CLINICAL EDUCATION EXPERIENCE MODEL;
CLINICAL EDUCATION TRAVEL POLICY
Clinical Education Experience Model

Clinical Education Assignments:

Prior to officially being admitted into the athletic ATHTR major, students enrolled in KINES 231 are assigned two seven-week rotations in two different athletic training facilities on campus where they are exposed to a variety of settings to ensure that they fully understand the obligations of the program and related commitments. Upon acceptance to the program, clinical education rotations in the ATHTR major are semester-long assignments. Athletic training students will complete five 15-week rotations in their clinical education instruction. Each student will be assigned to a variety of settings that will expose him/her to a multitude of experiences. Each student will be required to complete clinical education assignments that will fulfill recommendation of the Penn State ATHTR major and requirements to sit for the BOC exam. Students will be assigned rotations that meet each of the following characteristics:

- Equipment intensive
- Upper extremity intensive
- Lower extremity intensive
- Male and female populations
- High school or small college (off-campus)
- General medical

Off Campus Rotations:

All students will be assigned to an off-campus rotation with a high school or college in the central Pennsylvania area for one semester during their progression through the ATHTR major. Affiliation agreements for the high schools are established with University Orthopedics Center.

Courses:

The following sequential three-credit clinical experience and practicum courses provide clinical education exposure within the ATHTR major:

- KINES 231 – first clinical experience registered during the application process
- KINES 232 – second clinical experience registered upon admission to program
- KINES 395F – first practicum registered following second clinical experience
- KINES 395G – ensuring second practicum
- KINES 395I – ensuing third practicum
- KINES 495F – ensuing fourth and final field experience practicum
Clinical Education Expectations Per Experience and Practicum Level:

**KINES 231**: This is a clinical observation rotation that is intended to increase the student’s awareness of the role of the athletic trainer as an allied health professional. The student will also become familiar with the daily operating procedures of an athletic training facility while being exposed to the culture of the profession. Each student will be expected to complete a minimum of 45 hours in a 15-week semester with an estimated four hours per week at two on-campus clinical rotation sites. The student is also expected to participate in four Penn State Intercollegiate Athletics sponsored home events during this semester.

**KINES 232**: This is the first chance for the athletic training student to become an active learner by participating in learning and practicing basic psychomotor athletic training skills under the direct supervision of a clinical preceptor. As part of their assignments, students may be asked to travel. This is a privilege and should be regarded as such. When traveling, the student MUST be directly supervised by a clinical preceptor and adhere to the corresponding ATHTR major travel policy.

**395F/395G**: This is a participatory portion of the student’s clinical education. A student will be expected to practice assessment and treatment techniques under the supervision of a clinical preceptor. As part of their assignments, students may be asked to travel. This is a privilege and should be regarded as such. When traveling, the student MUST be directly supervised by a clinical preceptor and adhere to the corresponding ATHTR major travel policy.

**395I/495F**: Students at the level will continue to practice and develop advanced assessment and treatment techniques under the supervision of a clinical preceptor as well as begin acquiring appropriate administrative duties. Administrative duties that would be expected of an athletic training student in these practica include: fostering communication among related personnel, documentation beyond the introductory level and performing related allied health care processes (i.e. record keeping, facility maintenance, event organization and preparation, delegating tasks to lower-level athletic training students) at the discretion of the supervising clinical preceptor. As part of their assignments, students may be asked to travel. This is a privilege and should be regarded as such. When traveling, the student MUST be directly supervised by a clinical preceptor and adhere to the corresponding ATHTR major travel policy.

**Direct Supervision:**

Each student must be directly supervised by his/her clinical preceptor while in the clinical setting. Direct supervision is defined as constant visual and auditory interaction between the student and clinical preceptor. The preceptor shall be physically present for proficiency instruction and evaluation and to intervene on behalf of the patient. At no clinical site will there be more than 8 students assigned to preceptor to ensure an effective ration and clinical education experience. As stated in the ATHTR major travel policy, travel must be directly supervised.
Clinical Education Contact Hours:

- Each clinical education rotation is approximately 15 weeks in length
- Clinical education contact experiences should be limited to a minimum of 12 and a maximum of 28 hours per week
- ATSs must be given a minimum of one (1) day off in every seven (7) day period
- All clinical education contact hours will be logged by the ATS via ATrack
  - Only time spent carrying out supervised athletic training responsibilities should be recorded
  - Time spent in travel should not be included in the daily log
  - Time spent in the athletic training facility voluntarily should be independently recorded by the ATS and NOT included in ATrack
  - ATSs will have a five day window to submit each day’s hours via ATrack; after the five day window closes, ATSs will no longer be able to submit hours for that day
  - ATSs are encouraged to log hours daily to avoid any discrepancies or inaccuracies in ATrack
- Clinical education contact hours will be periodically monitored by the CEC throughout the semester

The weekly clinical education contact hour maximums vary per clinical education experience or practicum level and have been based on standards mandated by CAATE [to limited combined (didactic, laboratory, clinical) contact hours to a total of 40 hours per a seven-day week] and the most recent recommended ATHTR major 8-semester plan. These are presented below:

- **KINES 232** – Based on a 15-credit course load, students may complete a maximum of 25 clinical education contact hours per week.
  - Minimum of 180 and maximum of 375 clinical education contact hours per semester
- **KINES 395F** – Based on a 15-credit course load, students may complete a maximum of 25 clinical education contact hours per week.
  - Minimum of 180 and maximum of 375 clinical education contact hours per semester
- **KINES 396G** – Based on a 16-credit course load, students may complete a maximum of 24 clinical education contact hours per week.
  - Minimum of 180 and maximum of 360 clinical education contact hours per semester
- **KINES 395I** – Based on a 16-credit course load (including a one-hour recitation), students may complete a maximum of 23 clinical education contact hours per week.
  - Minimum of 180 and maximum of 345 clinical education contact hours per semester
- **KINES 495F** – Based on a 12-credit course load, students may complete a maximum of 28 clinical education contact hours per week.
  - Minimum of 180 and maximum of 420 clinical education contact hours per semester
**Instruction and Evaluation of Clinical Proficiencies And Psychomotor Competencies:**

Clinical proficiencies and psychomotor competencies are instructed and evaluated in the classroom, lab settings and at clinical education sites. Clinical preceptors evaluate athletic training students on these specific applied skills. Record of evaluation for successful execution and completion of clinical proficiencies and psychomotor competencies is kept each semester in a student manual. These manuals are reviewed periodically by the Program Director and Clinical Education Coordinator to ensure satisfactory progression through an associated clinical experience or practicum course. At the end of each semester, athletic training students submit their respective manuals to the Program Director, which are then archived in each student’s file.

**Evaluation:**

The final grade of each of the clinical experience and practicum course is based on a midterm and final evaluation performed by the student’s supervising clinical preceptor as well as written and practical evaluations, and additional assignments at the discretion of each clinical experience and practicum course instructor.

**Attendance:**

Athletic training students are expected to be punctual for all ATHTR major classes, related meetings and clinical education assignments. Tardiness and unexcused absenteeism is unprofessional and unacceptable. Known situations requiring absences or tardiness for a class or clinical assignment should be discussed with the respective instructor and clinical preceptor in advance as well as with the Program Director and Clinical Education Coordinator when appropriate. Repeated episodes of unexcused tardiness or absenteeism are grounds for removal from a clinical education assignment or dismissal from the ATHTR major.
Clinical Education Travel Policy

As part of the Penn State ATHTR major, athletic training students may have a voluntary opportunity that allows for travel only when supervised by an athletic trainer/clinical preceptor. Athletic training students are expected to carry out the duties as outlined in this guideline when traveling in a supervised clinical education experience.

Criteria for Supervised Travel
Travel related field experiences are ONLY available to athletic training students who meet the following criteria:

- Must have completed their first semester in the ATHTR major
- Must have successfully completed, or be currently enrolled in, the following courses:
  - KINES 232: Clinical Athletic Training II
  - KINES 233: Emergency Care in Athletic Training
  - KINES 334: Lower Body Evaluation
  - KINES 335: Upper Body Evaluation
- Must hold current credentialing in emergency cardiac care (CPR/AED)
- Must have successfully completed the clinical proficiencies commensurate to their practicum level
- Athletic training students must be accompanied by an athletic trainer/clinical preceptor during travel

Specific Duties for Supervised Travel

Preparation for departure:
- Dress professionally and appropriately as representatives of Penn State’s Departments of Kinesiology and Intercollegiate Athletics or University Orthopaedics Center Athletic Training Services.
- Review the list of equipment and supplies needed for the athletic training kit with the supervising clinical preceptor(s).
- Assist clinical preceptor(s) with packing the host school medical information or visiting team letter where it is easily available.
- If no visiting team letter was received, assist the clinical preceptor(s) by calling ahead before departure to obtain the necessary contact and site information.

Hotel/Pre-competition:
- Abide by all team rules.
- Attend all team functions.
- Obtain a rooming list after hotel check-in.
- Keep clinical preceptor’s cell phone numbers with you at all times.
- Be sure the phone in room phone is available (i.e. turned on) during entire stay.
- Be aware of personal safety, keep doors locked and bolted, unless room is in use for pre-competition preparation.
- When stepping out of the hotel, leave a written message stating return time – do not be late, be available.
- Utilize appropriate therapies (i.e. hydrocollator, whirlpool, ultrasound, E-stim, massage), if available, to allow for preventative treatment & warm up of specific tissues when supervised by clinical preceptor(s).
- Apply therapeutic stretching techniques or other preparatory care agreed upon and supervised by their clinical preceptor as part of pre-competition preparation.
Competition:

- Make an introduction to the host medical staff.
- Review the local emergency medical procedures with the host medical staff.
- Secure and have accessibility to the appropriate phone numbers (host ATC, emergency services, etc.).
- **Athletic training students are not to make any return-to-play decisions;** those decisions are the responsibility of the supervising clinical preceptor.
- Should an emergency situation arise, use the local emergency action plan to manage the respective situation.
- Assist supervising clinical preceptor in communicating with respective coaching staff regarding the emergency steps taken.
- **Athletic training students are not to drive a vehicle to transport an injured or ill patient or at any other time during travel.**
- In the event that the patient requires transportation to a medical facility a member of the coaching staff or team representative is responsible for staying with the patient until they have been discharged.

Care of Injured or Ill Patients:

- Use the first aid and therapeutic techniques outlined above to provide care during travel experience.
- Provide emergency and first aid care to any newly injured patient.
- Consult with supervising clinical preceptor and utilize the host medical system if any additional care is necessary for the patient’s safe return to campus.
- The supervising clinical preceptor will direct athletic training students toward resolution of specific issues that may arise.