Cryocuff compression dressing with attachments (3)
- Mettler Interferential 220 stimulator (2)
- Excel Ultra Max Ultrasound (1)
- Chattanooga Intellect VMS II (1)
- Mettler Sonicator 720 Ultrasound (1)
- Hydrocollator Moist Heat Unit with moist steam packs, standard and cervical (1)
- One Freezer containing various commercial cryotherapy packs
- Excel Multi III stimulator with interferential, premodulated, Russian, biphasic and microcurrent stimulation (1)

**Therapeutic Modalities located in Pruitt Hall Athletic Training Room**

- Portable Hydrocollator Moist Heat Unit with moist steam packs, standard and cervical (1)
- True Trac Traction Unit (1)

**Rehabilitation Equipment located in James P. Homer Athletic Training Room**

- Stationary Bikes (3)
- Swedish Exercise Ball (1)
- Shoulder Pulley Systems (3)
- Upper Body Ergometer (1)
- Step Up Block (2)
- TKE board (1)
- Total Gym (1)
- Pro Fitter (1)
- ROM T-bars (6)
- NordicTrack (1)
- Proprioception Boards (3)
- Weighted Medicine Balls (3)
- Nordic Rider (1)
- Balance Boards (4)
- Elevation Pillows (3)
- Trampoline (1)
- Power Webs (2)
- BAPS Board (1)
- Toss Back Trampoline with weighted exercise balls (1)
- Assorted Cuff Weights (.5-10lb) with rack
- Cuff Link for shoulder proprioception (1)
- Slide Board (2)
- Heel Cord Boards (6)
- Foam Rolls (3)
- Assorted Thera-band & Thera-tubing
- Rehab Tree with Thera-tubing attachments (1)

**Rehabilitation Equipment located in Pruitt Hall Athletic Training Room**

- Stationary Bike (1)
- Heel Cord Boards (4)
- Slide Board (1)

**Emergency equipment available for use**

List of first aid and emergency equipment in each athletic training facility

**Baseball Complex**

- Spine Board
- Crutches
- First Aid and Emergency Kit
- Biohazard Containers
- Insurance Sheets
- Individual Medical Information

### **Softball Complex**

- Spine Board
- Crutches
- First Aid and Emergency Kit
- Biohazard Containers
- Insurance Sheets
- Individual Medical Information

### **Homer Field House Athletic Training Room**

- Biohazard Containers
- Scissors
- Cervical Collars
- CPR Masks
- Crutches
- Elastic Bandages
- Emergency Information
- Eye Kit
- Gloves
- Glucose
- Ice
- Immobilizers
- Insurance Sheets
- IV Kits
- Neurological Hammer
- Pen Lights
- Phones
- Wound Care Supplies (band aids, gauze, topical antibiotics)
- Sphygmomanometer
- Spine Board
- Splints (All)
- Individual Medical Information
- Suture Kit
- Thermometer
- Tooth Kit
- Walkie Talkie
- Stethoscope

### **Pruitt Athletic Training Room**

- Biohazard Containers
- Scissors
- Cervical Collars
- CPR Masks
- Crutches
- Elastic Bandages
- Emergency Information
- Eye Kit
- Gloves
- Wound Care Supplies (band aids, gauze, topical antibiotics)
- Glucose
- Ice
- Immobilizers
- Insurance Cards
- IV Kits
- Neurological Hammer
- Pen Lights
- Phones
- Insurance Sheets
- Sphygmomanometer
- Spine Board
- Splints (All)
- Stethoscope
- Suture Kit
- Thermometer
- Tooth Kit
- Walkie Talkie
- Individual Medical Information

### **Rodeo Complex**

- Spine Board
- Crutches
- First Aid and Emergency Kit
- Biohazard Containers
- Insurance Sheets
- Individual Medical Information

### **When EMS is on site**

The City of Livingston Ambulance Service will be on site during all UWA home football games. Additionally, they will be present during all sanctioned UWA rodeo events (athletic and fund-raising).

### **Coaches First Aid/CPR training**

All head coaches, assistants, and graduate assistant will be required to become certified in American Red Cross First Aid & CPR. They must be certified during the Summer Semester prior to the start of the Fall Semester. Courses will be offered in July and August by the ARC certified instructors at the University. Recertification for currently certified coaches will also be given at these times.

Currently, we have four certified instructors on staff. It is encouraged for any coach interested in becoming an instructor to contact The Tuscaloosa County Chapter of the American Red Cross for the scheduling of an instructor course.

### **Insurance info and medical history on hand for all students in kits both home and away**

Each athletic training student assigned to work a varsity athletic sport is required to carry a copy of each individual athlete's insurance and medical information with them to practices and events both home and away. Also, each student will take a listing of all pertinent numbers to contact in case of emergency.

Football will always have a copy of the medical information and insurance of each student athlete permanently stored in the white travel trunk with easy access for all to acquire if necessary.

The cheerleaders and dance team (Scat Cats) coach or supervisor will also carry a copy of their insurance and medical information with them when they are traveling or attending events without the accompaniment of a UWA student or staff athletic trainer.

### **Who is notified when a catastrophic event occurs: administrator, parents, coach**

Whenever a catastrophic accident, emergency situation, severe or fatal injury occurs, the attending staff athletic trainer will contact the following parties, in the following order: Other athletic training staff members, the athletic director, head coach of that sport, and the parent or guardian noted as the emergency contact on the student-athlete's medical information.

If the attending athletic trainer is a graduate assistant or student, they should first contact the head athletic trainer or the director of sports medicine. If they are unable to reach either one of these people, they should contact the assistant athletic trainer. Following contact with one of the athletic training staff members, they should be ready to follow any instruction deemed important by the attending staff member.

### **Keys to all athletic gates and who needs one**

In case of emergency at a location with the potential for locked gates, a single person, denoted by the athletic director, will be responsible for having access to a key to unlock any gate or door that may hinder the prompt emergency care of a student athlete. This representative must be someone who is available at all times at each of these venues (usually the head or assistant coach).

### **Location of all phones**

Phones for emergency actions are available for the following sports at the following locations:

1. **Tiger Football stadium:** access to a phone is located within James P. Homer field house on either the first or second floors in the taping room (#116), equipment room (#113), secretary's office (#221), and the athletic training room (#216).
2. **Football practice field:** access to a phone at the practice field is located across the street in Moon Hall (physical plant). After regular hours you must enter the left hand, side door to reach a phone in the first office to the right.
3. **Pruitt Hall Gymnasium:** phone access in Pruitt Hall is located in Room #28 (PE Office) or #32 (athletic training room). Additionally, there is a pay phone located on the left-hand side of the main entrance to the gymnasium.
4. **Don C. Hines Rodeo Complex:** Phone access is located in the barn office, which the first door to the right past the main entrance to the barn. Additionally, there is a phone located within the rodeo coach's trailer.
5. **UWA Softball Complex:** At this time there is no phone access at the site. The nearest location is to send someone to call at the Student Union Building to use the phone, upstairs by the main entrance.
6. **Tartt Baseball Field:** From February until the end of the Spring Semester phone access is located in the Baseball Press Box, behind home plate. The phone must be plugged in each day prior to the start of workouts. During the fall semester and in January, access is not available on site. The nearest phone access in case of an emergency is at the Lake LU managers' trailer. If he is not present, the next most accessible phone would be at either Moon Hall (physical plant) or the Student Union Building.

### **ATC availability**

A certified member of the athletic training staff (usually two) will always be present at all home and away UWA football practices, games, travel, and required out of season activities except weight lifting. During weight lifting a certified staff member will be on duty in the athletic training room directly up stairs from the weight room.

A certified athletic trainer will be on duty in the athletic training room from 7:00am until ~6:30pm each day throughout the fall and spring semesters. Additionally, certified athletic trainers will be at several practices throughout each week for all sports other than football.

Also, there will always be a certified member of the athletic training staff at all home contests, whatever the sport.

### **Physician availability**

Dr. William R. Simpkins, family practice team physician, will be available on Monday, Tuesday, Thursday, and Friday from 9:00am-12:30pm and 3:00-5:00pm, and on Wednesday from 9:00am until 12:30pm for referral of our athletes. He is also available to reach by phone at home by phone at any time not specified by the above times.

Our Medical Director, Dr. Lyle Cain, and our other team orthopaedists, as well as fellows of Dr. James R. Andrews and Dr. William Clancy, will be available for patient evaluation and follow-up on each Wednesday of the fall semester and

every other Wednesday of the spring semester from 9:00-11:00am. Additionally, they will be in attendance at all home and away football contests. One of the fellows will also be in attendance at our home rodeo contests.

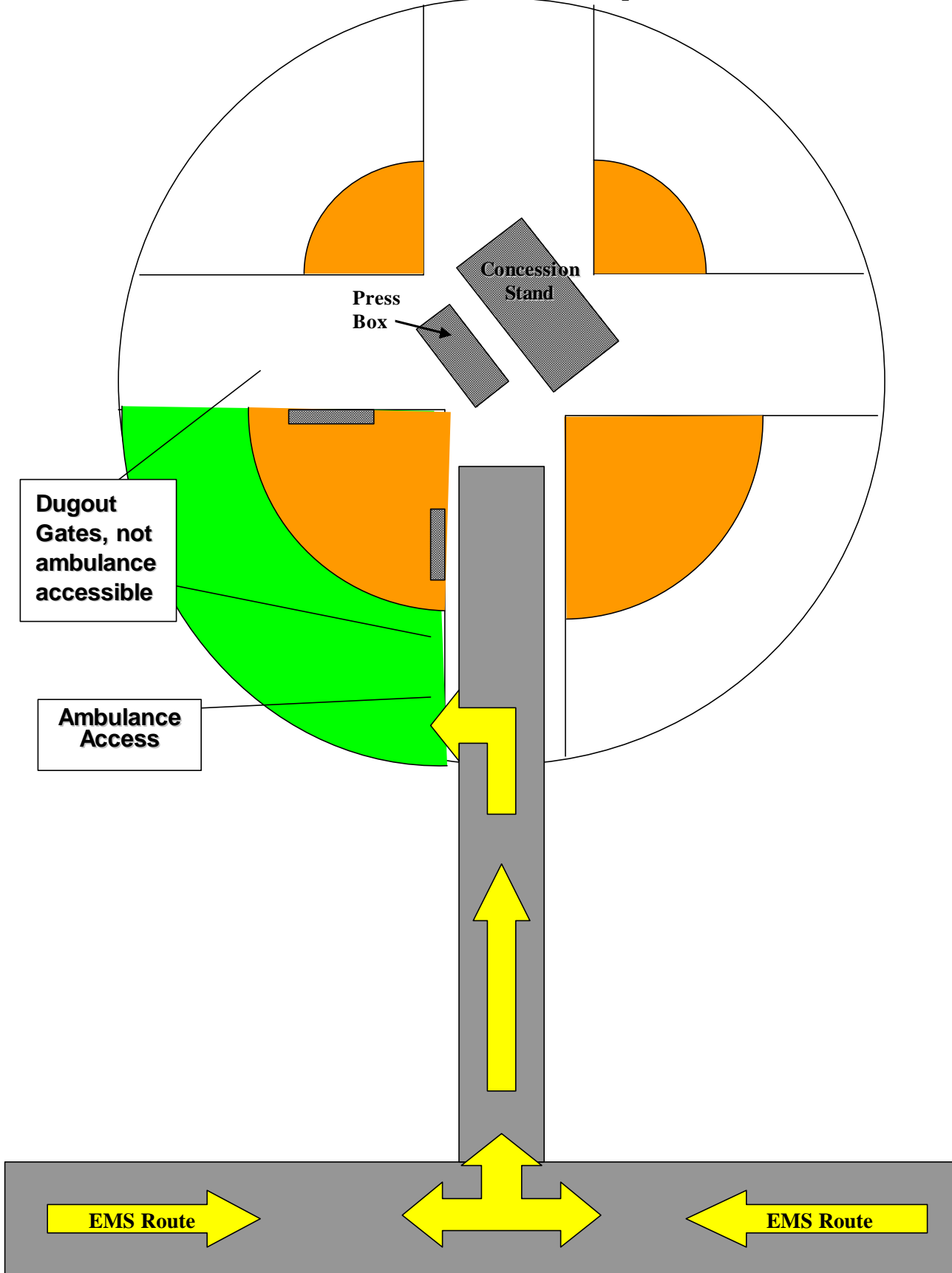
Dr. James R. Andrews and Dr. Lyle Cain will be available for referral and evaluation at Health South Medical Center in Birmingham, AL on Monday through Friday from 9:00am until 5:00pm.

In an emergency situation, an athlete can be transported to either Hill Hospital in York, AL, Rush Foundation Hospital, Riley Memorial Hospital, or Jeff Anderson Regional Medical Center, all of Meridian, MS.

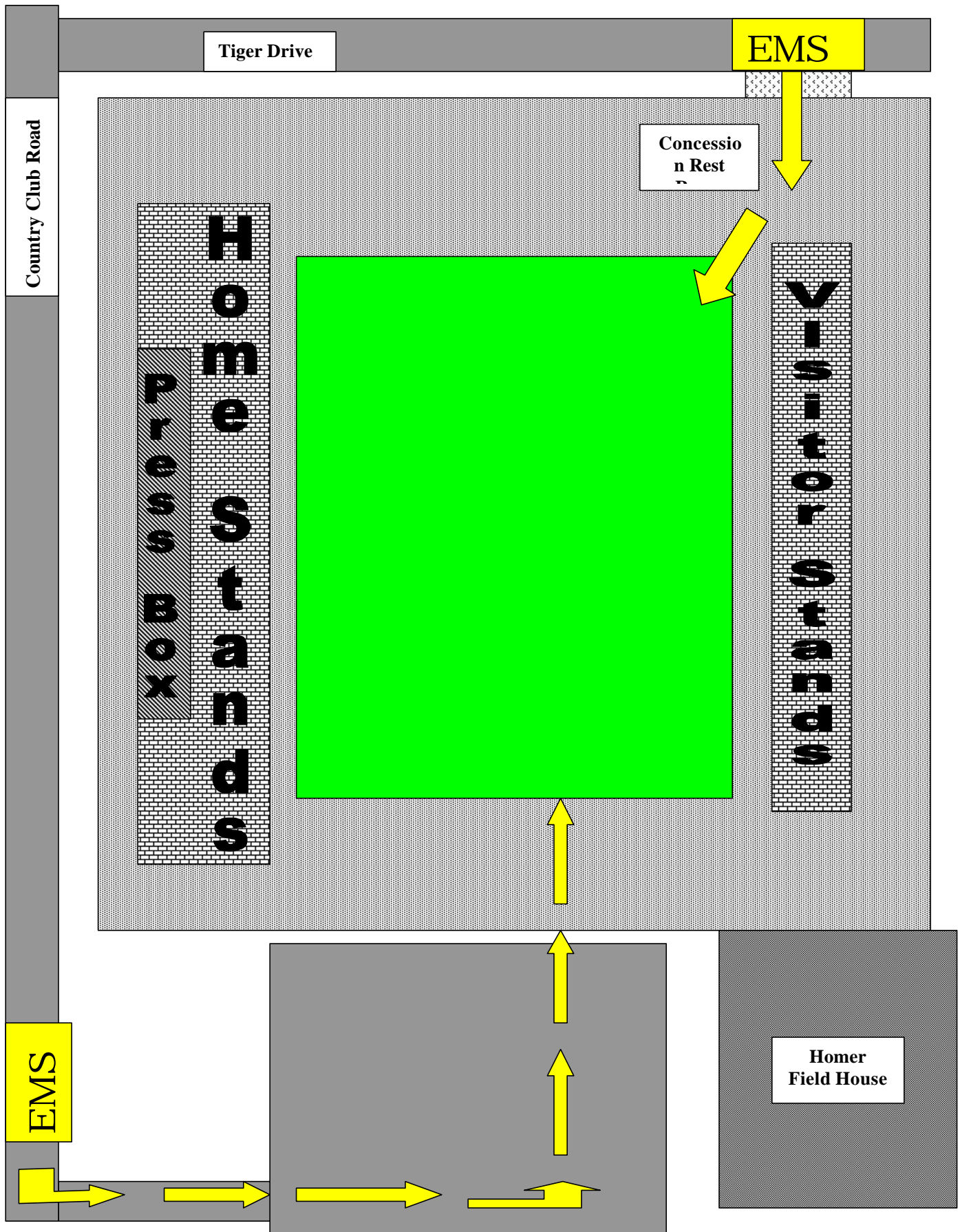
On occasion, an athlete may be transported to DCH Regional Medical Center in Tuscaloosa, AL.

In a dental emergency, Dr. Darrell Hoggle or Dr. T.C. Looney, of Livingston, AL will see our athletes. Their offices will be open from 9:00am until 4:30pm Monday-Friday. They can also be reached at home for any referral outside of regular office hours.

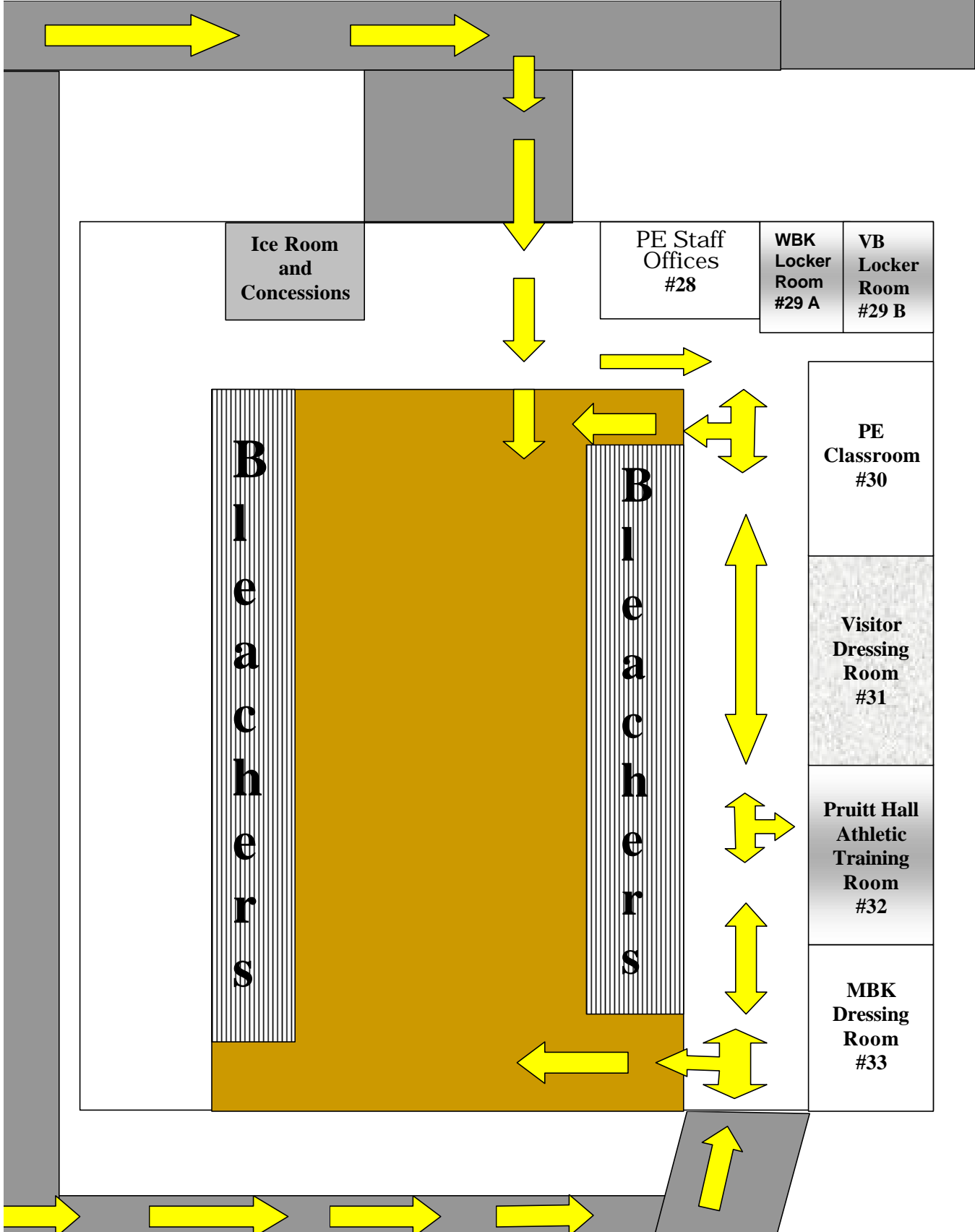
# EMS Access to the Softball Complex EMS Routes



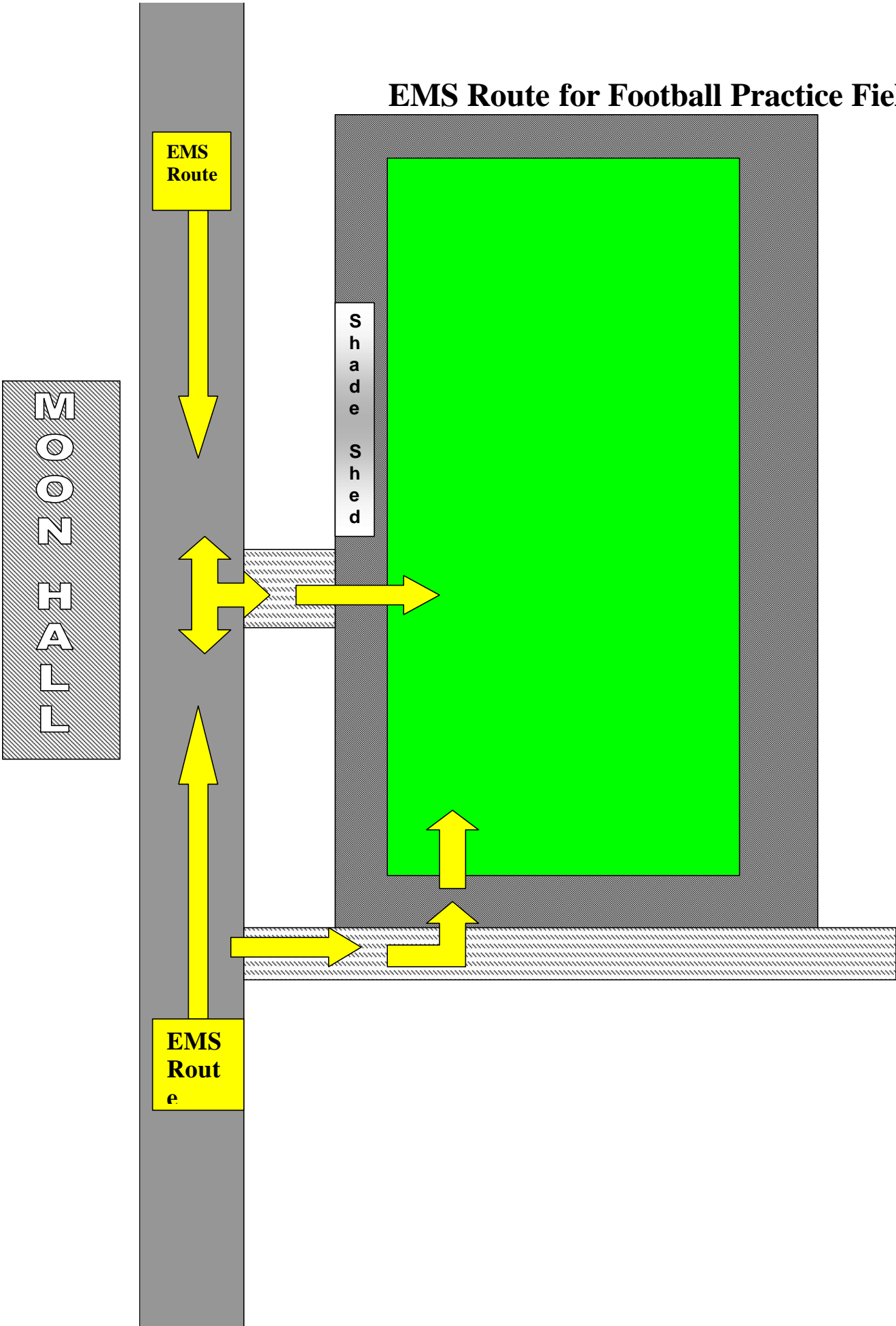
# Plan for Access to Tiger Football Stadium



# Plan for access to Pruitt Hall Gymnasium & Athletic Training Room

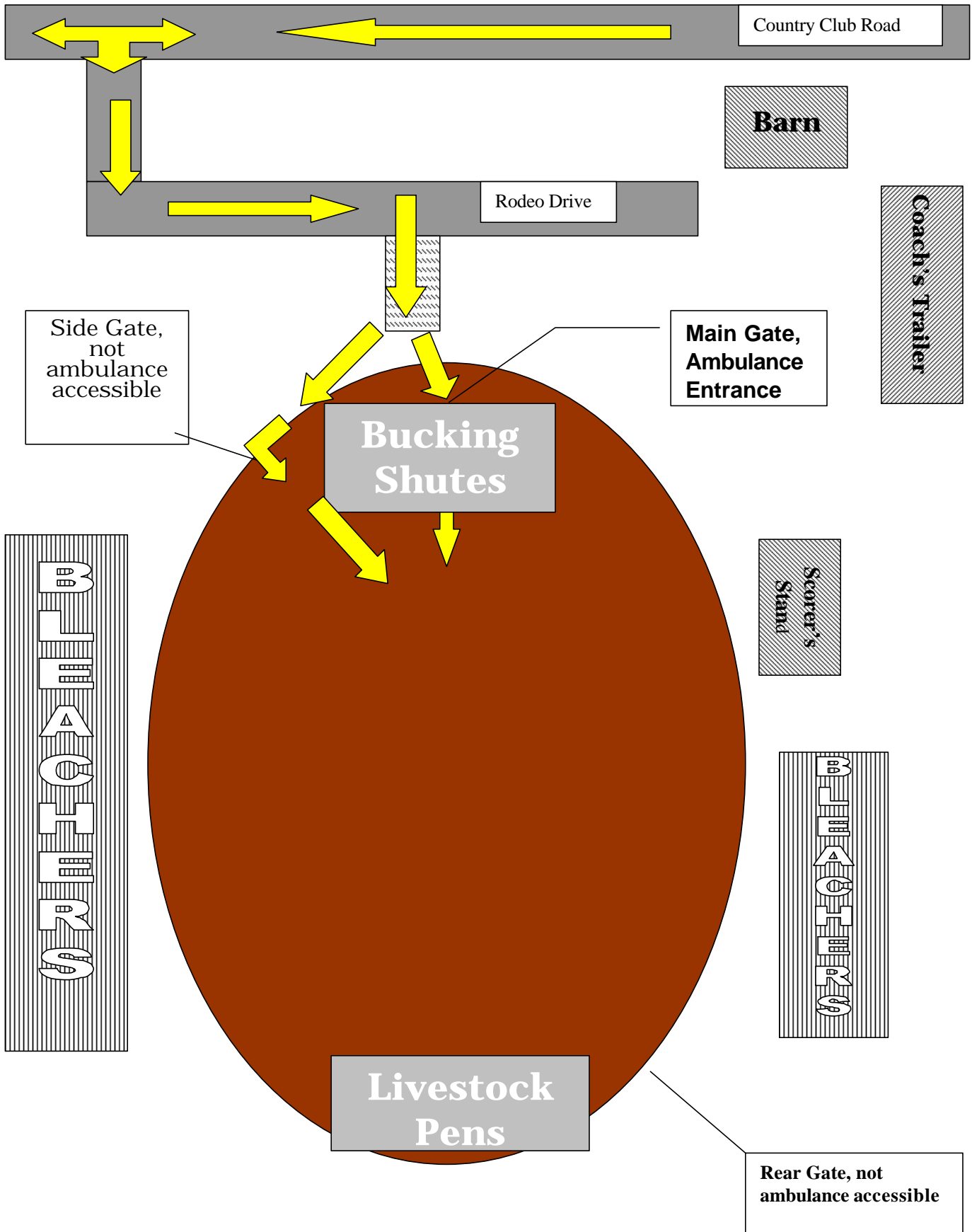


# EMS Route for Football Practice Field

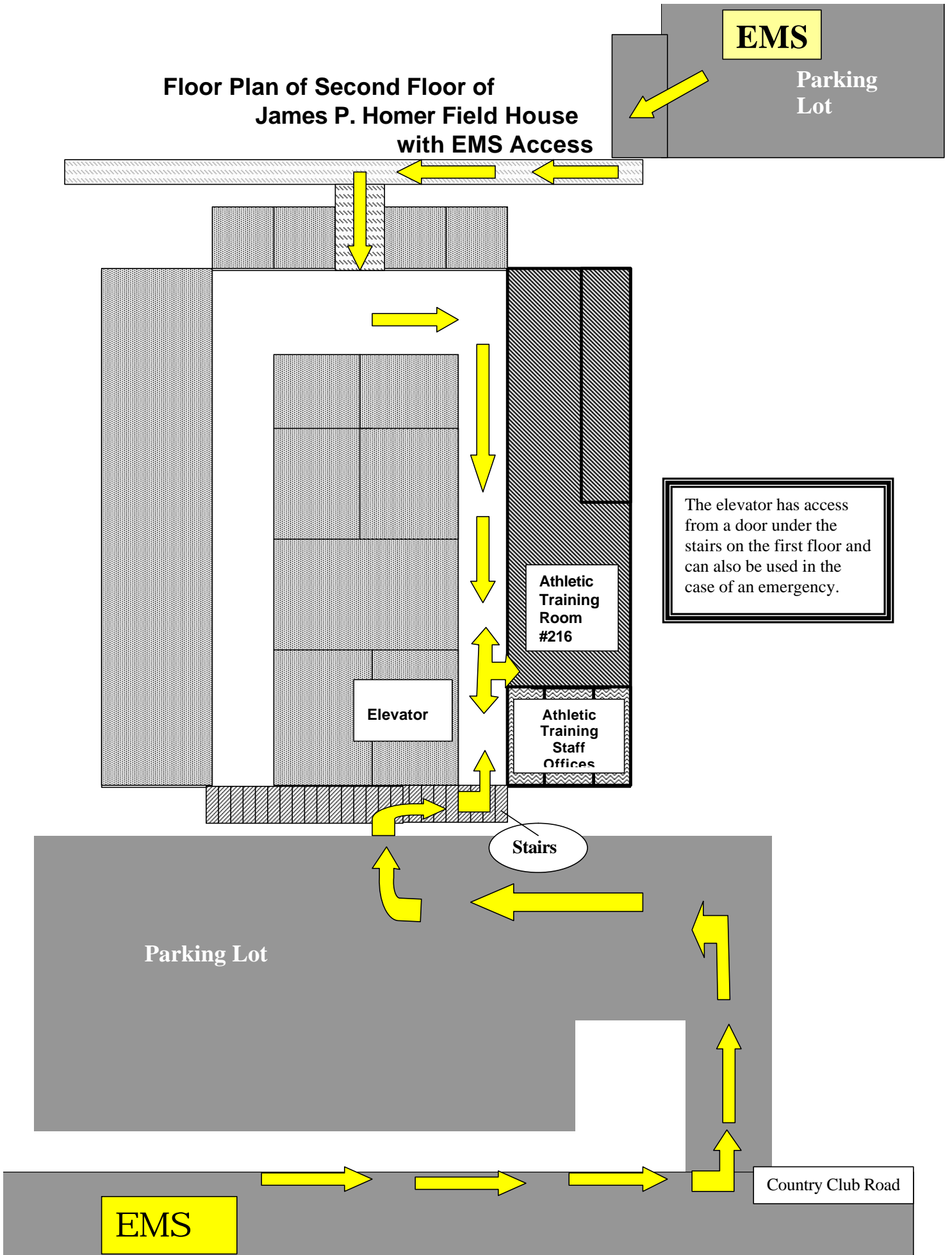




EMS Route for Don C. Hines Rodeo Arena



# Floor Plan of Second Floor of James P. Homer Field House with EMS Access



# EMS Access to Tartt Baseball Field

