



**KING'S
COLLEGE**
TRANSFORMATION. COMMUNITY. HOLY CROSS.

**MASTER OF SCIENCE
IN ATHLETIC TRAINING**

**CLINICAL EDUCATION
POLICIES AND PROCEDURES**

2020-2021

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Clinical Education Glossary of Terms

Affiliated Site Agreement: A formal agreement between the program's institution and a facility where the program wants to send its students for course-related and required off-campus clinical education. This agreement defines the roles and responsibilities of the host site, the affiliate, and the student.

Clinical education: A broad umbrella term that includes three types of learning opportunities to prepare students for independent clinical practice: athletic training clinical experiences, simulation, and supplemental clinical experiences.

Clinical Site: A facility where a student is engaged in clinical education

Commission on Accreditation of Athletic Training Education (CAATE): CAATE is the accreditation body that ensures that athletic training programs are meeting the standards of Athletic Training Education.

Immersive Clinical Experience: A practice-intensive experience that allows the student to experience the totality of care provided by athletic trainers.

Preceptor: Preceptors supervise and engage students in clinical education. All preceptors must be licensed healthcare professionals and be credentialed by the state in which they practice. Preceptors who are athletic trainers are state credentialed (in states with regulation), certified, and in good standing with the Board of Certification. A preceptor's licensure must be appropriate to his or her profession. Preceptors must not be currently enrolled in the professional athletic training program at the institution. Preceptors for athletic training clinical experiences identified in Standards 14 through 18 must be athletic trainers or physicians

Professionalism: Relates to personal qualities of honesty, reliability, accountability, patience, modesty, and self-control. It is exhibited through delivery of patient-centered care, participation as a member of an interdisciplinary team, commitment to continuous quality improvement, ethical behavior, a respectful demeanor toward all persons, compassion, a willingness to serve others, and sensitivity to the concerns of diverse patient populations.

Professional program: The graduate-level coursework that instructs students on the knowledge, skills, and clinical experiences necessary to become an athletic trainer, spanning a minimum of two academic years.

Supervision: Supervision occurs along a developmental continuum that allows a student to move from interdependence to independence based on the student's knowledge and skills as well as the context of care. Preceptors must be on-site and have the ability to intervene on behalf of the athletic training student and the patient. Supervision also must occur in compliance with the state practice act of the state in which the student is engaging in client/patient care.

Supplemental clinical experiences: Learning opportunities supervised by health care providers other than athletic trainers or physicians.

King's College Clinical Education Overview

Students in the King's College Master of Science in Athletic Training (MSAT) program will complete 55 weeks of clinical education experience (CEE) during the two years spent in the professional program, with 19 of these weeks being full clinical immersion. These CEEs are spread across four rotations during the first year that are completed concurrently with didactic coursework and five immersive rotations during the second year in the program. The clinical education curriculum is designed to run parallel to the didactic classroom work and is tiered based on the student's professional preparation. The clinical education plan is designed to allow students to gain experience in real-life, patient-centered care across the lifespan in both common and emerging athletic training settings. Throughout these experiences our students will become confident, skilled, and competent certified athletic trainers who practice based on current concepts and evidence to strive to be principled healthcare providers.

Professional Year One

During the first year in the program the student will gain CEE at local colleges and high schools. These clinical education and supplemental clinical education experiences are designed to expose the students to a wide variety of real-world patient encounters early in the course of study. They will allow the student to provide patient-centered, evidence-based athletic training services in a supervised environment where they can practice and apply skills learned in first-year classes on actual patients. CEE assignments are made prior to each semester by the Clinical Education Coordinator (CEC). In addition to the Athletic Training Student's (ATS's) primary CEE assignment, the ATS will also spend one afternoon per week in each semester of professional year one in the Scandlon Sports Medicine Clinic. This will be referred to as their "Clinic Day." The Clinic Day schedule is determined by the CEC. Students are not required to attend their regular CEE on their Clinic Day. ATS have a Clinic Day to ensure that they have the opportunity to practice and reinforce therapeutic interventions on patients in a sports medicine clinic setting.

Fall Semester

AT 420 Athletic Training Practicum 1:

- Two (2) 9-week clinical education experiences in the college or high school settings

Spring Semester

AT 425 Athletic Training Practicum 2:

- Two (2) 9-week clinical education experiences in the college or high school setting

The student will complete two (2) 9-week clinical education experiences during each of the fall and spring semesters under the guidance of a primary clinical preceptor. Although the traditional semester is 16-weeks in length, a part of the student's CEE will begin before the academic semester begins during the two weeks of pre-season practice in August, and the two weeks prior to the start of the spring semester in January. The student's primary clinical preceptor will direct and supervise their CEE based on the specific clinical setting that they work in.

Clinical Education Hours Expectations

The following guidelines are in place with regard to clinical hours that are accumulated during each CEE during the fall and spring semesters of professional year one:

1. Students must earn a minimum of 125 hours by the last day of each 9-week rotation.
 - a. Attendance at your CEE when scheduled by your primary preceptor is mandatory.
 - b. A student's 9-week CEE is not necessarily completed if a student reaches 125 hours before the end of the 9-week rotation.
2. Students will not be allowed to accumulate more than 225 hours during a 9-week rotation.
 - a. It is the responsibility of the primary clinical preceptor to ensure that a student does not exceed 225 hours during the 9-week CEE.
3. Students must have a minimum of one day off in every seven-day period. This day does not need to be consistent each week and will be determined by the clinical preceptor based on student input and the educational opportunities available.

4. For the entire fall semester, students must earn a minimum of 250 hours and are not allowed to accumulate more than 450 hours combined during their two (2) 9-week CEEs.
5. To help students maintain life balance, preceptors should strive to maintain a maximum average of 25 hours per week at their clinical experience. Exceeding 25 hours per week is acceptable if efforts are taken to balance those weeks with weeks where students gain less than 25 hours. The CEC will monitor student hours to ensure that they are within acceptable limits.

Students will record the clinical education experience hours into EXXAT using the weekly time log. Students will then submit their hours for review by their primary clinical preceptor at the end of each week. Once the weekly hour log is submitted by the student, the preceptor will receive an automated email with a link to review the hours and either approve them or ask the student to amend them if an error was noted. Failure to consistently enter hours and submit them for approval on a weekly basis may result in a Clinical Incident Report (see Athletic Training Student Incident Report and Athletic Training Student Clinical Offense Schedule). The CEC will review clinical hours for all students on a monthly basis to confirm that the minimum and maximum hours policies, as outlined above, are being followed and the student is recording their hours on a timely basis. The CEC will intervene with the primary preceptor if a student is not making sufficient progress toward the stated minimum, if the logged hours are becoming excessive, or if the student is not receiving the minimum of one day off per week.

Clinical Progress Evaluation of the Student

Students will formally be evaluated throughout each CEE using the Preceptor Evaluation of the 1st Year MSAT Student Clinical Education Experience Form that correlates to the IEE you are completing. Copies of each evaluation form will be available through the associated Athletic Training Practicum course and will be completed by preceptors using EXXAT. The preceptors will receive an automated email with the link to the evaluation at the times in the ICEE listed below:

1. Mid-Experience Evaluation: This will occur during the 5th week of your CEE and will serve as a formative assessment of your knowledge, skills, and attitudes to that point. This assessment will not be graded, but it used by your clinical preceptor as a reflection of your performance up to that point and will be used to guide the remaining 4 weeks of your rotation.

2. End of Experience Evaluation: This will occur during the final week (Week 9) of your CEE and will serve as a graded, summative assessment of your knowledge, skills, and attitudes throughout your 9-week clinical rotation. This assessment will count as a grade for this course and will serve as an official assessment of your knowledge, skills, and attitudes related to the standards associated with this course.

Evaluation of the Preceptor and Clinical Site

Athletic Training Students will be required to formally evaluate their Clinical Site and Preceptor at the end of each CEE using EXXAT. The evaluations will be available in the “My Current Placement – Evaluations” section. Although a formal mid-CEE evaluation of the clinical site and preceptor is not required, the MSAT Program encourages open dialogue between the ATS and Preceptor throughout the rotation to discuss positive aspects of the CEE as well as areas where the clinical site and/or the preceptor can improve to further help the student learn for the remainder of the CEE.

AT Milestone Evaluations

The King’s College Athletic Training Program uses the Athletic Training (AT) Milestones document as a formative assessment of your progress as an athletic training student (ATS). The AT Milestones were developed for use in the evaluation of athletic trainers in the context of their participation in CAATE accredited professional education programs. For the King’s College MSAT, the AT Milestones serve as a framework for the assessment and development of the individual athletic training student in key dimensions of athletic training general practice. The milestones themselves represent knowledge, skills, attitudes, and other attributes in each area that describe the development of competence from an early learner up to and beyond that expected for unsupervised practice. Evaluation of the Athletic Training Student using the AT Milestones is designed to ensure that each Athletic Training Student demonstrates

the behaviors appropriate for unsupervised practice by graduation in all of the competencies that have been deemed essential when providing high quality health care.

The AT Milestones will be assessed at the mid-term and at the end of the semester by a Clinical Competency Assessment Team (CCAT) made up of the Clinical Education Coordinator, clinical preceptors, and 1-2 core faculty. This assessment is not graded but is used as a way to provide the student with feedback from a standardized assessment to objectively measure their progress toward becoming a certified athletic trainer.

Clinical Progress Meetings

The Clinical Education Coordinator will meet with each student at the end of their first 9-week CEE, and again at the end of their final 9-week CEE to discuss their clinical education progress based on the results of their Clinical Performance Evaluations and AT Milestone Evaluations. These meetings are not graded but will serve as a time for the student to reflect on their clinical education experiences and allow the Clinical Education Coordinator to help them formulate a plan for continued growth and progress. Clinical progress meetings will be conducted in-person based on the availability of the CEC and ATS.

Professional Year Two

During year two, the clinical education experiences will follow an immersive format with a total of 19 weeks of immersive clinical education experiences extending over the course of the year. These full-time practice-intensive experiences are designed to allow the student to experience the totality of the athletic training profession and will be customized to the students plans for post-graduation employment. During these immersive clinical education experiences preceptors will provide the student with learning opportunities that span the full skill-set of a practicing athletic trainer including but not limited to evaluation, treatment, emergency care, rehabilitation, administrative duties, interprofessional communication with physicians and other health care providers, and additional experiences communicating with parents, coaches, and administrators. These experiences can occur anywhere in the country and in a variety of settings including the traditional (professional, college, and school-age sports) and emerging (physician's office, public safety, armed forces, and occupational and industrial health care) settings.

Fall Semester
<u>AT 520 Athletic Training Practicum 3:</u> <ul style="list-style-type: none">Option A: One (1) 3-week and two (2) 4-week immersive clinical education experiences (ICEE)s in the setting of the student's choice OR <ul style="list-style-type: none">Option B: One (1) 7-week and 1(1) 4-week immersive clinical education experience in the setting of the student's choice

Spring Semester
<u>AT 525 Athletic Training Practicum 4:</u> <ul style="list-style-type: none">One (1) 8-week immersive clinical education experience in the setting of the student's choice

Immersive Clinical Education Experiences Site Selection

The goal of the King's College MSAT Program is to allow the Athletic Training Student to select specific settings and/or clinical sites for their Professional Program Year 2 CEEs based on their potential career plan. The process for clinical site/setting selection is detailed below:

1. Collectively the CEC and ATS will develop an ICEE plan for professional year 2 during an ICEE meeting at the mid-point of the spring semester of Year 1.
 - a. Prior to this meeting the CEC will provide the student with a predetermined list of acceptable clinical sites and practice settings that already have affiliated site agreements in place to help the ATS create a clinical education plan.
 - b. During this meeting the CEC and the ATS will also determine the make-up of the fall semester based on the ICEE plan using the options below:

1. Option A: One (1) 3-week and two (2) 4-week ICEEs
2. Option B: One (1) 7-week and one (1) 4-week ICEE
2. At the ICEE meeting the ATS may also request specific clinical sites and/or practice settings that they are interested in that are not on the predetermined list of approved clinical sites, based on the first year's clinical experience and their overall professional goals at that point.
 - a. The CEC will determine the viability of any new clinical sites and/or preceptors based on an interview with the proposed preceptor and a visit to the proposed clinical site. Due to the potential for these clinical sites to be anywhere in the country, the CEC may "visit" the site using a virtual video platform. If the CEC deems that the new clinical site and/or preceptor are able to provide a high quality immersive clinical education while following all King's College MSAT Program and CAATE standards, they will then begin the process of obtaining an affiliated site agreement.
3. Based on the results of this meeting the CEC will use the following criteria to determine the ATS ICEEs for Professional Year 2:
 - a. ATS Academic Standing
 - b. ATS post-graduation professional goals
 - c. ATS clinical site and/or practice setting request(s)
 - d. Availability of the requested clinical site and or practice setting
 - e. The ability of the clinical site and preceptor to meet all King's College MSAT Program and CAATE standards
 - f. The ability of the clinical site and preceptor to provide a high-quality ICEE
 - g. The overall fit of the student and clinical site/preceptor

Clinical Education Hours Expectations

The expectation is the students will complete approximately 40 hours per week during ICEEs. On occasion, it is acceptable for a student to complete more than 40 hours in one week, how this should not be common practice and in these cases, students may not exceed 55 hours in one week.

The following guidelines are in place with regard to clinical hours that are accumulated during each ICEE as outlined below:

1. 3-Week ICEE (Fall Semester)
 - a. Students must earn a minimum of 110 hours by the last day of the 3-week ICEE.
 - i. Attendance at your ICEE when scheduled by your primary preceptor is mandatory.
 - ii. A student's 3-week ICEE is not necessarily completed if a student reaches 110 hours before the end of the 3-week ICEE.
 - b. Students will not be allowed to accumulate more than 165 hours during the 3-week ICEE.
 - i. It is the responsibility of the primary clinical preceptor to ensure that a student does not exceed 165 hours during the 3-week ICEE.
 - c. Students must have a minimum of one day off in every seven-day period. This day does not need to be consistent each week and will be determined by the clinical preceptor based on student input and the educational opportunities available.
2. 4-Week ICEE
 - a. Students must earn a minimum of 150 hours by the last day of the 4-week ICEE.
 - i. Attendance at your ICEE when scheduled by your primary preceptor is mandatory.
 - ii. A student's 4-week ICEE is not necessarily completed if a student reaches 150 hours before the end of the 4-week ICEE.
 - b. Students will not be allowed to accumulate more than 165 hours during the 3-week ICEE.
 - i. It is the responsibility of the primary clinical preceptor to ensure that a student does not exceed 220 hours during the 4-week ICEE.
 - c. Students must have a minimum of one day off in every seven-day period. This day does not need to be consistent each week and will be determined by the clinical preceptor based on student input and the educational opportunities available.
3. 7-Week ICEE
 - a. Students must earn a minimum of 260 hours by the last day of the 7-week ICEE.

- i. Attendance at your ICEE when scheduled by your primary preceptor is mandatory.
 - ii. A student's 7-week ICEE is not necessarily completed if a student reaches 260 hours before the end of the 7-week ICEE.
 - b. Students will not be allowed to accumulate more than 165 hours during the 3-week ICEE.
 - i. It is the responsibility of the primary clinical preceptor to ensure that a student does not exceed 385 hours during the 7-week ICEE.
 - c. Students must have a minimum of one day off in every seven-day period. This day does not need to be consistent each week and will be determined by the clinical preceptor based on student input and the educational opportunities available.
- 4. 8-Week ICEE
 - a. Students must earn a minimum of 300 hours by the last day of the 8-week ICEE.
 - i. Attendance at your ICEE when scheduled by your primary preceptor is mandatory.
 - ii. A student's 8-week ICEE is not necessarily completed if a student reaches 300 hours before the end of the 8-week ICEE.
 - b. Students will not be allowed to accumulate more than 440 hours during the 8-week ICEE.
 - i. It is the responsibility of the primary clinical preceptor to ensure that a student does not exceed 440 hours during the 8-week ICEE.
 - c. Students must have a minimum of one day off in every seven-day period. This day does not need to be consistent each week and will be determined by the clinical preceptor based on student input and the educational opportunities available.

Students will record the clinical education experience hours into EXXAT using the weekly time log. Students will then submit their hours for review by their primary clinical preceptor at the end of each week. Once the weekly hour log is submitted by the student, the preceptor will receive an automated email with a link to review the hours and either approve them or ask the student to amend them if an error was noted. Failure to consistently enter hours and submit them for approval on a weekly basis may result in a Clinical Incident Report (see Athletic Training Student Incident Report and Athletic Training Student Clinical Offense Schedule). The CEC will review clinical hours for all students on a monthly basis to confirm that the minimum and maximum hours policies, as outlined above, are being followed and the student is recording their hours on a timely basis. The CEC will intervene with the primary preceptor if a student is not making sufficient progress toward the stated minimum, if the logged hours are becoming excessive, or if the student is not receiving the minimum of one day off per week.

Clinical Progress Evaluation of the Student

Students will formally be evaluated throughout each ICEE using the Preceptor Evaluation of the Immersive Clinical Education Experience Form that correlates to the ICEE you are completing. Copies of each evaluation form will be available through the associated Athletic Training Practicum course and will be completed by preceptors using EXXAT. The preceptors will receive an automated email with the link to the evaluation at the times in the ICEE listed below. Preceptors are then required to review the evaluation with the ATS prior to finalizing and submitting the evaluation. ICEE evaluation will occur on the following schedule:

1. **3-Week ICEE**
 - a. End of ICEE Evaluation: This will occur during the final week (Week 3) of the ICEE and will serve as a graded, summative assessment of the student's knowledge, skills, and attitudes throughout their 3-week clinical rotation. This assessment will count as a grade for the associated course and will serve as an official assessment of the assessed standards associated with this course.
 - b. Due to the short nature of this experience, there will not be a scheduled formative assessment of the ATS progress during the 3-week ICEE. Rather, the MSAT Program suggests that continuous, ongoing evaluation of the ATS by the Clinical Preceptor is beneficial for education. It is recommended that the ATS and Clinical Preceptor informally discuss the ATS progress at least on a weekly basis throughout their ICEE.
2. **4-Week ICEE**

- a. Mid-ICEE Evaluation: This will occur during the 2nd week of the ICEE and will serve as a formative assessment of the students' knowledge, skills, and attitudes to that point. This assessment will not be graded, but it used by the clinical preceptor as a reflection of their performance up to that point and will be used to guide the remaining 2 weeks of your rotation.
- b. End of ICEE Evaluation: This will occur during the final week (Week 4) of the ICEE and will serve as a graded, summative assessment of the student's knowledge, skills, and attitudes throughout their 4-week clinical rotation. This assessment will count as a grade for the associated course and will serve as an official assessment of the assessed standards associated with this course.
- c. Although this formal evaluation schedule has been developed, the MSAT Program believes that continuous, ongoing evaluation of the ATS by the Clinical Preceptor is beneficial for education. It is recommended that the ATS and Clinical Preceptor informally discuss the ATS progress at least on a weekly basis throughout their ICEE.

3. 7-Week ICEE

- a. Mid-ICEE Evaluation: This will occur during the 3rd week of the ICEE and will serve as a formative assessment of the students' knowledge, skills, and attitudes to that point. This assessment will not be graded, but it used by the clinical preceptor as a reflection of their performance up to that point and will be used to guide the remaining 4 weeks of your rotation.
- b. End of ICEE Evaluation: This will occur during the final week (Week 7) of the ICEE and will serve as a graded, summative assessment of the student's knowledge, skills, and attitudes throughout their 7-week clinical rotation. This assessment will count as a grade for the associated course and will serve as an official assessment of the assessed standards associated with this course.
- c. Although this formal evaluation schedule has been developed, the MSAT Program believes that continuous, ongoing evaluation of the ATS by the Clinical Preceptor is beneficial for education. It is recommended that the ATS and Clinical Preceptor informally discuss the ATS progress at least on a weekly basis throughout their ICEE.

4. 8-Week ICEE

- a. Mid-ICEE Evaluation: This will occur during the 4th week of the ICEE and will serve as a formative assessment of the students' knowledge, skills, and attitudes to that point. This assessment will not be graded, but it used by the clinical preceptor as a reflection of their performance up to that point and will be used to guide the remaining 4 weeks of your rotation.
- b. End of ICEE Evaluation: This will occur during the final week (Week 8) of the ICEE and will serve as a graded, summative assessment of the student's knowledge, skills, and attitudes throughout their 8-week clinical rotation. This assessment will count as a grade for the associated course and will serve as an official assessment of the assessed standards associated with this course.
- c. Although this formal evaluation schedule has been developed, the MSAT Program believes that continuous, ongoing evaluation of the ATS by the Clinical Preceptor is beneficial for education. It is recommended that the ATS and Clinical Preceptor informally discuss the ATS progress at least on a weekly basis throughout their ICEE.

Evaluation of the Preceptor and Clinical Site

Athletic Training Students will be required to formally evaluate their Clinical Site and Preceptor at the end of each ICEE using EXXAT. The evaluations will be available in the "My Current Placement – Evaluations" section. Although a formal mid-ICEE evaluation of the clinical site and preceptor is not required, the MSAT Program encourages open dialogue between the ATS and Preceptor throughout the rotation to discuss positive aspects of the ICEE as well as areas where the clinical site and/or the preceptor can improve to further help the student learn for the remainder of the ICEE.

AT Milestone Evaluations

The AT Milestones will be assessed at the mid-term and at the end of the semester by a Clinical Competency Assessment Team (CCAT) made up of the Clinical Education Coordinator, clinical preceptors, and 1-2 core faculty. This assessment is not graded but is used as a way to provide the student with feedback from a standardized assessment to objectively measure their progress toward becoming a certified athletic trainer.

Clinical Progress Meetings

The Clinical Education Coordinator will meet with each student at the end of each ICEE to discuss their clinical education progress based on the results of their Clinical Performance Evaluations and AT Milestone Evaluations. These meetings are not graded but will serve as a time for the student to reflect on their clinical education experiences and allow the Clinical Education Coordinator to help them formulate a plan for continued growth and progress. Clinical progress meetings will be conducted in-person, however due to the possible distance nature of ICEEs, clinical progress meetings may be conducted in a virtual environment via Zoom or Microsoft Teams if needed.

Supplemental Clinical Education Experiences

Supplemental Clinical Education Experiences (SCEEs) are clinical education learning opportunities that are supervised by health care providers other than athletic trainers or physicians. You may be required to participate in short-term SCEEs throughout the professional program because the MSAT Program believes that these experiences are beneficial to your education, however, these experiences do not fulfill clinical experience requirements as defined by CAATE. More information regarding SCEEs will be provided by the MSAT Program when required.

Internships and Summer Camp Policy

The King's College MSAT Program does not require ATs to participate in any clinical experiences outside of the required components listed in the curriculum planner. In order for students to be considered an athletic training student they must be enrolled in a course that satisfies the MSAT Programs educational requirements. Experiences advertised as athletic training internships or summer camps that occur outside of the traditional academic calendar and that are not associated with one of the four Athletic Training Practicum courses are not a part of the King's College MSAT Programs educational requirement and will not satisfy any MSAT Program requirements. According to the Pennsylvania State Practice Act, 10.503, Section B, Number 3 - a person may not perform the duties of an athletic trainer unless that are licensed by the Board with the following exception: "An athletic training student practicing athletic training that is coincidental to required clinical education and is within the scope of the student's education and training." Since these extra experiences are not required as a component of a King's College MSAT Students educational requirements, they would not be able to perform the duties of an athletic trainer as outlined by the Pennsylvania State Practice Act. If they did, they would be practicing athletic training without a license and would not be protected from liability and would be in violation of the state practice act. If a student wished to pursue an additional experience, they must meet with the CEC to discuss the possibility of a formal internship. It is important for the student to check the state practice act of the state where the clinical opportunity would take place to make sure they would not be practicing in violation of the state practice act.

Athletic Training Student Travel Policy

During some clinical assignments, opportunities may be available for an Athletic Training Student (ATS) to travel to away athletic events (practices or competitions) with an athletic team under Direct Supervision of the primary preceptor. This travel may be required for successful completion of the clinical assignment. The Preceptor will discuss these opportunities for travel and any associated requirements with the ATS at the beginning of the CEE or ICEE.

ATSs are not permitted to travel to away athletic events (practices or competitions) without a Preceptor, regardless of whether the host site will have an Athletic Trainer or other health care professional present. An exception to this policy may be made if ALL of the following conditions exist:

1. The event must be at an affiliated clinical site that has an affiliated site agreement with King's College. See **Affiliated Clinical Sites Directions and Information** for a list of these sites.
2. The Athletic Trainer(s) providing medical coverage at the event must be a Preceptor for King's College who is subject to the terms of the affiliated site agreement related to the clinical site where the event is occurring.
3. The Athletic Trainer(s) providing medical coverage at the event must be able to provide Direct Supervision for the ATS during the entire event.

If all of these conditions exist, and either the ATS or their supervising Preceptor wishes to have the ATS travel under these circumstances, the ATS and the Preceptor must discuss the situation prior to the event. It is the responsibility of the ATS's supervising Preceptor to ensure that all three conditions are met prior to the event and the Preceptor must give permission for the ATS to travel. Exceptions will be handled on a case-by-case basis and the Clinical Education Coordinator has the right to allow or disallow any exceptions.

ATSs are not permitted to drive themselves to or from any away athletic events (practices or competitions). An exception to this policy may be made if one or both of the following conditions exists:

1. If the event occurs at a clinical site that is used by King's College (e.g. Kirby Park).
2. If the event occurs at an affiliated clinical site that has an affiliated site agreement with King's College.

If either exception applies, and an ATS wishes to drive themselves to an away event, they must get permission from their Preceptor to do so prior to the event. Exceptions will be handled on a case-by-case basis and the Clinical Education Coordinator has the right to allow or disallow any exceptions.

Transportation to Clinical Sites

Athletic Training Students are expected to assume responsibility for their own transportation to the various CEEs/ICEEs that are off campus. The Athletic Training Program will attempt to work with Athletic Training Students who do not have their own transportation, but keep in mind that the Athletic Training Student has the ultimate responsibility in making sure that they arrive to their CEE/ICEE on time. For those who have CEEs/ICEEs at Betzler Fields, there are buses that leave from Corgan Library that will take you to the fields. Check with your Preceptors for the times of events and make arrangements accordingly.

Athletic Training Student Inclement Weather Policy

Inclement weather may make travel to clinical assignments difficult or unsafe for students even though King's College and/or other clinical assignment locations are open. Here is what happens in that circumstance:

1st Year MSAT Students Completing CEEs

1. Clinic Day: If the ATS is scheduled to be at their Clinic Day, they must contact the Scandlon Sports Medicine Clinic and ask to be excused.
2. Normal CEE: If the ATS is scheduled to be at their normal CEE, they must contact their Preceptor and ask to be excused.
3. The personnel at the Clinic or the ATS's Preceptor will decide whether to excuse the ATS based on available weather and travel advisories, with the ATS's safety as the paramount consideration.

2nd Year MSAT Students Completing ICEEs

1. Normal ICEE: If the ATS is scheduled to be at their normal ICEE, they must contact their Preceptor and ask to be excused.
2. The ATS's Preceptor will decide whether to excuse the ATS based on available weather and travel advisories, with the ATS's safety as the paramount consideration.

King's College and/or other clinical assignment locations may also be closed due to inclement weather. These locations may be closed all day, at 12 PM, or later than 12 PM. Here is what happens in that circumstance:

1st Year MSAT Students Completing CEEs

1. Clinic Day: When the College is officially closed, the Clinic is closed. Students do not need to report for their Clinic Day that day. If the College closes early due to weather, the Clinic will be closed at the same time that the College closes. Students either do not need to report for their Clinic Day (if the College closes before 1 PM) or can leave when the Clinic closes (if the College closes after 1 PM).
 - A. If the Clinic is closed on a student's Clinic Day, they must check with their Preceptor to find out if they want them to be at their regular clinical assignment (see Normal Clinical Assignment below). ATS are not automatically excused from their clinical assignments if the Clinic is closed on their Clinic Day.
2. Normal CEE:
 - A. If an ATS's normal clinical assignment is at King's College and the College is closed, they must check with their Preceptor to find out if any activities are scheduled (or re-scheduled) and if they need to be there. If the student lives off-campus, they must inform their Preceptor if they think it will be unsafe to travel to campus. The Preceptor will decide whether to excuse them based on available weather and travel advisories, with the ATS's safety as the paramount consideration. The ATS will be informed of whether they are excused as early in the day as possible.
 - B. If an ATS's normal clinical assignment is at another university or high school, the ATS should first check with their Preceptor to find out if that location is closed. If it is, they must check with their Preceptor to find out if any activities are scheduled (or re-scheduled) and if the ATS needs to be there. The ATS must inform their Preceptor if they think it will be unsafe to travel to that location. The Preceptor will decide whether to excuse the ATS based on available weather and travel advisories, with the ATS's safety as the paramount consideration. The ATS will be informed of whether they are excused as early in the day as possible.
 - C. Sometimes clinical assignment locations are closed for more than one day due to weather but King's College is open. If this happens and the ATS is not required to be at their clinical assignment on those days, the Clinical Education Coordinator (CEC) may temporarily assign the ATS to clinical experiences at King's College so that they do not miss valuable clinical education experiences. It is the ATS's responsibility to

inform the CEC if their normal clinical assignment location is closed for more than one day.

3. Supplemental Clinical Education Experiences (SCEEs): When the College is officially closed, the CEC will inform the ATS whether you need to go to their SCEE. The CEC will decide whether to excuse the ATS based on available weather and travel advisories, with the ATS's safety as the paramount consideration. The ATS will be informed of whether they are excused as early in the day as possible.

2nd Year MSAT Students Completing ICEEs

1. Normal ICEE:

- A. If the ATS's ICEE is at King's College and the College is closed, they must check with their Preceptor to find out if any activities are scheduled (or re-scheduled) and if they need to be there. If the ATS lives off-campus, they must inform their Preceptor if they think it will be unsafe to travel to campus. The Preceptor will decide whether to excuse the ATS based on available weather and travel advisories, with ATS's safety as the paramount consideration. The ATS will be informed of whether they are excused as early in the day as possible.
- B. If ATS's ICEE is at an affiliated clinical site, the ATS should first check with their Preceptor to find out if that location is closed. If it is, they must check with your Preceptor to find out if any activities are scheduled (or re-scheduled) and if they need to be there. The ATS must inform their Preceptor if they think it will be unsafe to travel to that location. The Preceptor will decide whether to excuse the ATS based on available weather and travel advisories, with the ATS's safety as the paramount consideration. The ATS will be informed of whether they are excused as early in the day as possible.
- C. Sometimes clinical assignment locations are closed for more than one day due to weather. It is the student's responsibility to inform the CEC if their normal clinical assignment location is closed for more than one day. If this happens and they are not required to be at their clinical assignment on those days, the Clinical Education Coordinator (CEC) may temporarily assign the ATS to a different ICEE if available so that they do not miss valuable ICEEs.

Athletic Training Student Clinical Dress Code

1. Professional discretion must be used in dress, makeup, footwear and jewelry.
2. Individual Preceptors may have slightly different variations in how they interpret the dress code. These expectations will be communicated clearly to students by the Preceptor.
3. Athletic Training Students must wear and display the King's College MSAT Program identification badge provided by the program at all times when in the clinical setting. This identification will help differentiate their status as athletic training students from their certified preceptors when interacting with patients, parents, coaches, and administrators.
4. At King's College Sites:
 - a. Collared shirts (polo or button-down) with King's College Athletic Training logos are required (see "EXCEPTIONS" below). Shirts of an appropriate school color must be worn. Acceptable colors are red, white, gold/yellow, gray, or black.
 - b. All shirts must be of appropriate fit, buttoned appropriately, and tucked in at all times.
 - c. Shorts and pants must be of the appropriate length and fit. Khaki shorts or pants are preferred but any reasonable color may be worn (such as black, gray, blue, etc.). Jeans are not allowed.
 - d. No ripped or torn clothing should be worn.
 - e. Appropriate shoes that are practical in nature for clinical athletic training must be worn. Sneakers or standard shoes are the best choice. Open toed shoes (such as sandals or flip-flops) and soft-soled shoes (such as moccasins) are not permitted.
 - f. In cold weather, a jacket or sweatshirt can be worn with the King's College logo or with no logo (hooded sweatshirts are not permitted indoors). Students are discouraged from wearing a jacket or sweatshirt that contains the logo of a King's College athletic team because wearing these clothes may make it difficult for Preceptors, patients, coaches, and other AT students to differentiate AT students from student-athletes.
 - g. No clothing that contains advertisements for other schools, professional teams, alcohol, tobacco, or drugs can be worn.
 - h. Baseball caps are only permitted for outdoor activities and should be worn correctly. They are not to be worn inside. Baseball caps must have a King's College logo or must be plain.
 - i. A watch with a second-hand (or digital watch that displays seconds) must be worn.
 - j. Travel attire should be consistent with the Preceptor supervising that sport and must comply with any team rules.
 - k. For indoor and outdoor games/contests, attire should be coordinated with the Preceptor.
 - l. EXCEPTIONS: Students may wear functional professional business dress to the Scandon Sports Medicine Clinic at the discretion of Preceptors. Men must wear a dress shirt, tie, and dress pants. Women must wear a pants suit, skirted suit, dress, dress pants and appropriate top, or skirt and appropriate top.
5. At Affiliated Clinical Sites: Each affiliated clinical site will likely have its own dress code which will be communicated to the ATS. In general, the dress code should minimally entail:
 - a. Collared shirts (polo or button-down) with the affiliated site logo or King's College Athletic Training logos are required (see "EXCEPTIONS" below). Shirts of an appropriate school color must be worn.
 - b. All shirts must be of appropriate fit, buttoned appropriately, and tucked in at all times.
 - c. Shorts and pants must be of the appropriate length and fit. Khaki shorts or pants are preferred but any reasonable color may be worn (such as black, gray, blue, etc.). Jeans are not allowed.
 - d. No ripped or torn clothing should be worn.
 - e. Appropriate shoes that are practical in nature for clinical athletic training must be worn. Sneakers or standard shoes are the best choice. Open toed shoes (such as sandals or flip-flops) and soft-soled shoes (such as moccasins) are not permitted.
 - f. In cold weather, a jacket or sweatshirt can be worn with the affiliated clinical site logo or King's College logo or with no logo (hooded sweatshirts are not permitted indoors). Students are discouraged from wearing a jacket or sweatshirt that contains the logo of a

King's College athletic team because wearing these clothes may make it difficult for Preceptors, patients, coaches, and other AT students to differentiate AT students from student-athletes.

- g. No clothing that contains advertisements for other schools, professional teams, alcohol, tobacco, or drugs can be worn.
 - h. Baseball caps are only permitted for outdoor activities and should be worn correctly. They are not to be worn inside. Baseball caps must have the affiliated clinical site logo or the King's College logo or must be plain.
 - i. A watch with a second-hand (or digital watch that displays seconds) must be worn.
 - j. Travel attire should be consistent with the Preceptor supervising that sport and must comply with any team rules.
 - k. For indoor and outdoor games/contests, attire should be coordinated with the Preceptor.
 - l. EXCEPTIONS: Students may be allowed and/or required to wear functional professional business dress at the discretion of Preceptors. Men must wear a dress shirt, tie, and dress pants. Women must wear a pants suit, skirted suit, dress, dress pants and appropriate top, or skirt and appropriate top.
6. At supplemental clinical education experiences:
- a. Students must wear functional professional business dress all SCEEs. Men must wear a dress shirt, tie, and dress pants. Women must wear a pants suit, skirted suit, dress, dress pants and appropriate top, or skirt and appropriate top.

Athletic Training Student Clinical Incident Report

Date: _____

Athletic Training Student: _____

Site of Incident: Scandlon Sports Medicine Clinic Betzler Athletic Training Facility
 Other: _____

Problem:

Check the appropriate box(es) and describe in as much detail as necessary.

- | | |
|--|--|
| <input type="checkbox"/> Tardy | <input type="checkbox"/> Absent |
| <input type="checkbox"/> Inappropriate Language | <input type="checkbox"/> Inappropriate Behavior |
| <input type="checkbox"/> No Competency Manual in Scandlon Clinic | <input type="checkbox"/> Insubordination |
| <input type="checkbox"/> Dress Code Violation | <input type="checkbox"/> Other: (explain below) |

Preceptor: _____

Clinical Education Coordinator: _____

Athletic Training Student Clinical Offense Schedule

When an offense is documented on an Athletic Training Student Incident Report, the Preceptor will determine if the offense requires that the Athletic Training Student be removed from the clinical assignment until a formal meeting can be held with the Preceptor, the Clinical Education Coordinator, or the Program Director. Submission of an Athletic Training Student Incident Report to the Clinical Education Coordinator may result in the following:

- 1st Offense:** Meeting with the Preceptor and a verbal warning.
- 2nd Offense:** Formal meeting with the Clinical Education Coordinator.
- 3rd Offense:** Formal meeting with the Clinical Education Coordinator and the Program Director, a suspension of one week from the clinical assignment, and a ½-letter grade deduction in the class where the clinical hour and/or experience requirement is housed.
- 4th Offense:** Formal meeting with the Clinical Education Coordinator and Program Director, a suspension of two weeks from the clinical assignment, and a ½-letter grade deduction in the class where the clinical hour and/or experience requirement is housed.
- 5th Offense:** Formal meeting with the Clinical Education Coordinator and Program Director, a suspension of three weeks from the clinical assignment, and a ½-letter grade deduction in the class where the clinical hour and/or experience requirement is housed.
- 6th Offense:** The Athletic Training Student will be removed from the Athletic Training Program.

Offenses will be cumulative over the Professional Program for the Athletic Training Student. The beginning date of any suspension will be at the discretion of the Preceptor, the Clinical Education Coordinator, and the Program Director and may not necessarily be the same date as the offense.

Athletic Training Student Clinical Policies and Procedures

**Indicates items that are specific to King's College and may or may not apply at Affiliated Clinical Sites.*

1. Maintain a positive and professional attitude at all times
2. Maintain Professional dress (**See Dress Code**) and conduct at all times.
3. You are not to enter the Scandlon Sports Medicine Clinic Office unless you have specific duties in the office or a Preceptor has sent you there.*
4. When a student-athlete enters the Scandlon Sports Medicine Clinic or Athletic Training Facility, determine what they need and have them enter their information in the Daily Treatment Log. Provide the treatment evaluation, taping, wrapping, etc. **DO NOT** allow the student-athlete to perform any type of self-treatment or self-taping.*
5. All student-athletes must make an appointment for on-going rehabilitation in the Scandlon Sports Medicine Clinic. A student-athlete must check with a Preceptor before signing up for an evaluation. A student-athlete does not have to make an appointment for the following: acute injury, pre-practice treatment, taping, wrapping, etc. If a student-athlete does not keep their appointment, **see Student-Athlete Policies**. Permission must be obtained to reschedule an appointment.*
6. Everyone shall adhere to the Scandlon Sports Medicine Clinic, Athletic Training Facility, and Affiliated Clinical Site rules.
7. Respect all coaches and student-athletes. If there is a problem with a coach or student-athlete, find a Preceptor immediately.
8. All medical information is to be kept confidential. This information is not to be shared with anyone but the Athletic Training personnel. (**See Confidentiality Policy**)
9. Do not discuss any information about a student-athlete or athletics with the media or anyone outside of the Department of Sports Medicine or the medical personnel at the Affiliated Clinical Site. Direct all inquiries to the Preceptor for that sport or, if that person is unavailable, the nearest Preceptor.
10. Keep your relationships with the student-athletes (college and high school) and the patients at your clinical assignments on a professional level.
11. Keep your relationships with King's College Department of Sports Medicine Faculty, Staff, Preceptors, and Affiliated Clinical Site personnel on a professional level.
12. Ask before using the phone. Personal calls are not permitted. Student-athletes are only permitted to use the phone with the permission of a Preceptor.*
13. No tobacco products are to be possessed or used during clinical assignments.
14. No alcohol or illicit drugs are to be used during clinical assignments. (**See Alcohol and Drug Use Policy**)
15. Always be on time for your CEE/ICEE. If you must be absent, notify your Preceptor before the start of your clinical assignment. If there is an emergency and you cannot notify your Preceptor before the start of your clinical assignment, notify your Preceptor as soon as possible. (**See Attendance and Tardiness Policy**)
16. Remain attentive at practice and games at all times. Your attentiveness can prevent unnecessary problems. Homework should not be done during practice. You are permitted to write notes for any assignments directly related to your clinical assignment.

17. There will be certain times throughout your clinical assignments when all duties appear to have been completed. **It is expected that the Athletic Training Student will seek out tasks to be done without having to be directed in order to make their time spent in the Athletic Training Facility, Scandlon Sports Medicine Clinic, or Affiliated Clinical Site productive and worthwhile.** Suggested tasks include: completing clinical competencies, using educational computer software, repetitive practice of important skills (taping, evaluations, etc.), and the use of/reading of other Athletic Training reference materials.
18. In an effort to observe the student-athlete during practice or games, the Athletic Training Students must remain attentive and in a position to assist a student-athlete immediately. Therefore, the Athletic Training Student should position themselves in accordance with the flow of practice. It is recommended that the Athletic Training Student remain standing during practices and games unless immediate seating is available. Be observant and ready to move.
19. Distribute yourself about the practice area, game area or Scandlon Sports Medicine Clinic. Do not congregate in large groups during clinical assignments. Remember, your focus and conversation is on the student-athlete and potential athletic injuries.
20. The Gator at Betzler Fields is to be operated only by Professional Phase Athletic Training Students who have undergone proper safety training.”*
21. The Scandlon Sports Medicine Clinic and Athletic Training Facility are to be locked at all times if a Preceptor is not present.*
22. The equipment in the Scandlon Sports Medicine Clinic is to be used for rehabilitation purposes only. This equipment is not to be used for recreational use.*
23. The Scandlon Sports Medicine Clinic only treats intercollegiate student-athletes at King’s College. Any non-student-athletes must be referred to the Student Health Center in Andre Hall.*
24. When parking at Betzler Fields, Athletic Training Students must follow all signage and rules. Only vehicles with proper documentation/tags may park in spaces reserved for specific individuals/groups. Anyone parked illegally may be ticketed and/or towed at the owner’s expense.*
25. Everyone must help with the maintenance of the Scandlon Sports Medicine Clinic, Athletic Training Facility, and Affiliated Clinical Sites. Take initiative and complete the maintenance of the facilities without being told to do so.
26. Do not loan out any products without permission from one of the Preceptors.
27. Student-athletes who ask for tape for their equipment may only use what is in the scrap boxes.*
28. Athletic Training Students may not drive their own vehicles to away athletic contests without their Preceptor’s permission. They should ride with the team whenever possible.
29. No personal cell phones are to be used during clinical assignments except during an emergency or with a Preceptor’s permission. This includes texting, accessing the internet, or any other use of the cell phone.
30. **DO NOT** dispense or administer medications to anyone.

Violation of established policies and procedures, inappropriate behavior, or insubordination on the part of the Athletic Training Student will result in the submission of an Athletic Training Student Incident Report to the Clinical Education Coordinator (**see Athletic Training Student Incident Report and Athletic Training Student Clinical Offense Schedule**).

Athletic Training Student Clinical Supervision Policy

Athletic Training Students (ATS) completing required CEEs and/or ICEEs must be under the direct supervision of a BOC Certified Athletic Trainer or physician at all times. ATS completing required Supplemental Clinical Education Experiences (SCEEs) must be under the direct supervision of an approved, qualified healthcare provider at all times. At no time should the ATS be allowed to provide athletic training services without direct supervision by the preceptor or an approved physician.

Direct, on-site supervision means that the preceptor must be on-site and have the ability to intervene on behalf of the ATS and the patient. Direct supervision should also occur along the developmental continuum, allowing the student to move from interdependence to independence based on the student's knowledge, skills, and attitudes, as well as the context of health care being provided. Additionally, supervision must occur in compliance with the state practice act of the state in which the student is engaging in patient care.

In the event that a preceptor cannot be on-site to provide direct supervision, it is acceptable for a replacement to supervise the ATS as long as they are a BOC credentialed Athletic Trainer or physician that has been approved by the CEC and the King's College MSAT Program. The primary preceptor must notify the MSAT Program as soon as they are aware that they will not be able to provide appropriate supervision. If a suitable replacement cannot be obtained, then the ATS will be excused from their CEE/ICEE until their primary preceptor can return or a suitable replacement can be approved by the CEC.

If an ATS ever feels like they are not receiving appropriate supervision, they should stop providing athletic training services and contact their primary preceptor to discuss the situation. If the ATS is not satisfied with the response of the preceptor, or they feel that the situation is not being handled appropriately, they should contact the CEC who will speak with the preceptor to attempt to rectify the situation.

In an emergency situation, ATSs may provide emergency care and first aid without direct supervision from their preceptor within the scope of their emergency care training and certification and all applicable federal, state, and local laws. Students may have a duty to act in such circumstances.

Preceptor Roles and Responsibilities

1. Maintain regular communication with the Clinical Education Coordinator of the Athletic Training (AT) Program.
2. Meet all responsibilities and/or duties as delineated in the King's College job description or by the Affiliated Site Contract/Agreement with King's College.
3. Properly orient Athletic Training Students to the clinical site at the beginning of the clinical rotation, including going over the emergency action plan, bloodborne pathogens and exposure control plan, policies and procedures, and location of emergency supplies for that clinical site.
4. Properly supervise Athletic Training Students at all times.
5. Help the Athletic Training Students to meet the goals of the CEE/ICEE and the Athletic Training Practicum course associated with the experience.
6. Instruct and evaluate the Athletic Training Students' clinical education progress.
7. Utilize different teaching styles and methods to adapt to the different learning styles of the Athletic Training Students.
8. Model and teach effective communication skills; encourage Athletic Training Students to utilize those skills with student-athletes, coaches, parents, and other medical personnel.
9. Attend all Preceptor retraining and update sessions.
10. Maintain all national and state credentials required for professional practice.
11. Practice legal and ethical behaviors, including but not limited to following the Board of Certification, Inc. Standards of Professional Practice and the National Athletic Trainers' Association Code of Ethics.
12. Model and maintain appropriate and professional interpersonal relationships.
13. Demonstrate clinical skills and knowledge which meet or exceed athletic training standards.
14. Assign various daily and weekly duties including maintenance of the athletic training facility and proper record keeping.
15. Promote appropriate patient instruction and patient education of an athlete's athletic injury.
16. Instruct the proper procedures for carrying out the emergency action plan and make sure that the Athletic Training Students follow the plan.
17. Utilize proper terminology, including but not limited to the following: "Athletic Trainer," "Athletic Training," "Athletic Training Student."
18. Properly document daily and monthly Athletic Training Student clinical hour records.
19. Perform evaluations of the Athletic Training Students as indicated in the **Athletic Training Student and AT Program Evaluations and Outcomes Assessment** section of this handbook and using Exxat, the online program management system.

20. Report any tardiness, unexcused absences or other Athletic Training Student offenses to the Clinical Education Coordinator of the AT Program utilizing the **Athletic Training Student Clinical Incident Report** and other forms of communication as needed.
21. Have a current National Provider Identifier (NPI) number with the appropriate designation as a "Specialist/Technologist Athletic Trainer."
22. Develop and maintain contemporary expertise in one or more of the areas identified by CAATE.

Bloodborne Pathogens Exposure Control Plan

Introduction

The purpose of this plan is to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with [Occupational Safety and Health \(OSHA\) Bloodborne Pathogens Standard 29 CFR 1910.1030](#), "Occupational Exposure to Bloodborne Pathogens." The MSAT Program's plan is modeled after the King's College Exposure Control Plan, which applies to all employees of the College. The MSAT Program plan applies to athletic training (AT) employees, which includes AT faculty, AT Preceptors, and any other health care clinicians working at King's College in conjunction with the AT Program. Should any conflict arise between the MSAT Program plan and the College's plan when AT employees are involved, the College's plan shall take precedence. The MSAT Program plan also applies to MSAT students with minor exceptions. Since the OSHA Standards are intended to protect employees in the workplace as opposed to students in an academic setting, the College is released from liability and financial responsibility for medical management and treatment following an accidental exposure incident and the vaccination of undergraduate students against the hepatitis B virus.

Each affiliated site must also have a bloodborne pathogens exposure control plan. Preceptors at those sites must provide the MSAT Program Clinical Education Coordinator with a copy of the Bloodborne Pathogens Exposure Control Plan specific to their site. These plans must be reviewed with each MSAT student during orientation to the site.

Access to Bloodborne Pathogens Exposure Control Plans

All clinical sites, including King's College, must ensure that their Bloodborne Pathogens Exposure Control plan is posted and/or readily available in all locations where the possibility of exposure exists and must be immediately accessible by MSAT students, Preceptors, and other clinicians.

Exposure Determination

King's College AT employees and MSAT students may be exposed to bloodborne pathogens and other potentially infectious materials (OPIM) in clinical settings [see Appendix A: Definitions]. AT employees and MSAT students are considered to be exposed even if they wear personal protective equipment (PPE). This exposure determination affects all health care providers and MSAT students affiliated with King's College Athletic Training working directly with patient care.

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

- A. Athletic Trainer (faculty and/or clinician): Instructs and supervises research, laboratory, and clinical activities that involve the use of blood or OPIM. Responds to illnesses, accidents, and injuries that involve exposure to blood or OPIM.
- B. Physician: Responds to illnesses, accidents and injuries that involve exposure to blood or OPIM.
- C. Health Care Clinician: Responds to illnesses, accidents and injuries that involve exposure to blood or OPIM.
- D. Athletic Training Student: Participates in research, laboratory, and clinical activities that involve the use of blood or other OPIM. Responds to illnesses, accidents and injuries that involve exposure to blood or OPIM.

Methods of Compliance

Universal Precautions will be observed at all facilities in order to prevent contact with blood or OPIM. All blood or OPIM will be considered infectious regardless of the perceived status of the source or source individual.

A. Bloodborne Pathogens Exposure Control Plan

AT employees receive a hard copy of the plan upon commencement of employment and an explanation of the plan at their initial Bloodborne Pathogens Training session. The plan is also reviewed at annual re-training sessions. MSAT students receive a hard copy of the plan on the first day of classes when they begin the MSAT major and an explanation of the plan at their initial Bloodborne Pathogens Training session. The plan is also reviewed at annual re-training sessions. Hard copies of the plan are

immediately accessible at clinical sites. Electronic copies of the plan are available to AT employees and MSAT students at all times via the internet. The MSAT Program Clinical Education Coordinator and Program Director are responsible for reviewing and updating the plan annually or more frequently if necessary to reflect new or modified tasks and procedures that affect occupational exposure and to reflect new or revised job classifications with occupational exposure.

B. Communication of Hazards to AT Employees and MSAT Students

Biohazard warning labels will be affixed to containers of blood or regulated waste, refrigerators and freezers containing blood or OPIM and other containers used to store, transport or ship these materials. Biohazard labels will be fluorescent orange or orange-red or predominantly so, with lettering and symbols in a contrasting color. These labels will be affixed as close as feasible to the container by string, wire, adhesive, or other method that prevents their loss or unintentional removal. Individual containers of blood or OPIM that are placed in a labeled container during storage, transport, shipment or disposal are exempted from the labeling requirement. Regulated waste that has been decontaminated need not be labeled.

C. Engineering and Work Practice Controls

Engineering and work practice controls will be used to eliminate or minimize employee and student exposure. Engineering controls will be examined and maintained or replaced to ensure their effectiveness. PPE will also be used if there is exposure potential.

King's College will provide readily accessible hand washing facilities for AT employee and MSAT student use. When hand-washing facilities are not possible, appropriate antiseptic hand cleanser or antiseptic towelettes will be provided. AT employees and MSAT students will be trained to wash their hands with soap and running water as soon as possible after any exposures and after removing PPE.

Contaminated needles and other contaminated sharps will not be bent, recapped, or removed unless no alternative is feasible or that such action is required by a specific medical procedure. Such bending, recapping or needle removal must be accomplished through the use of a mechanical device, or a one-handed technique.

Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure.

Food and drink will not be kept in refrigerators, freezers, shelves, cabinets, or on countertops or bench tops where blood or OPIM are present.

All procedures involving blood or OPIM will be performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.

Specimens of blood or OPIM will be placed in a container which prevents leakage during collection, handling, processing, storage, transport, or shipping. Containers used for storage, transport, or shipping will be biohazard labeled and closed prior to being stored, transported, or shipped.

D. Personal Protective Equipment (PPE)

When there is occupational exposure, King's College will provide, at no cost to AT employees and MSAT students, appropriate PPE such as gloves, gowns, laboratory coats, face shields, eye protection, masks, mouthpieces, resuscitation bags, pocket masks, or other ventilation devices. PPE will be considered "appropriate" only if it does not permit blood or OPIM to pass through to or reach the AT employee's or MSAT student's clothes, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the PPE will be used.

The College will ensure that AT employees and MSAT students use PPE and that appropriate sizes are readily accessible or are issued to AT employees and MSAT students. PPE will be repaired or replaced as needed to maintain its effectiveness, at no cost to the AT employee or MSAT student. All PPE will be removed prior to leaving the work area and/or if the protective clothing is contaminated with blood or OPIM. The College will clean, launder, and dispose of PPE. When PPE is removed it will be placed in designated areas or containers for storage, washing, decontamination or disposal.

Gloves will be worn when there is potential for hand contact with blood or OPIM and when handling or touching contaminated items or surfaces. Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives will be readily accessible to those AT employees and MSAT students who are allergic to the gloves normally provided. Disposable (single use) gloves will be replaced as soon as practical when contaminated or damaged. Disposable (single use) gloves will not be washed or decontaminated for re-use.

Masks in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin-length face shields, will be worn whenever splashes, spray, spatter, or droplets of blood or OPIM may be generated. Appropriate protective clothing such as gowns, aprons, lab coats, clinic jackets, or similar outer garments will be worn in occupational exposure situations.

E. Regulated Waste

Disposal of all regulated waste will be in accordance with the King's College Exposure Control Plan as well as applicable federal, state, and local regulations. Contaminated sharps and other regulated waste will be discarded immediately or as soon as feasible in biohazard labeled containers that are closable, puncture resistant, and leakproof. Containers for contaminated sharps will be maintained upright throughout use, easily accessible to personnel, replaced routinely, and not be allowed to overfill.

When moving contaminated sharps or other regulated wastes the containers will be biohazard labeled and closed to prevent spillage or protrusion during handling, storage, transport, or shipping. Secondary containers will be used if leakage is possible. The second container will also be biohazard labeled, closable, and constructed to contain all contents and prevent leakage.

F. Laundry

Contaminated laundry will be handled as little as possible while being placed in biohazard labeled transport bags or containers. Contaminated laundry will not be sorted or rinsed in the location of use. Wet contaminated laundry will be placed in appropriate leak proof bags or containers. King's College will ensure that AT employees and MSAT students who have contact with contaminated laundry wear protective gloves and other appropriate PPE.

Hepatitis B Vaccination

A. AT Employees

King's College will make the hepatitis B vaccination series available at no cost to all AT employees after the employee has received training and within 10 working days of initial assignment to job duties that involve exposure. AT employees receive information about the hepatitis B virus and vaccine during their initial, mandatory Bloodborne Pathogens Training session. Employees who decline to accept the hepatitis B vaccination must sign a waiver indicating their refusal but can change their mind at any time during employment at the College. If a routine booster dose of hepatitis B vaccine is recommended by the United States Public Health Service at a future date, the booster dose will be made available at no cost to the AT employee.

B. MSAT Students

MSAT students are required get the hepatitis B vaccination, which they must obtain at their own expense. MSAT students receive information about the hepatitis B virus and vaccine during their initial, mandatory Bloodborne Pathogens Training session, which they must complete prior to placement at any clinical site (including observations). Students must provide proof of vaccination to the CEC via the "Student Required Documents" section of EXXAT.

Exposure Incidents and Post-Exposure Procedures

A. Exposure Incidents

1. AT Employees: When an AT employee incurs an exposure incident, he or she must follow the procedures in the King's College Exposure Control Plan. The AT employee must immediately inform the Director of Athletic Training Services, the AT Program Director, and the Office of Human Resources that an exposure incident has occurred. All necessary documentation must be completed as part of the post-exposure follow-up.

2. MSAT Students: When an MSAT student incurs an exposure incident, he or she must follow the procedures in the MSAT Program Bloodborne Pathogens Exposure Control Plan. The MSAT student must immediately inform the nearest Preceptor that an exposure incident has occurred. The Preceptor will assist the MSAT student with necessary acute medical care, referral for post-exposure medical evaluation, and post-exposure documentation. The Preceptor must inform the MSAT Clinical Education Coordinator and the MSAT Program Director that an exposure incident has occurred within 24 hours of the incident. All necessary documentation must be completed as part of the post-exposure follow-up, including the *Athletic Training Student Bloodborne Pathogen Exposure Incident Report* [see Appendix C].

B. Post-Exposure Evaluation

When an AT employee or MSAT student needs a referral for medical evaluation following a bloodborne pathogens exposure they may use the physician or health agency of their choice at King's College's expense. It is extremely important that the exposed person seeks treatment immediately after the exposure. If an exposure occurs when no private physician or health care is available, the exposed person should be sent to the nearest emergency department.

Following initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:

- Document the routes of exposure and how the exposure occurred.
- Identify and document the source individual (unless the College can establish that identification is infeasible or prohibited by state or local law).
- Obtain consent and make arrangements to have the source individual tested as soon as possible to determine hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV) infectivity. Document that the source individual's test results were conveyed to the employee's health care provider.
- If the source individual is already known to be HIV, HCV, and/or HBV positive, new testing need not be performed.
- Assure that the exposed person is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
- After obtaining consent, collect the exposed person's blood as soon as feasible after the exposure incident, and test the blood for HBV, HCV, and HIV serological status.
- If the exposed person does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days. If the exposed person elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

C. Post-Exposure Follow-Up

1. AT Employee: When an AT employee incurs an exposure incident, the Office of Human Resources will ensure that the necessary follow-up procedures and documentation are carried out as delineated in the King's College Exposure Control Plan. The MSAT Program Director will assist the Office of Human Resources with this follow-up.
2. AT Student: When an MSAT student incurs an exposure incident, the MSAT Clinical Education Coordinator and the MSAT Program Director will work in conjunction with the Office of Human Resources to ensure that the necessary follow-up procedures and documentation are carried out.

D. Procedures for Evaluating the Circumstances Surrounding an Exposure Incident

The MSAT Clinical Education Coordinator and the MSAT Program Director will work in conjunction with the Office of Human Resources to determine the following:

- Engineering controls in use at the time
- Work practices followed
- A description of the device being used (including type and brand)
- Involvement of sharps (Human Resources will record all percutaneous injuries from contaminated sharps in a Sharps Injury Log)

- PPE or clothing that was used at the time of the exposure incident (gloves, eye shields, etc.)
- Location of the incident (exam room, hallway, athletic field, etc.)
- Procedure being performed when the incident occurred
- Exposed person's training

If revisions to the MSAT Program Bloodborne Pathogens Exposure Control Plan are necessary, the MSAT Clinical Education Coordinator and the MSAT Program Director will ensure that appropriate changes are made.

Training

If King's College AT employees and MSAT students have occupational exposure or potential exposure to blood or OPIM they must take part in Bloodborne Pathogens Training to control exposure. The College will provide training for all AT employees and MSAT students at no cost. The person conducting the training will be knowledgeable in the subject matter covered by the elements contained in the training program as it relates to King's College.

A. Timing of Training

1. **AT Employees:** Training must take place upon commencement of employment and before any activities in an area where there is risk of occupational exposure. Re-training will be required annually. The AT employee will undergo additional training when changes such as modification of tasks or procedures or institution of new tasks or procedures affect the AT employee's occupational exposure. The additional training may be limited to addressing the new exposures created.
2. **AMST Students:** Training must take place before placement at any clinical site (including observational experiences). Re-training will be required annually. The MSAT student will undergo additional training when changes such as modification of tasks or procedures or institution of new tasks or procedures affect the MSAT student's occupational exposure. The additional training may be limited to addressing the new exposures created.

B. Training program elements

1. An accessible copy and explanation of the King's College AT Program OSHA Manual, which includes the MSAT Program Bloodborne Pathogens Exposure Control Plan
2. An accessible copy and explanation of the OSHA Bloodborne Pathogen Standard
3. A discussion of the epidemiology and symptoms of bloodborne diseases
4. An explanation of the modes of transmission of bloodborne pathogens
5. An explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
6. An explanation of the use and limitations of the methods employed by King's College to reduce exposure (e.g., engineering controls, work practices, and PPE)
7. An explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
8. An explanation of the basis of selection of PPE
9. Information on the Hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine will be offered free of charge (for AT employees only; MSAT students must obtain the vaccine at their own expense)
10. Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
11. An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
12. Information on the post-exposure evaluation and follow-up that King's College is required to provide for the exposed person following an exposure incident
13. An explanation of the signs, labels, and/or color coding required by the standard and used at the College
14. An opportunity for interactive questions and answers with the person conducting the training session

Records and Recordkeeping

A. Training Records

1. AT Employees: records of completion are maintained by the AT Program Director in digital form for the duration of employment. A hard copy of these records is submitted annually to the Office of Human Resources. The Office of Human Resources is responsible for maintaining these records and will keep them for at least three years.
2. MSAT Students: records of completion are maintained by the MSAT Clinical Education Coordinator in digital form and are maintained for a duration of at least three years following an MSAT student's graduation. A hard copy of each MSAT student's annual record of completion is kept in their official MSAT program file.

B. Medical Records

1. AT Employees: The Office of Human Resources is responsible for maintaining an accurate medical record for each AT employee with occupational exposure. Details on these records and record-keeping processes can be found in the King's College Exposure Control Plan.
2. MSAT Students: The Office of Human Resources is responsible for maintaining an accurate medical record for any MSAT student who has incurred an exposure incident. This record will include the name and social security number of the MSAT student; a copy of the MSAT student's hepatitis B vaccination status (including dates of vaccination); a copy of the results of examinations, medical testing, follow-up procedures; and a copy of the information provided to the health care professional treating the MSAT student. A copy of this record will be kept in the MSAT student's official MSAT program file. King's College will ensure that an MSAT student's medical records are kept confidential and not disclosed or reported without the MSAT student's express written consent to any person within or outside the workplace except as may be required by law. King's College will maintain the records for as long as required by applicable federal, state, and local laws.

C. Availability of Records

Whenever an AT employee or MSAT student requests access to a record, King's College shall provide access to said person's records in a reasonable time, place, and manner in accordance with the OSHA Standard 29 CFR 1910.1020(e). A person (or designated representative) will only be given access to their own records.

Bloodborne Pathogen Exposure Control Plan Appendix A: Definitions

AIDS	Acquired Immune Deficiency Syndrome
Biological	A preparation made from a living organism or its products, including vaccines and cultures intended for use in diagnosing, immunizing, or treating humans or animals or in research pertaining thereto.
Biomedical Waste	Untreated solid waste, any disposable container thereof and any reusable container thereof which has not been decontaminated, generated during the administration of medical care or the performance of medical research involving humans or animals, including infectious waste, pathological waste, and chemotherapy waste. This excludes (1) any solid waste that is a hazardous waste, (2) untreated solid waste generated during the administration of medical care in a single or multiple family residence by a resident thereof, (3) discarded materials used for personal hygiene, such as diapers, facial tissues, and sanitary napkins, unless such materials are isolation waste, (4) syringes, hypodermic needles, and other medical equipment used by farmers for the treatment of their livestock in the course of conducting farming, provided that such equipment is not excluded when used by a veterinarian or at the direction of a veterinarian, and (5) samples of biomedical waste collected and transported by the Institution.
Blood	Human blood, human blood components, and products made from human blood.
Bloodborne Pathogens (BBP)	Disease causing microorganisms present in human blood and certain other bodily fluids. The two most commonly encountered bloodborne pathogens are the Hepatitis B Virus (HBV) and the Human Immunodeficiency Virus (HIV).
Bodily Fluids	Semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, anybody fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids.
Clinical Laboratory	A workplace where diagnostic or other screening procedures are performed on blood or other potentially infectious materials.
Contaminated	The presence, or the reasonably anticipated presence, of blood or other potentially infectious materials on an item or surface.
Contaminated Laundry	Laundry which has been soiled with blood or other potentially infectious materials or may contain sharps.
Contaminated Sharps	Any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.
Container	Any receptacle in which material is placed. "Primary container" means the initial container in which biomedical waste is placed when multiple containers for packaging of biomedical waste are required. "Secondary container" means a container in which a primary container is placed.
Decontamination	The use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.
Engineering Controls	Controls (e.g., sharps disposal containers, self-sheathing needles, and safer medical devices, such as sharps with engineered sharps injury protections and needleless systems) that isolate or remove the bloodborne pathogens hazard from the workplace.
Exposure Incident	A specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties.
Hand Washing Facilities	A facility providing an adequate supply of running potable water, soap, and single-use towels or air-drying machines.
HBV	Hepatitis B Virus infection
HCV	Hepatitis C Virus infection
HIV	Human Immunodeficiency Virus
Infectious Waste	Waste, which is capable of causing an infectious disease, is one of the wastes listed below, or is waste identified as infectious by a licensed health care provider. Waste shall be deemed capable of causing an infectious disease if there is reason to believe that it has been contaminated by an organism that is known or suspected to be pathogenic to humans and if such organism may be present in sufficient quantities

	<p>and with sufficient virulence to transmit disease. The following are listed as infectious waste:</p> <ul style="list-style-type: none"> • Municipal and residual waste which is generated in the diagnosis, treatment, immunization or autopsy of human beings or animals, in research pertaining thereto, in the preparation of human or animal remains for interment or cremation, or in the production or testing of biologicals. • Any discarded culture or stock of infectious agents and associated biologicals, including human and animal cell cultures from clinical, hospital, public health, research and industrial laboratories; any waste from the production of biologicals; any discarded etiologic agent; any discarded live or attenuated vaccine or serum; and any discarded culture dish or device used to conduct diagnostic tests or to transfer, inoculate, or mix cell cultures. • Any Human pathological wastes, including tissues, organs and body parts and body fluids that are removed during surgery, autopsy, other medical procedures or laboratory procedures. The term does not include hair, nails or extracted teeth. • Human blood and body fluid waste, including: <ul style="list-style-type: none"> • Liquid waste human blood. • Blood products. • Items saturated or dripping with human blood. • Items that were saturated or dripping with human blood that are now caked with dried human blood, including serum, plasma and other blood components, which were used or intended for use in patient care, specimen testing or the development of pharmaceuticals. • Intravenous bags that have been used for blood transfusions. • Items, including dialysate, that have been in contact with the blood of patients undergoing hemodialysis at hospitals or independent treatment centers. • Items saturated or dripping with body fluids or caked with dried body fluids from persons during surgery, autopsy, other medical procedures or laboratory procedures. • Specimens of blood products or body fluids, and their containers. • Any discarded used sharp and any residual substance therein. • Any discarded unused hypodermic needle, scalpel blade, suture needle or syringe. • Contaminated animal carcasses, body parts, blood, blood products, secretions, excretions and bedding of animals that were known to have been exposed to zoonotic infectious agents or non-zoonotic human pathogens during research (including research in veterinary schools and hospitals), production of biologicals or testing of pharmaceuticals. • Biological wastes and waste contaminated with blood, excretion, exudates or secretions from: <ul style="list-style-type: none"> • Humans who are isolated to protect others from highly virulent diseases. • Isolated animals known or suspected to be infected with highly virulent diseases. • Any potentially infectious wastes that are mixed with municipal or residual wastes, or radioactive wastes. • Any material collected during or resulting from the cleanup of a spill of infectious or chemotherapy waste.
<p>Licensed Healthcare Professional</p>	<p>A person whose legally permitted scope of practice allows him or her to independently perform the activities required by paragraph (f) Hepatitis B Vaccination and Post-exposure Evaluation and Follow-up.</p>
<p>Needleless Systems</p>	<p>A device that does not use needles for:</p> <ol style="list-style-type: none"> 1. The collection of bodily fluids or withdrawal of body fluids after initial venous or arterial access is established 2. The administration of medication or fluids 3. Any other procedure involving the potential for occupational exposure to bloodborne pathogens due to percutaneous injuries from contaminated sharps.

Occupational Exposure	Reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.
OSHA	Occupational Safety and Health Administration
Other Potentially Infectious Materials (OPIM)	OPIM includes: <ol style="list-style-type: none"> 1. The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood (including urine, feces, vomitus, nasal secretions, and tears), and all body fluids in situations where it is difficult or impossible to differentiate between body fluids. 2. Any unfixed tissue or organ (other than intact skin) from a human (living or dead). 3. HIV-containing cell or tissue cultures, organ cultures; HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.
Pathological Waste	Any human tissue, organ, or body part removed during surgery, autopsy, or other medical procedure. Pathological waste does not include formaldehyde or other preservative agent, or a human corpse or part thereof.
Parenteral	Piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, cuts, and abrasions.
Personal Protective Equipment	Specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g., uniforms, pants, shirts, or blouses) not intended to function as protection against a hazard are not considered to be personal protective equipment.
Production Facility	A facility engaged in industrial-scale, large-volume, or high concentration production of HIV or HBV.
Regulated Waste	Liquid or semi-liquid blood, or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.
Research Laboratory	A laboratory producing or using research laboratory-scale amounts of HIV or HBV. Research laboratories may produce high concentrations of HIV or HBV, but not in the volume found in production facilities.
Sharps with Engineered Sharps Injury Protections	A non-needle sharp or a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, with a built-in safety feature or mechanism that effectively reduces the risk of an exposure incident.
Soiled Laundry	Condition where all laundry is assumed to be contaminated.
Spill	Any unplanned release, leaking, pumping, pouring, emitting, or depositing of biomedical waste or any planned release, leaking, pumping, pouring, emitting, or depositing of biomedical waste in violation of the requirements.
Sterilize	The use of a physical or chemical procedure to destroy all microbial life, including highly resistant bacterial endospores.
Universal Precautions	An approach to infection control. According to the concept of universal precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.
Virus	A microorganism smaller than bacteria, which cannot grow or reproduce apart from a living cell. A virus invades living cells and uses their chemical machinery to keep itself alive and to replicate itself. It may reproduce with fidelity or with errors (mutations). This ability to mutate is responsible for the ability of some viruses to change slightly in each infected person, making treatment more difficult. Viruses cause many common human infections and are also responsible for a bevy of rare diseases.
Work Practice Controls	Controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g., prohibiting recapping of needles by a two-handed technique).

Bloodborne Pathogen Exposure Control Plan Appendix B: Athletic Training Student Bloodborne Pathogens Exposure Incident Report

Complete this form following an actual or potential exposure to blood or other potentially infectious material. This form should be completed as soon after the incident as possible and must be completed within 24 hours of the incident. **In the event of a medical emergency, do not delay treatment to complete this form.**

The supervising Preceptor shall assist the AT student in the completion of this form. Further assistance should be obtained as needed from the AT Program Clinical Education Coordinator (CEC) and the King's College Office of Human Resources (OHR). The AT student should, whenever possible, take a copy of this form with them when they go for medical evaluation following the exposure incident. The information in this form may be crucial to proper post-exposure evaluation. **The medical evaluation should be done as soon as possible following the exposure.** A copy of this form must be provided to the AT Program CEC and the King's College OHR.

Date of Exposure:	Time of Exposure:
Date of Report (if different from date of exposure):	
Student Name:	
Student ID Number:	
Student Contact Information:	
Address: _____	
Phone: (Cell) _____ (Home) _____	
Has the exposed student been immunized against the hepatitis B virus? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNSURE	
Place/Facility Where Exposure Occurred:	
Supervising Preceptor:	
Other Witnesses Present:	
Personal Protective Equipment Used at the Time of the Exposure:	
What was the AT student exposed to? (check all that apply) <input type="checkbox"/> Blood <input type="checkbox"/> Other (please specify): _____ <input type="checkbox"/> Body fluid with visible blood	
Route(s) of Exposure: (check all that apply) <input type="checkbox"/> Needle stick/sharps accident (device type: _____ device brand: _____) <input type="checkbox"/> Contact with mucous membranes (eyes, mouth, nose) <input type="checkbox"/> Contact with skin (circle all that apply: broken, abraded, chapped, prolonged contact, extensive contact)	
Severity of Exposure:	
How much fluid? _____	
How long was exposure? _____	
How severe was the injury to the exposed person (if applicable)? _____	

Source Individual's Information:

Name: _____

Address: _____

Phone: _____

Is a blood sample from the source available? YES NO

Is the source individual's hepatitis virus (B or C) infection status known? YES NO

Is the source individual's HIV infection status known? YES NO

Activity Leading to Exposure:

- | | |
|--|--|
| <input type="checkbox"/> Controlling bleeding | <input type="checkbox"/> Discarding needle/sharps |
| <input type="checkbox"/> Cleaning blood spill | <input type="checkbox"/> Giving injection |
| <input type="checkbox"/> Handling waste products | <input type="checkbox"/> Recapping needle |
| <input type="checkbox"/> Handling disposal box | <input type="checkbox"/> Other (please specify): _____ |

Describe precisely how the exposure occurred: (attach additional pages if necessary)

Immediate interventions taken: (check all that apply)

- Area cleaned/washed/flushed
- Antimicrobial applied
- Dressings applied
- Other (please specify): _____

Describe the nature and scope of injury to the exposed student, if any: (attach additional pages if necessary)

Was medical treatment obtained? YES (complete information below) NO

Hospital/Clinic where treatment was obtained: _____

Name and credential of treating clinician: _____

Student Signature: _____ Date: _____

Preceptor Signature: _____ Date: _____

Background Clearances

All Athletic Training Students must complete background clearances prior to beginning CEE's. These are only good for one calendar year and will need to be done again prior to beginning ICEE's. The purpose of these is to satisfy the laws that govern the Commonwealth of Pennsylvania (for more information about these laws, go to www.education.pa.gov/Educators/Clearances/Pages/default.aspx). Prior to beginning CEE's and ICEE's, the student must submit a copy of the results of their clearances to the Clinical Education Coordinator

Three clearances are required of ALL students:

- Pennsylvania Child Abuse History Clearance (see item A below)
- Pennsylvania Access to Criminal History (PATCH) (see item B below)
- Federal Criminal History Record Information (see item C below for instructions)

Pennsylvania Child Abuse History Clearance

This can be done on-line. There is no cost because you are considered a volunteer. It may take up to two weeks for this clearance to be processed.

1. Go to: <https://www.compass.state.pa.us/CWIS>
 - A. Click on "CREATE INDIVIDUAL ACCOUNT" and follow the instructions.
 - B. Go back to the Compass site and click "INDIVIDUAL LOGIN"
 - C. Click on "ACCESS MY CLEARANCES"
 - D. Login using your temporary password then create a new, personalized password.
 - E. You'll have to login again using your new, personalized password.
 - F. Proceed through the webpages until you get to where you can select "CREATE CLEARANCE APPLICATION" and select that choice.
 - G. According to the website, here are things you'll need to have ready to complete the clearance:
 - Addresses where you have previously lived (this will be all the way back to the date of your birth)
 - Names of all individuals with whom you have lived to include parents, guardians, siblings, spouses, etc. (it will ask for the age of these people)
 - Any previous names you have used or have been known by
 - H. When you get to "Application Purpose", select "Volunteer Having Contact with Children"
 - I. Provide all necessary information
 - J. When you get to "Certificate Delivery Method", it's up to you whether you want a paper copy mailed to you. It's OK to select "No" because you will get an electronic copy that you can print out. This printout will serve as a valid certificate.
 - K. Click the button that says, "FINALIZE AND SUBMIT APPLICATION"
 - L. You will receive an email letting you know that you will receive the results of your application within 14 days. These results will come via email.
2. When you get your email with the results of this background check, print out the results and submit them to the Clinical Education Coordinator.

Pennsylvania State Police Request for Criminal History Record Check

This can be done on-line. There is no cost because you are considered a volunteer. This clearance is processed immediately.

1. Go to: <https://epatch.state.pa.us/Home.jsp> and click on "New Record Check (Volunteers only)".
2. On the next page, read the terms and conditions, and click on "Accept".
3. On the next page, under "Requestor Details", select "Individual Request".
4. The website will guide you through the process. When it asks for "Reason for Request," select "Other". Remember, you are doing a check on yourself, so that's the information you should enter when it asks who you want to do a check on.
5. When the website finishes the check, **make sure you print out the page that confirms that the check was done and that you have no criminal record before exiting the website.** If you forget to do this, you may have to do the whole thing over again and may have to pay for it.
6. The printed clearance is what you must submit to the Clinical Education Coordinator.

Federal Criminal History Record Information

This clearance requires you to complete an online portion and go to an approved site to be fingerprinted. You can pay the \$23.85 fee with a credit or debit card, money order, or cashier's check. This clearance can take several weeks to process.

1. Go to <https://www.education.pa.gov/Educators/Clearances/CHRI/Pages/Applicant-Procedures.aspx> to read through the procedures for this background check.
2. Then go to: <https://uenroll.identogo.com/>
 - a. Enter the following Service Code: 1KG6Y3 (this is the code for a Pennsylvania Dept. of Education [PDE] Volunteer)
 - b. Click on "Schedule or Manage Appointment"
 - c. Input all of the necessary information and follow all directions to set up your fingerprinting appointment. **Be sure to print out any pages that you are instructed to print out.**
 - d. Schedule your fingerprinting at an approved location and get fingerprinted. You MUST get fingerprinted at a location in Pennsylvania.
 1. **Save the receipt from your fingerprinting. It will have a UEID number on it. You will need to give this number to the Clinical Education Coordinator.**
 - e. You will receive an unofficial copy of your report. **Be sure to bring this to the Clinical Education Coordinator.**

Clinical Attendance and Tardiness Policy

Dependability and punctuality are a must in the professional world. Both are imperative to succeed in the Athletic Training Program and in life, so the Athletic Training Faculty has developed an Attendance and Tardiness Policy.

1. All Athletic Training Students are required to attend all clinical assignments, on time, as assigned by their Preceptor. Possible reasons why an Athletic Training Student may be excused from an assignment include the following examples: scheduled class, personal illness/medical emergency, or illness/medical emergency/death in the family. Reasons given for an absence will be handled on a case-by-case basis by the supervising Preceptor to determine if the absence will be considered excused or unexcused.
2. If an Athletic Training Student must be absent from a clinical assignment for any reason, it is the Athletic Training Student's responsibility to directly contact (in person, by phone, or by e-mail) their Preceptor before the start of that day's clinical assignment whenever possible. If that is not reasonably possible, the student must directly contact the Preceptor as soon as possible after the start of that day's clinical assignment. If an Athletic Training Student is absent from a clinical assignment and does not directly contact the Preceptor within 24 hours, it will count as an unexcused absence, regardless of the reason for the absence.
3. If an Athletic Training Student knows in advance that there is an event (e.g. family wedding, surgery) that will require them to request an excused absence from their clinical assignment, they must put the request in writing and submit it to their Preceptor as far in advance as possible. All requests for an excused absence will be handled on a case-by-case basis by the supervising Preceptor.
4. Unexcused absences will result in the submission of an Athletic Training Student Incident Report to the Clinical Education Coordinator (See **Athletic Training Student Incident Report** and **Athletic Training Student Offense Schedule**). In addition, the Athletic Training Student will be required to complete make-up assignments, as determined by their Preceptor, to supplement the missed clinical education experiences during the absence.
5. In the event of an excused absence, the Athletic Training Student may be required to complete make-up assignments, as determined by the Preceptor, to supplement the missed clinical education experiences during the absence. The decision on whether or not to assign make-up assignments will be handled on a case-by-case basis by the supervising Preceptor.
6. Tardiness will result in the submission of an Athletic Training Student Incident Report to the Clinical Education Coordinator (See **Athletic Training Student Incident Report** and **Athletic Training Student Offense Schedule**). Tardiness is defined as being more than five minutes late for a clinical assignment.

Clinical Assignments During Breaks Policy

Students in the Professional Athletic Training Program must attend clinical rotation assignments as part of the requirements for AT 420, AT 425, AT 520, AT 525. Students may be required to be at these clinical assignments during times outside of the traditional fall and spring semesters (hereafter referred to as “recess” or “recesses”). These include, but are not limited to the following:

- August Pre-season (up to 3 weeks before the start of the Fall Semester)
- Fall Recess (2nd Thursday – Friday in October)
- Thanksgiving Recess (4th Wednesday – Sunday in November)
- Inter-semester Recess (time between the last day of final exams for the Fall Semester and the first day of the Spring Semester)
- Winter Recess (1st Monday – Friday in March)
- Easter Recess (Thursday before Easter – Monday after Easter)

It will be up to a student’s preceptor to determine if and when a student must be at their clinical assignment during a recess. A student may need to be at their clinical assignment for an entire recess or for only part of a recess. The preceptor will notify the student of the specific dates during which they must be at their clinical assignment prior to the recess. This notification will occur as far in advance of the recess as is reasonably possible.

In the event that a student thinks they will not be able to be at their clinical assignment during a recess, the student must notify their preceptor and the Athletic Training Clinical Education Coordinator **in writing**. This written notification must include the dates that the student will be absent and the reason(s) for being absent. The student may be required to meet with the preceptor and the Clinical Education Coordinator. The preceptor and the Clinical Education Coordinator will determine whether or not the student’s absence will be excused or unexcused and the Clinical Education Coordinator will notify the student of the status of their absence. In the event that an absence is determined to be unexcused, the student may face any or all of the following consequences:

- Completion of a make-up assignment as determined by the preceptor and Clinical Education Coordinator
- Completion of hours missed during an alternate recess or during the semester
- Filing of one or more incident reports, which may negatively affect the student’s grade in AT 420, 425, 520, or 525 (see the Athletic Training Student Offense Schedule in the Athletic Training Student Handbook).

Hours earned during a recess will be applied to a student’s hours total for the CEE/ICEE as follows:

- Hours are applied to the fall (AT 420 or 520) hours total during the following recesses:
 - August Pre-season
 - Fall Recess
 - Thanksgiving Recess
- Hours are applied to the spring (AT 425 or 525) hours total during the following recesses:
 - Inter-semester Recess
 - Winter Recess
 - Easter Recess

Clinical Experience: Liability Insurance

Students enrolled in Athletic Training Practicum 1 to 4 are covered by liability insurance that is maintained by King's College.

American Red Cross Certifications Policy

All MSAT Program Students must be certified in American Red Cross CPR/AED for the Professional Rescuer and First Aid. It is the responsibility of ATS to maintain both certifications until they have graduated from the MSAT Program. Any ATS who does not maintain both certifications will not be allowed to report to clinical assignments until they provide documentation of re-certification in both. The Department of Sports Medicine will offer annual re-certification in CPR/AED for the Professional Rescuer and First Aid. Any ATS who chooses to become re-certified elsewhere must provide documentation of the re-certification to the Program Director.

Alcohol and Drug Use Policy

Athletic Training Students shall not report to clinical assignments under the influence of alcohol and/or illicit drugs and shall not consume alcohol or illicit drugs during clinical assignments. Any Athletic Training Student suspected of doing either of the above will be immediately removed from the clinical assignment and will be suspended from further clinical assignments until a formal review is conducted by the Athletic Training Clinical Education Coordinator and the Program Director. Athletic Training Students are also subject to the King's College Alcohol and Drug Policies found in the King's College Student Handbook.

Immunization, Health, and Infectious Disease Control Policy

All Athletic Training Students are required to have all of the vaccinations required by the CDC for Health Care Workers before beginning clinical experiences in AT 420 Athletic Training Clinical Practicum 1. These include **measles, mumps, rubella (MMR), Hepatitis B, and Varicella, and Tdap vaccinations**. Students will also be required to obtain the annual influenza vaccine while enrolled in the professional program. Students who live on campus must also have either the meningococcal vaccination OR a waiver declining the meningococcal vaccination.

In addition, all students (or parent/guardian if under 18) must complete the King's College Athletic Training Program Technical Standards for Admission form.

It is the responsibility of the Athletic Training Student to be aware of their current state of health. If an Athletic Training Student suspects that they are ill, they should report to a physician, physician assistant, or nurse practitioner for evaluation and diagnosis. It is the responsibility of the Athletic Training Student to ask the health care practitioner if the Athletic Training Student should be restricted from treating patients. The Athletic Training Student should follow those restrictions and must inform the Preceptor if those restrictions will prevent them from attending a clinical assignment.

The Athletic Training Program complies with the non-discriminatory policies of the College regarding individuals with potentially disabling conditions, including those resulting from infectious diseases. Athletic Training Students are required to be in compliance with the Program's Bloodborne Pathogens Exposure Control Plan at all times.

Therapeutic Equipment Safety Policy

The King's College MSAT Program requires that therapeutic equipment at all clinical sites is inspected, calibrated, and maintained according to the manufacturer's recommendations and according to applicable federal, state, and local laws. The purpose of this policy is to safeguard the health of the patient. This policy is communicated to MSAT Program students and faculty via the MSAT Program Student Handbook and to MSAT Program preceptors via the MSAT Program Preceptor Handbook. Both handbooks are available in electronic form at all times via the internet.

Maintenance of Safe Therapeutic Equipment

1. A qualified technician will *regularly inspect and calibrate* applicable therapeutic equipment at all clinical sites. This includes all sites at King's College and all affiliated clinical sites where athletic training students are placed.
 - a. *Regularly inspect and calibrate* is defined as "inspect and calibrate according to the manufacturer's recommendations and according to applicable federal, state, and local laws with regard to both timing and proper procedure."
 - b. Sites accredited by the Joint Commission, *Accreditation Association for Ambulatory Health Care*, or other recognized external accrediting agencies are exempt from this requirement but are expected to follow the policies of those agencies.
2. The preceptor(s)/staff at each clinical site must arrange inspection and calibration for the therapeutic equipment.
3. The preceptor(s)/staff at each clinical site must arrange payment (if required) for the inspection and calibration. King's College is not responsible for payment or reimbursement for inspection and calibration at affiliated clinical sites.
4. Verification of inspection and calibration will be maintained as follows:
 - a. Hard or electronic copies of inspection and calibration records by the preceptor(s)/staff at each clinical site; the method may be determined by the site but the information must be readily accessible at any time by the preceptor(s)/staff for presentation to the AT Program Clinical Education Coordinator
 - b. Visible notification (e.g., sticker, signage) on applicable therapeutic equipment
5. The preceptors/staff at each clinical site are also responsible for ongoing maintenance of therapeutic equipment. Any equipment that appears to be unsafe for patient or clinician use shall not be used and shall be clearly marked as not for use until it can be properly inspected and calibrated.
6. The Clinical Education Coordinator will verify regular inspection and calibration of all applicable therapeutic equipment at each clinical site prior to placement of athletic training students at a site.

Procedures for Safe Use of Therapeutic Equipment by Athletic Training Students

1. Athletic training students must be instructed in and must demonstrate competence in the use of specific therapeutic equipment before using said specific therapeutic equipment in the treatment or care of any patient.
 - a. Instruction shall occur in AT courses (didactic and/or lab)
 - b. Competence shall be assessed by an AT Program preceptor
2. Athletic training students will only use therapeutic equipment while under direct supervision by a preceptor.
3. Athletic training students will only apply therapeutic equipment according to manufacturer guidelines; applicable federal, state, and local laws; and according to accepted medical practice standards.

Confidentiality Policy

Any information that is considered professionally confidential should not be discussed with anyone other than the patient involved, the athletic trainers, preceptors, the team physician, and any other health care professionals directly involved in a patient's care. Information that is considered privileged and confidential includes, but is not limited to, the following:

- Patient information obtained through the patient's medical file, physical evaluation, physician's diagnosis/note, physician's office, subjective interview, and medical consultations
- Athletic Training clinical services information that is considered privileged, protected and/or proprietary. These events may include medical treatments and athletic team events (games, practices, and meetings).
- Athletic program information that is considered privileged, protected, and/or proprietary. These events may include medical treatments and athletic team events (games, practices, and meetings).
- Personnel information that is considered privileged, protected, and/or proprietary. Personnel include, but are not limited to, athletic trainers, athletic training students, other health care professionals, patients, student-athletes, coaches, staff, and officials.

Always consult with the patient and with a preceptor before discussing a patient's information with the patient's coach (if applicable) and/or any family members. Any breach of patient confidentiality is a violation of federal law (Family Education Right to Privacy Act/Buckley Amendment, Health Insurance Portability and Accountability Act) and may result in civil and criminal penalties as well as disciplinary action.

Always consult with a preceptor before discussing privileged, protected, and/or proprietary information that is not patient information. If you are not sure whether the information is privileged, protected, and/or proprietary, assume it is until you consult with a preceptor. Any breach of confidentiality not directly related to patient information may result disciplinary action.

(See Confidentiality Policy Contractual Agreement Statement in Athletic Training Student Handbook)

Social Media Policy

Scope and Definitions

This Social Media Policy applies to all employees and students of the King's College Master of Science in Athletic Training (MSAT) Program. For this policy, "employees" includes, but is not limited to full-time and part-time faculty/instructors, athletic trainers, Preceptors (at King's College and at affiliated sites); "students" includes any full-time or part-time student enrolled in any MSAT Program course and/or performing any clinical experiences (e.g., hours/rotations). The term social media includes online communications, social networks, and internet- and mobile-based tools for sharing and discussing information based on user participation and user-generated content. These include, but are not limited to, sites like Facebook, Flickr, Instagram, LinkedIn, Snapchat, Twitter, and YouTube. Examples of social media content include postings to social networks, blogs, pictures, videos, and podcasts. Email and text messaging (SMS or other messaging method) may also be considered forms of social media.

This policy is not intended to apply to the following online activities: those that do not associate or identify an employee or student with the MSAT Program; those that do not use a King's College email address; those that do not discuss aspects of the MSAT Program including, but not limited to, personnel (including personnel at clinical sites, such as coaches, officials, and staff), academics, clinical experiences, clinical sites, and patients; and/or those that are purely about personal matters that have no relation to the MSAT Program. The Social Media Policy incorporates all King's College, MSAT Program, National Athletic Trainers' Association (NATA), Pennsylvania Athletic Trainers' Society (PATS), Board of Certification, Inc. (BOC), Pennsylvania State Board of Medicine, and Health Insurance Portability and Accountability Act (HIPAA) policies relating to professional conduct, ethical behavior and online communications (see Appendix A for the location of these policies). Employees and students must follow the Social Media Policy regardless of whether the equipment being used is personally owned or owned by another party (such as an employer). The Social Media Policy is considered a living document and may be revised and amended as new technologies emerge.

Guiding Principles

1. The MSAT Program fully supports the rights of employees and students to engage in social media.
2. Professional or personal activities that affect the health and welfare of patients, clinical performance, academic performance, the performance of others, or the professional interests of King's College and the AT Program are a legitimate and proper focus for MSAT Program policy.
3. Employees and students are expected to exercise personal and professional responsibility whenever they use social media.
4. Employees and students are expected to follow all applicable MSAT Program policies. No information should be shared with anyone in any way that violates those policies. Should such information appear on any form of social media, this shall be treated as a violation of the Social Media Policy regardless of who owns/manages the social media.
5. Only employees or students officially designated as spokespersons for the MSAT Program can use social media to represent the MSAT Program in an official capacity. Employees and students may not misrepresent themselves when they are speaking on their own behalf or for the MSAT Program.
6. Patient privacy must be protected at all times in accordance with MSAT Program policies, the NATA Code of Ethics, the BOC Standards of Professional Practice, and all state and federal laws (including HIPAA). Employees and students are prohibited from using social media to share anything that could violate the privacy of a patient. This may include, but is not limited to, picture/images, video, or audio used without proper permission.
7. Employees and students have a right to personal and professional privacy. Employees and students are prohibited from using social media to share anything that could violate the personal or professional privacy of another employee or student. This may include, but is not limited to, picture/images, video, or audio used without proper permission.

Responsible Use of Social Media

1. Recognize that there is no such thing as true privacy when using social media. Privacy settings should be used to improve the likelihood that information is protected and is only being made

available to desired parties. The responsibility for maintenance of privacy ultimately rests with the person presenting information through social media.

2. Understand that information is more than just words. It can also include pictures/images, video, audio, or any combination thereof. Furthermore, be aware that social media does not always allow information to be presented in the desired context.
3. Once information has been presented through social media, it is virtually impossible to completely remove it from the internet. In many cases, information becomes easier to find over time rather than harder to find due to improvements in archive and search technologies.
4. Use good judgment at all times when using social media. Ensure that information is complete, accurate, and appropriate. Be respectful of others. Never use social media in a manner that is dishonest, misleading, disparaging, threatening, harassing, intimidating, or discriminatory.
5. When engaging in social media activities, always use conduct that is professional and is in accordance with all King's College and MSAT Program policies, the NATA Code of Ethics, the PATS Code of Ethics, the BOC Standards of Professional Practice, and the Pennsylvania State Board of Medicine rules and regulations.
6. Do not use social media to present information that could in any way reveal a patient's identity. This may include information about events at clinical experiences, clinical sites, MSAT Program employees, or MSAT Program students. Remember, merely removing a patient's name does not necessarily keep the patient's identity confidential.
7. Do not use social media to present any specific information or discuss any issues related to patients, student-athletes, clinical experiences, clinical sites, MSAT Program employees, MSAT Program students, and/or staff at clinical sites (including coaches, officials, and staff). Social media should never be used to air grievances about anything related to the MSAT Program or clinical sites.
8. Whenever presenting information that states or implies a connection to the MSAT Program, identify yourself, identify your role in the MSAT Program, and use a disclaimer stating that your views are your own and do not reflect the views of the MSAT Program or King's College. Never provide information to any form of news media or any representative of a media organization unless authorized by King's College administration and/or the Director of the MSAT Program.
9. Always follow state and federal laws with regard to issues such as copyright, trademark, and fair use.

Professional Interactions Through Social Media

The following rules have been developed to promote professional interactions between MSAT Program employees, MSAT Program students, and persons at affiliated sites. Affiliated sites include all clinical sites at which MSAT Program students perform clinical rotations.

Interactions Between MSAT Program Employees and MSAT Program Students

Employees must use the utmost professional discretion when contacting MSAT Program students by email or text message and must limit these interactions to professional content and purposes (for example, notifying a student of a practice time change). Employees are strongly encouraged to use their work-related email account when sending email to students. Former employees and former students (alumni or students no longer enrolled in the MSAT Program) are not affected by this policy.

Interactions Between MSAT Program Students and Adult Patients (Including Adult Student-Athletes)

MSAT Program students must use the utmost professional discretion when contacting adult patients (including adult student-athletes) by email or text message and must limit these interactions to professional content and purposes (for example, reminding a patient of an appointment). MSAT Program students **must use their King's College email account** when sending email to adult patients.

Interactions Between MSAT Program Students and Minor Persons at Affiliated Sites*

- MSAT Program students are prohibited from any interaction through social media with all minor (below age 18) persons at any King's College affiliated site.
- Examples of interactions that are prohibited include, but are not limited to, accepting or making friend requests on Facebook and following or being followed on Twitter.

- MSAT Program students are prohibited from sending text messages to minor persons at affiliated sites for any reason (personal or professional).
- MSAT Program students are prohibited from *social* interaction with minor persons at affiliated sites by email.
- MSAT Program students currently assigned to an affiliated site may need to contact a minor person at that site for professional reasons. The MSAT Program student must use the utmost professional discretion when contacting a minor person by email and must limit these interactions to professional content and purposes (for example, reminding a patient of an appointment). MSAT Program students **must use their King's College email account** when sending email to minor persons at affiliated sites.
- These prohibitions are in effect regardless of whether the MSAT Program student is or has ever been assigned to the affiliated site.

*King's College is exempted from this aspect of the policy due to the fact that MSAT Program students may be subject to College courses that require interaction with minor King's College students through social media, email, and text messaging. MSAT Program students may still be subject to the penalties delineated by this policy if they engage in inappropriate activities and/or behavior with minor persons at King's College.

Interactions Between MSAT Program Students and Secondary School Students at Affiliated Sites

- MSAT Program students are prohibited from any interaction through social media with secondary school students (of any age) at any King's College affiliated site. Examples of interactions that are prohibited include, but are not limited to, accepting or making friend requests on Facebook and following or being followed on Twitter.
- MSAT Program students are prohibited from sending text messages to secondary school students at affiliated sites for any reason (personal or professional).
- MSAT Program students are prohibited from *social* interaction with secondary school students at affiliated sites by email.
- MSAT Program students currently assigned to an affiliated site may need to contact a secondary school student at that site for professional reasons. The MSAT Program student must use the utmost professional discretion when contacting a secondary school student by email and must limit these interactions to professional content and purposes (for example, reminding a patient of an appointment). MSAT Program students **must use their King's College email account** when sending email to secondary school students at affiliated sites.
- These prohibitions are in effect regardless of whether the MSAT Program student is or has ever been assigned to the affiliated site.

Monitoring and Enforcement

The King's College MSAT Program will have zero tolerance for any violation of the Social Media Policy. To the extent permitted by law, King's College and the MSAT Program reserve the right to view and monitor information presented through social media by MSAT Program employees and students. College administrators, MSAT Program faculty, and MSAT Program Preceptors may look up information on social media and may use the information as part of informal or formal proceedings without providing notice to the individuals involved. If a MSAT Program employee or student becomes aware of a violation of the Social Media Policy by another MSAT Program employee or student, the person who discovered the violation must promptly report it to the Director of the MSAT Program (or King's College administrators if the violation involves the Director). Failure to report a violation of the Social Media Policy may itself be considered a violation of the Social Media Policy.

Penalties

Employees – Directly Employed by King's College

Failure to comply with the Social Media Policy may result in one or more of the following:

1. Disciplinary action up to and including termination

2. Disciplinary action by the NATA, the BOC, and/or the State Medical Boards
3. Civil or criminal penalties as provided by law

Employees – Affiliated Site/Off-campus Preceptors

Failure to comply with the Social Media Policy may result in one or more of the following:

1. Suspension or termination of services as a Preceptor for the MSAT Program
2. Disciplinary action up to and including termination by the Preceptor's direct employer
3. Disciplinary action by the NATA, the BOC, and/or the State Medical Boards
4. Civil or criminal penalties as provided by law

Students

Failure to comply with the Social Media Policy may result in one or more of the following:

1. Academic consequences up to and including automatic failure of one or more MSAT Program courses
2. Disciplinary action up to and including permanent dismissal from the MSAT Program
3. Disciplinary action through the King's College judicial system
4. Loss of eligibility to take the Board of Certification, Inc. certification exam
5. Loss of eligibility to become credentialed and/or practice as an athletic trainer
6. Civil or criminal penalties as provided by law

Appendix A: Locations of Policies Related to the Social Media Policy

Athletic Training Program Preceptor Handbook

- [King's College MSAT Program Google Drive](#)

Athletic Training Program Student Handbook

- [King's College MSAT Program Google Drive](#)

Board of Certification, Inc. Standards of Professional Practice

- bocatc.org/public-protection#standards-of-professional-practice

Health Insurance Portability and Accountability Act

- hhs.gov/ocr/privacy/

King's College Employee Handbook

- departments.kings.edu/hr/PolicyManual/EmployeeManual.htm

King's College Full-Time Faculty Handbook

- kings.edu/mykings/ftf_resources

National Athletic Trainers' Association Code of Ethics

- nata.org/codeofethics

Pennsylvania Athletic Trainers' Society Code of Ethics

- gopats.org/aboutus/code-of-ethics.htm

Pennsylvania State Board of Medicine Rules and Regulations

- dos.pa.gov/ProfessionalLicensing/BoardsCommissions/Medicine/Pages/Board-Laws-and-Regulations.aspx

Automated External Defibrillator Policies and Procedures

Medical Director

The Medical Director is the King's College Team Physician and has authority over Automated External Defibrillator (AED) use, AED policies and procedures, and personnel using the AED. Responsibilities include but are not limited to:

1. Development and review of policies and procedures that define the standard for patient care and use of the AED
2. Compliance with these policies and procedures
3. Review of response documentation and rescue data for all uses of the AED
4. Oversight of proper training and certification for personnel using the AED

Medical Director:

William Charlton, MD

570-288-3535

AED Coordinator

The AED Coordinator is a Faculty member in the Department of Sports Medicine and is the primary liaison between the department and the Medical Director. Responsibilities include but are not limited to:

1. Maintenance of all AED equipment and supplies
2. Organization of AED training and certification
3. Meeting with all King's College personnel involved in a cardiac incident
4. Compiling response documentation and rescue data
5. Forwarding AED response documentation and rescue data to the Medical Director and the Director of Athletic Training Services

AED Coordinator:

Ryanne Ziobro, MEd, ATC

570-208-5900 ext. 5447

AED Training and Certification

The following personnel in the Department of Sports Medicine are trained to use an AED:

- All Faculty members/Certified Athletic Trainers
- Sophomore junior, and senior Athletic Training Program students

These personnel are certified in American Red Cross CPR/AED for the Professional Rescuer and will renew that certification annually.

Pennsylvania Law Concerning AED Use

- 42 Pa.C.S. § 8331.2 delineates Good Samaritan civil immunity for AED use.
- 42 Pa.C.S. § 8332 delineates non-medical Good Samaritan civil immunity for AED use.

AED Manufacturer and Model

Medtronic Physio-Control LIFEPAK 500 Biphasic Automated External Defibrillator

Location of AEDs

1. Scandlon Sports Medicine Clinic: at all times
2. Betzler Fields Dorish Fieldhouse Lobby: at all times

AED Inventory

Each AED carrying case should contain:

- 1 AED unit with functioning battery
- 2 sets of AED electrodes
- 1 CPR pocket mask
- 1 disposable razor

- 1 pair of emergency shears
- 2 pairs of latex gloves
- 1 towel
- 1 bottle of sterile saline solution
- 1 manual suction device

Manual suction device must be attached to or accompany AED carrying case

AED Maintenance

- Daily: the AED performs a self-test every 24 hours; an alarm sounds if service is required
- Monthly: the AED Coordinator or designee will inspect the AED inventory on the 1st of each month, clean the AED inventory, and replace any items as necessary

AED Use Procedures

See the King's College Department of Sports Medicine Emergency Action Plan

AED Post-use Procedure

1. Responding Personnel
 - Notify the AED Coordinator within 1 hour
 - If the AED Coordinator cannot be reached, notify the Director of Athletic Training Services within 1 hour
 - Clean AED inventory and replace items as necessary
 - Complete AED Usage Report and submit to AED Coordinator within 24 hours
2. AED Coordinator
 - Notify the Medical Director within 24 hours
 - Notify the Director of Athletic Training Services within 24 hours
 - Meet with responding personnel
 - Compile response documentation and rescue data and forward to the Medical Director and the Director of Athletic Training Services

Clinical Sites and Preceptors:

COLLEGES AND UNIVERSITIES

King's College 133 North River Street Wilkes Barre, PA 18711		
Facilities	Address	Phone Numbers
Betzler Athletic Fields	221 Highland Park Blvd Wilkes-Barre Township, PA 18702	AT Facility: (570) 208-8508
Revolution Ice Arena	12 Old Boston Road Pittston, PA 18604	General Facility: (570) 883-1100
Scandlon Sports Medicine Clinic	150 North Main Street Wilkes-Barre, PA 18701	AT Facility: (570) 208-5940
Types of Experiences Offered at Clinical Site		Protective Equipment Male and Female Athletes Individual and Team Sports Upper Extremity and Lower Extremity
Preceptors	Contact Information	Responsibilities
Amy Brzoska, MS, ATC	E-Mail: amybrzoska@kings.edu Office: (570) 208-5900 x.5650	Scandlon Sports Medicine Clinic Field Hockey Men's and Women's Swimming (W/SP) Men's Volleyball
Melissa Ciocco, MS, ATC	E-Mail: melissaciocco@kings.edu Office: (570) 208-5900 x.5459	Scandlon Sports Medicine Clinic Women's Volleyball Men's Tennis (Fall) Wrestling Softball
Aaron Hand, MS, ATC	E-Mail: aaronhand@kings.edu Office: (570) 208-5900 x.5391	Director of Athletic Training Services Scandlon Sports Medicine Clinic Women's Soccer Men's Rugby Baseball
Gregory Janik, DAT, ATC	E-Mail: gregjanik@kings.edu Office: (570) 208-5900 x.5684	Scandlon Sports Medicine Clinic Football Women's Lacrosse
Amy Kowalczyk, MS, ATC	E-Mail: amykowalczyk@kings.edu Office: (570) 208-5900 x.5940	Scandlon Sports Medicine Clinic Assist Football Men's and Women's Ice Hockey Men's Tennis (Spring)
Timothy Kulpa, DAT, ATC	E-Mail: timothykulpa@kings.edu Office: (570) 208-5900 x.5236 Cell: (518) 330-8546	Clinical Education Coordinator of the AT Program
David Marchetti, DAT, ATC	E-Mail: davidmarchetti@kings.edu Office: (570) 208-5900 x.5494	Scandlon Sports Medicine Clinic Men's Soccer Women's Rugby Men's Lacrosse
Christina Seber, MS, ATC	E-Mail: christinaseber@kings.edu Office: (570) 208-5900 x.5940	Scandlon Sports Medicine Clinic Men's and Women's Golf Women's Tennis (Fall) Men's and Women's Cross Country Men's and Women's Ice Hockey Men's and Women's Track and Field

Jeremy Simington, MS, ATC	E-Mail: jeremysimington@kings.edu Office: (570) 208-5900 x.5636	Director of the AT Program
Ryanne Ziobro, Med, ATC	E-Mail: ryanneziobro@kings.edu Office: (570) 208-5900 x.5447	Scandlon Sports Medicine Clinic Men's and Women's Swimming (Fall) Men's and Women's Basketball Cheerleading Women's Tennis (Spring)

Misericordia University 301 Lake Street Dallas, PA 18612		
Facilities	Address	Phone Numbers
Anderson Sports & Health Center Room 114	301 Lake Street Dallas, PA 18612	AT Facility: (570) 674-6349
Metz Field House	301 Lake Street Dallas, PA 18612	AT Facility: (570) 674-8315
Types of Experiences Offered at Clinical Site		Protective Equipment Male and Female Athletes Individual and Team Sports Upper Extremity and Lower Extremity
Preceptors	Responsibilities	Contact Information
Robin Jackson, ATC	All AT Services	(570) 574-4915 rmarichak@hotmail.com athtrain@misericordia.edu
Tony Mozeleski, MS, ATC	All AT Services	(570) 466 - 0739 tonymozeleski@gmail.com athtrain@misericordia.edu
Mitch Wasik, MS, ATC	Football, All AT Services	(650) 678-4089 mitchwasik@gmail.com athtrain@misericordia.edu

Wilkes University 84 W South Street Wilkes Barre, PA 18701		
Facilities	Address	Phone Numbers
Marts Center	274 South Franklin Street Wilkes-Barre, PA 18766	AT Facility: (570) 408-4027
Ralston Athletic Complex	302 Northampton Street Edwardsville, PA 18704	AT Facility: (570) 714-4760
Toyota SportsPlex at Coal Street	38 Coal Street Wilkes-Barre, PA 18702	No Direct Phone – Preceptor Cell
Types of Experiences Offered at Clinical Site		Protective Equipment Male and Female Athletes Individual and Team Sports Upper Extremity and Lower Extremity
Preceptors	Responsibilities	Contact Information
Carl Andrews, ATC	All AT Services	(570) 709-1774 carl.andrews@wilkes.edu
Tyler Brady, ATC	Ice Hockey, All AT Services	(570) 780-4233 tyler.brady@wilkes.edu

Casey Martin, MS, ATC	Football, All AT Services	(570) 592-7455 casey.martin1@wilkes.edu
Camille, Valvano, MS, ATC	All AT Services	(570) 690-0460 camille.valvano@wilkes.edu

SECONDARY SCHOOLS

Dallas High School 2030 Conyngham Ave, Dallas, PA 18612		
Facilities	Address	Phone Numbers
Dallas Senior High School	2030 Conyngham Ave, Dallas, PA 18612	AT Facility: (570) 675-5201 ext. 1027
Mountaineer Stadium	2030 Conyngham Ave, Dallas, PA 18612	No Direct Phone – Preceptor Cell
Types of Experiences Offered at Clinical Site		Protective Equipment Male and Female Athletes Individual and Team Sports Upper Extremity and Lower Extremity
Preceptors	Responsibilities	Contact Information
Joe Giunta, MS, ATC	All AT Services	(570) 262-1116 jngiunta@geisinger.edu

Hanover Area High School 1600 Sans Souci Parkway Hanover Township, PA 18706		
Facilities	Address	Phone Numbers
Hanover Area High School	1600 Sans Souci Parkway Hanover Township, PA 18706	AT Facility: (570) 831-2300 ext. 382
Football Stadium	78 W. St. Mary's Rd. Hanover, PA 18706	No Direct Phone – Preceptor Cell
Types of Experiences Offered at Clinical Site		Protective Equipment Male and Female Athletes Individual and Team Sports Upper Extremity and Lower Extremity
Preceptors	Responsibilities	Contact Information
Michael Nasser, ATC	All AT Services	(570) 762-1271 mnasser@geisinger.edu

Hazleton Area High School 1601 West 23rd Street Hazle Township, PA 18202		
Facilities	Address	Phone Numbers
Hazleton Area High School	1601 West 23rd Street Hazle Township, PA 18202	Preceptor Cell
Harman-Geist Memorial Field	175 N. Wyoming Street Hazleton, PA 18201	Preceptor Cell
Varsity Baseball field	5 East 22 nd Street Hazel township, PA 18202	Preceptor Cell

Types of Experiences Offered at Clinical Site		Protective Equipment Male and Female Athletes Individual and Team Sports Upper Extremity and Lower Extremity
Preceptors	Responsibilities	Contact Information
Michael Bannon, MS, ATC	All AT Services	(267) 614-2903 michael.bannon@lvhn.org bannonm@hasdk12.org
Larry Halye, ATC	All AT Services	(570) 578-5980 halyel@hasdk12.org

Northwest Area Middle/High School 243 Thorne Hill Rd Shickshinny, PA 18655		
Facilities	Address	Phone Numbers
Northwest Area Middle/High School	243 Thorne Hill Rd Shickshinny, PA 18655	AT Facility: (570) 542-4126 ext. 1022
Types of Experiences Offered at Clinical Site		Protective Equipment Male and Female Athletes Individual and Team Sports Upper Extremity and Lower Extremity
Preceptors	Responsibilities	Contact Information
Victoria Hall, ATC	All AT Services	(570) 234-6370 vchall@geisinger.edu

Wyoming Seminary 2030 Conyngham Ave, Dallas, PA 18612		
Facilities	Address	Phone Numbers
Carpenter Athletic Center	256 North Maple Avenue Kingston, PA 18704	AT Facility:
Nesbitt Stadium	Intersection of Hoyt and Chestnut Streets Kingston, PA 18704	AT Facility:
Types of Experiences Offered at Clinical Site		Protective Equipment Male and Female Athletes Individual and Team Sports Upper Extremity and Lower Extremity
Preceptors	Responsibilities	Contact Information
Lisa Mozeleski, MS, LAT, ATC	All AT Services	(570) 270-2171 lmozeleski@wyomingseminary.org

GENERAL MEDICAL SITES

Redi-Care – Taylor, PA 648 N. Main St. Taylor, PA 18517		
Site Contact	Email Address	Phone Number

Matt Perrone	redicaretaylor@gmail.com	(570) 348-1101
Types of Experiences Offered at Clinical Site	General Medical (Non-Orthopedic – Non-Sport Population)	
Preceptors	Responsibilities	
Giles Lobb, PA-C	General Medical Care	

ORTHOPEDIC SITES

Commonwealth Health Physician Network Orthopedics – Kingston 390 Pierce Street Kingston, PA 18704		
Site Contact	Email Address	Phone Number
Donna Baird – Practice Manager	dbaird@commonwealthhealth.net	(570) 288-3535
Lori Nerozzi – Commonwealth Health Practice Manager	lneroizzi@commonwealthhealth.net	N/A
Preceptors	Responsibilities	
William Charlton, MD	Orthopedic Surgery, Sports Medicine	
James Mattucci, MD	Orthopedics	
Michael Raklewicz, MD	Orthopedic Surgery	

SITES AWAITING AFFILIATED SITE AGREEMENTS

Wilkes Barre Area School District 730 South Main Street Wilkes Barre, PA 18711-0376		
Facilities	Address	Phone Numbers
Types of Experiences Offered at Clinical Site	Protective Equipment Male and Female Athletes Individual and Team Sports Upper Extremity and Lower Extremity	
Preceptors	Responsibilities	Contact Information
Meghan Morgan, MS, ATC	All AT Services	(570) 262-2935 memorgan1@geisinger.edu

Geisinger Kistler Clinic 175 South Wilkes-Barre Blvd Wilkes Barre, PA 18702		
Facilities	Address	Phone Numbers
Geisinger Care Works	175 South Wilkes-Barre Blvd Wilkes Barre, PA 18702	(570) 829-2621
Types of Experiences Offered at Clinical Site	General Medical (Non-Orthopedic – Non-Sport Population)	

Preceptors	Responsibilities
Jessica Eick, PA-C	Urgent Care – All Medical Services

INACTIVE CLINICAL SITES WITH CURRENT AFFILIATED SITE AGREEMENTS

Pittston Area Senior High School 5 Stout Street Yatesville, PA 18640		
Facilities	Address	Phone Numbers
Pittston Area Senior High School	5 Stout Street Yatesville, PA 18640	
Types of Experiences Offered at Clinical Site	Protective Equipment Male and Female Athletes Individual and Team Sports Upper Extremity and Lower Extremity	
Preceptors	Responsibilities	Contact Information

PRECEPTORS WHO ARE CHANGING JOBS BUT ARE UP TO DATE WITH PRECEPTOR TRAINING

Preceptor	Email Address	Phone Number
Kimberly Howanitz, MS, ATC	khowanitz@wyomingseminary.org	Cell: (570) 706-5879
Eugene Suda, ATC	genosudaatc@gmail.com	Cell: (570) 235-9798

Affiliated Clinical Site Directions

Site Name	Dallas High School
Site Preceptor	Joe Giunta, MS, ATC (jngiunta@geisinger.edu or jgiunta@dallassd.com)
Site Phone Numbers	570-675-5201 (School) 570-262-1116 (Giunta cell)
Site Address	Conyngham Ave Dallas, PA 18612
Directions (from King's College)	<ol style="list-style-type: none"> 1. Take Main Street to North Street. 2. Turn left onto North Street; take it to River Street 3. Turn right onto River Street; take it to the on-ramp for Route 309 North (Cross-Valley Expressway). 4. Take Rt. 309 North; after 7 miles it will turn into Tunkhannock Highway (bear right at the Friendly's restaurant). 5. Take Tunkhannock Highway for 1 mile to Hildebrandt Road. 6. Turn right onto Hildebrandt Road; take it 0.4 miles to Conyngham Avenue. 7. Turn right onto Conyngham Avenue; take it 0.3 miles; the school will be on the right.

Site Name	Hanover Area Junior-Senior High School
Site Preceptor	Mike Nasser, ATC (mnasser@geisinger.edu)
Site Phone Numbers	570-831-2300 (School) 570-762-1271 (Nasser cell)
Site Address	<p>School: 1600 Sans Souci Parkway Hanover Township, PA 18706</p> <p>Football Stadium: 78 W. St. Mary's Rd. Hanover, PA 18706</p>
Directions (from King's College)	<p>School:</p> <ol style="list-style-type: none"> 1. Take Main Street to North Street. 2. Turn left onto North Street; take it to River Street. 3. Turn left onto River Street; take it 0.8 miles to Academy Street. 4. Turn right onto Academy Street; take it to Carey Avenue (the immediate next left). 5. Turn left onto Carey Avenue; after 1.4 miles it will become the Sans Souci Parkway. 6. Continue on the Sans Souci Parkway for 1.8 miles; the school will be on the left. 7. Use either the main entrance or the southeast entrance to get to the Athletic Training Facility. <p>Football Stadium:</p> <ol style="list-style-type: none"> 1. Take Main Street to North Street. 2. Turn left onto North Street; take it to River Street. 3. Turn left onto River Street; take it 0.8 miles to Academy Street. 4. Turn right onto Academy Street; take it to Carey Avenue (the immediate next left). 5. Turn left onto Carey Avenue; after 1.4 miles it will become the Sans Souci Parkway. 6. Continue on the Sans Souci Parkway until you get to West St. Mary's Road. 7. Turn left onto West St. Mary's Road; go up the hill and the football stadium will be on your left.

Site Name	Hazleton Area School District
Site Preceptor	Mike Bannon, ATC (michael.bannon@lvhn.org or bannonm@hasdk12.org) Larry Hayle, ATC (halyel@hasdk12.org)
Site Phone Numbers	267-614-2903 (Bannon cell) 570-578-5980 (Hayle cell)
Site Address	1601 West 23rd Street Hazle Township, PA 18202
Directions (from King's College)	<p>High School (1601 West 23rd Street, Hazle Township, PA 18202)</p> <ol style="list-style-type: none"> 1. Head southwest on N River St toward W Union St (1.1 mi) 2. Turn left onto Academy St (0.2 mi) 3. Continue onto Hazle St (1.0 mi) 4. Turn left onto Blackman St (0.6 mi) 5. Turn right onto Wilkes Barre Township Blvd (0.3 mi)

	<p>6. Use the right lane to merge onto I-81 S via the ramp to Nanticoke/Hazleton (20.0 mi)</p> <p>7. Take exit 145 to merge onto PA-93 S/Susquehanna Blvd toward W Hazleton</p> <p>8. Merge onto PA-93 S/Susquehanna Blvd (Pass by Arby's (on the right in 1.8 mi)) (2.3 mi)</p> <p>9. Turn left after Advance Auto Parts (on the right) (0.2 mi)</p> <p>10. Turn right at the 1st cross street onto W 22nd St (0.5 mi)</p> <p>11. Continue onto W 23rd St (0.1 mi)</p> <p>12. Turn left (High School will be on the right)</p> <p>Football Stadium (175 N. Wyoming St., Hazleton, PA 18201)</p> <p>1. Head southwest on N River St toward W Union St (1.1 mi)</p> <p>2. Turn left onto Academy St (0.2 mi)</p> <p>3. Continue onto Hazle St (1.0 mi)</p> <p>4. Turn left onto Blackman St (0.6 mi)</p> <p>5. Turn right onto Wilkes Barre Township Blvd (0.3 mi)</p> <p>6. Use the right lane to merge onto I-81 S via the ramp to Nanticoke/Hazleton</p> <p>7. Take exit 143 for PA-924 toward Hazleton</p> <p>8. Turn left onto PA-924 N (2.2 mi)</p> <p>9. Slight right toward W Broad St (453 ft)</p> <p>10. Turn right onto W Broad St (0.6 mi)</p> <p>11. Turn left onto N Church St (0.3 mi)</p> <p>12. Turn right onto W Holly St (0.3 mi)</p> <p>13. Turn left at N Pine St</p> <p>Varsity Baseball Field (5 East 22nd Street, Hazle Township, PA 18202)</p> <p>1. Head southwest on N River St toward W Union St (1.1 mi)</p> <p>2. Turn left onto Academy St (0.2 mi)</p> <p>3. Continue onto Hazle St (1.0 mi)</p> <p>4. Turn left onto Blackman St (0.6 mi)</p> <p>5. Turn right onto Wilkes Barre Township Blvd (0.3 mi)</p> <p>6. Use the right lane to merge onto I-81 S via the ramp to Nanticoke/Hazleton</p> <p>7. Take exit 155 toward Dorrance (0.2 mi)</p> <p>8. Turn left (0.1 mi)</p> <p>9. Continue onto State Rte 3007 (0.2 mi)</p> <p>10. Turn right onto S Main Rd (0.7 mi)</p> <p>11. Turn right onto PA-309 S (Pass by Burger King (on the left in 7.4 mi))</p> <p>12. Turn left onto E 23rd St (463 ft)</p> <p>13. Turn right at the 2nd cross street onto N Laurel St (404 ft)</p> <p>14. Turn left at the 1st cross street onto W 22nd St</p>
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Site Name	Misericordia University
Site Preceptors	Robin Jackson, ATC (rmarichak@hotmail.com or athtrain@misericordia.edu) Tony Mozeleski, MS, ATC (tonymozeleski@gmail.com or athtrain@misericordia.edu) Mitch Wasik MS, ATC (mitchwasik@gmail.com or athtrain@misericordia.edu)
Site Phone Numbers	570-674-6349 (AT facility) 570-574-4915 (Jackson cell) 570-466-0739 (Mozeleski cell) 650-678-4089 (Wasik cell)
Site Address	Room 114, Anderson Sports-Health Center 301 Lake St. Dallas, PA 18612
Directions (from King's College)	<ol style="list-style-type: none"> 1. Take Main Street to North Street. 2. Turn left onto North Street; take it to River Street 3. Turn right onto River Street; take it to the on-ramp for Route 309 North (Cross-Valley Expressway). 4. Take Rt. 309 North; after 4.5 miles it will turn into Memorial Highway. 5. Continue on Memorial Highway to Lake Street. 6. Bear right onto Lake Street. 7. Take Lake Street north, past the Main Entrance and past the softball field. 8. Take the first right past the softball field; the Anderson Sports-Health Center will be on your left.

Site Name	Northwest Area High School
Site Preceptor	Vicky Hall, ATC (vchall@geisinger.edu)
Site Phone Numbers	570-542-4126 (School) 570-234-6370 (Hall cell)
Site Address	243 Thorne Hill Rd Shickshinny, PA 18655
Directions (from King's College)	<ol style="list-style-type: none"> 1. Take Main Street to Market Street. 2. Turn right onto Market Street; take it over the bridge to Wyoming Avenue/US-11 South.

	<ol style="list-style-type: none"> 3. Turn left onto Wyoming Avenue/US-11 South and take it to PA-239 North/W. Union St. in Shickshinny (approx. 16 miles). 4. Turn right onto PA-239 North/W. Union St. and take it to State Route 4009 (approx. 3 miles). 5. Turn right onto State Route 4009 and take it to Thorne Hill Road (approx. 0.5 miles). 6. Turn right onto Throne Hill Road, which leads directly to the school.
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Site Name	Commonwealth Health Physician Network – Orthopedics - Kingston
Site Staff	William P. H. Charlton, MD James Mattucci, MD Frank O'Brien, MD Michael Raklewicz, MD
Site Phone Number	570-288-3535
Site Address	390 Pierce St. Kingston, PA 18704
Directions (from King's College)	<ol style="list-style-type: none"> 1. Take Main Street to North Street 2. Turn left onto North Street; take it over the Pierce Street Bridge. North Street will become Pierce Street. 3. Continue on Pierce Street to Gates Avenue (2nd light after crossing the bridge). 4. Turn right onto Gates Avenue and take the first left into the parking lot. 5. Orthopaedic Consultants is on the right.

Site Name	Pittston Area Senior High School
Site Preceptor	
Site Phone Numbers	570-654-2415 (school)
Site Address	5 Stout St. Yatesville, PA 18640
Directions (from King's College)	<ol style="list-style-type: none"> 1. Take Main Street north to Yatesville Road (approx. 6 miles) 2. Turn right onto Yatesville Road and travel approx. 0.4 miles 3. The school is on the right

Site Name	Redi-Care Taylor
Site Preceptors	Giles Lobb, PA-C
Site Phone Number	570-248-1101
Site Address	648 N. Main St. Taylor, PA 18517
Directions (from King's College)	<ol style="list-style-type: none"> 1. Take Main Street to North Street. 2. Turn left onto North Street; take it to River Street 3. Turn right onto River Street; take it to the on-ramp for Route 309 South (Cross-Valley Expressway). 4. Continue to I-81 North 5. Take I-81 North to Exit 180 (US-11 North/Birney Avenue). 6. Take US-11 North to N. Main Street in Taylor. 7. Redi-Care Taylor is on the right.

Site Name	Wilkes University
Site Preceptors	Carl Andrews, MS, ATC (carl.andrews@wilkes.edu) Tyler Brady, ATC (tylerbrady@kings.edu) Casey Martin, MS, ATC (csmart81@gmail.com) Camille Valvano, MS, ATC (camille.valvano@wilkes.edu)
Site Phone Numbers	570-408-4027 (Marts AT facility) 570-714-4760 (Ralston AT facility) 570-709-1774 (Andrews cell) 570-780-4233 (Brady cell) 570-592-7455 (Martin cell) 570-690-0460 (Valvano cell)
Site Addresses	Marts Center: 274 South Franklin St. Wilkes-Barre, PA 18766 Ralston Field: Located north of Kirby Park off of Northampton Street in Kingston, PA
Directions	Marts Center:

(from King's College)	<ol style="list-style-type: none"> 1. Take Main Street south to the University Center Parking Garage (across the street from the University Center, which is located at 169 S. Main Street). 2. After parking, walk north (toward the river) on South Street one block to Franklin Street 3. Turn left onto S. Franklin Street; the Marts Center is at the end of the block 4. The Athletic Training Facility is on the Basement Level <p>Ralston Field:</p> <ol style="list-style-type: none"> 1. Take Main Street to Market Street. 2. Turn right onto Market Street; take it over the bridge to S. Thomas Avenue. 3. Turn left onto S. Thomas Avenue; take it to Northampton Street. 4. Turn left onto Northampton Street; take it to the Ralston Field Parking Lot on your right. 5. The Athletic Training Facility is in the Munson Fieldhouse.
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Site Name	Wyoming Seminary
Site Preceptors	Lisa Mozeleski, MS, ATC (lmozeleski@wyomingseminary.org)
Site Phone Numbers	570-270-2210 (School AT Room) 570-262-2935 (Morgan cell) 570-706-5879 (Howanitz cell) 570-466-2347 (Mozeleski cell)
Site Address	201 N. Sprague Ave. Kingston, PA 18704
Directions (from King's College)	<ol style="list-style-type: none"> 1. Take Main Street to Market Street. 2. Turn right onto Market Street; take it 1.5 miles to N. Sprague Street. 3. Turn right onto N. Sprague Street; the school will be on the left.

REV 6/2020