Clinical Education

The clinical education component of the athletic training major refers to the time spent in the actual practice setting either on campus with the Marquette faculty and staff, or out in the community with an off-campus affiliated site. These experiences apply classroom learning to “real world” situations. In essence, this is the culmination of everything learned in the athletic training major. The Clinical Coordinator and Practicum Coordinator at Marquette University are responsible for developing and maintaining clinical sites and facilitating the selection of clinical placements.

Clinical Education Policy

The clinical rotations of athletic training students at Marquette must encompass and accomplish a variety of goals. Students must have opportunities to gain clinical experiences associated with a variety of different populations including genders, varying levels of risk, protective equipment, experience in both acute and traumatic injuries, exposure to upper extremity, lower extremity and trunk issues, and medical experiences that address the continuum of care. Clinical placements into the different setting and assignments to different clinical instructors in those settings is determined by the Clinical Coordinator for athletic training, who considers all of the above criteria when planning students’ clinical placements, in addition to each student’s personal situation, interpersonal skills, history of clinical performance, timeliness, athletic training student rotation wishes and preferences, and each students professional goals. The ultimate goal of clinical rotations at Marquette is to prepare a student to function in a variety of settings and meet the domains of practice delineated for a certified athletic trainer in the profession.

The ATS’s clinical instructors and clinical proficiency course instructors must have the opportunity to regularly and frequently evaluate student progress and learning. Feedback is obtained and reviewed to ensure the effectiveness of the experience. The requirements defined in the clinical proficiency course syllabi provide a framework to guide student clinical experiences and allow the Athletic Training Educational Program (ATEP) faculty ACI’s to carefully monitor the clinical experience.

The duration and expectations of these clinical experiences is consistent with the expectations for all clinically related disciplines on Marquette’s campus and across the nation. Students are expected to complete on average 10 hours per week in the clinical setting as a requirement of the proficiency courses. These hours are to be agreed upon by the ATS and the CI, and can vary from week to week depending on schedules, competitions, competitive seasons, and academic requirements. A minimum of 160 hours is required for each semester. ATS’s are not allowed to participate in the clinical setting beyond 320 hours per semester (20 hours per week) during the proficiency course timeframe. This limit does not include hours performed voluntarily outside of the academic calendar. What follows is a brief description of the clinical education component in the athletic training major at Marquette:

Freshman Year

It is vitally important to put classroom learning into a clinical perspective as soon as is possible. Thus, clinical experiences start as a freshman when students observe in the athletic training rooms and at events on campus. We want students to go into their athletic training classes with a firm idea of how their classroom knowledge will apply to the clinical setting. Freshmen observe Marquette’s faculty and staff athletic trainers, other athletic training students, and other medical professionals who are involved in the care of the athletes on a daily basis. They can assist those individuals with certain aspects of treatments (such as holding a theraband, obtaining a weight for a given exercise), re-stocking the athletic training rooms, cleaning after treatments, and other tasks as directed by the supervising athletic trainer. As the year progresses and they complete their freshman coursework, they can apply their knowledge (taping, emergency evaluation) under the direct supervision of a staff member.

Requirements: 30 documented hours during the course of freshman year. A log book is maintained in the Weingart athletic training room where freshman students must log hours and have a staff AT sign verifying
their participation.

**Sophomore Year**

Sophomores start the year with a knowledge of emergency care procedures, CPR, taping, and other skills learned in the freshman classes. They begin to take responsibility for coverage of practices, games, athletic training room treatments, and general operations of the athletic training room under the direct supervision of Marquette’s faculty and staff, with the upper classmen as role models and resources. Sophomore’s complete three rotations over the course of this year in three different athletic training environments. Each rotation is performed under the direct supervision of a Marquette staff or faculty athletic trainer. They are expected to report to campus when the particular CI that they are assigned to begins covering formal practices – usually two weeks before classes begin – in mid August. The clinical coordinator assists those students in need of housing to find accommodations. As the year progresses, the sophomore athletic training classes teach evaluation of specific musculoskeletal injuries throughout the body, and the athletic training student is expected to apply that knowledge under direct supervision in the evaluation of athlete’s in the clinical setting.

**Requirements:** Minimum of 10 hours per week in the clinical environment (minimum 160 for the semester). Return to campus mid August - earlier than the general student body - to begin their clinical rotations. One day following athletic training medical director in student health clinic. One afternoon each semester assigned to follow team physician in the athletic training room.

**Junior Year**

This is the take charge year. Junior students, under the direct supervision of Marquette’s faculty and staff athletic trainers, run the athletic training room in day to day operations. They have had their injury evaluation classes and during the course of this year will expand their knowledge of treatment options, management skills, general health and nutrition issues, and exercise prescription. They assist in scheduling student coverage for events and practices, providing evaluation and treatment to athletes, and are responsible for ensuring that the sport responsibilities of their present CI are well cared for. They are involved in the day to day decision making about the athletic training needs of the athletes. In the spring, they step out of the comfort of the on-campus environment into the community when they spend their last 8 week clinical rotation at a local off-campus site under the direct supervision of a community athletic trainer.

**Requirements:** Minimum of 10 hours per week in the clinical environment. Return to campus mid August - earlier than the general student body - to begin their clinical rotations. One day following athletic training medical director in student health clinic. One afternoon following team physician in the athletic training room. 8 week off campus rotation at the end of spring semester.

**Senior Year**

By senior year, the student is expected to be capable of functioning in the clinical environment with little intervention from the clinical instructor. Seniors are assigned to a specific sport for the year. Under the direct supervision of Marquette’s faculty and staff athletic trainers, they oversee the coordination of coverage of their sport, are involved as their time permits, in the directly supervised provision of coverage for that sports’ events, and act in a consulting role for freshman, sophomore, and junior students with questions in the clinical environment. They spend their fall semester clinical time under the direct supervision of a community athletic trainer covering an area high school or collegiate football team to gain proficiency in meeting the needs of that particular high risk sport. Their final semester is spent performing a semester long internship at a clinical site pertinent to their area of interest. They assist Marquette’s clinical coordinator in the selection and formalization of the clinical site for this last internship. During that time, they work full time side-by-side with the clinical instructor to become fully proficient as an independent athletic trainer.

**Requirements:** 10 hours per week in the clinical setting covering football in the fall semester and in Marquette’s athletic training environment after football is over. Full-time internship second semester in an athletic training setting related to their professional goals.
**Hour Requirements:**

By its nature, athletic training competency is largely based on experience. There is no definite method to predict how many repetitions it will take a student to gain comfort and competency in a particular skill needed in the practice of athletic training. The hour requirements listed above for each level of the program are based on the minimum amount of time that Marquette faculty feel is needed to sufficiently expose the student to the various injury management techniques, taping, injury evaluation, and treatment techniques needed by a competent athletic trainer. There is no way to “schedule” acute injuries to occur on the field. Role playing is an effective method for learning the mechanics of acute injury management, but competent performance of these techniques in a real time emergency situation takes practice. This obviously necessitates a student being present when the injuries occur. The hour minimums are in place as a means of documenting that an athletic training student has had sufficient exposure to the variety of occurrences in the athletic training setting. These certainly are not maximums; a student who is not comfortable with their skills or who has been evaluated poorly in their clinical rotations can and should schedule themselves for additional practice in the clinical environment. The athletic training major will not, however, require that more than 10 hours per week be completed in the clinical setting. A minimum of 160 hours is required for each semester. ATS’s are not allowed to go beyond 320 hours per semester (20 hours per week) during the proficiency course timeframe. This limit does not include hours performed voluntarily outside of the academic calendar.

**Clinical Supervision Policy**

All clinical hours must be “directly” supervised by a clinical instructor. The term “direct supervision” means that a clinical instructor is physically present to intervene on behalf of the athlete being treated by the student should the student make an error. Students attend the clinical environment to practice their skills learned in the classroom and laboratory setting, and to become proficient at performing them. They are not expected to be proficient at these skills when they walk in the door. The function of a clinical instructor is to provide feedback to the student on their performance, to teach alternate or more efficient methods of accomplishing tasks, and to ensure that the athlete is not adversely affected by the practicing athletic training student. This cannot occur when the clinical instructor is not present. Thus, to count for credit towards fulfilling the clinical education hour requirements in the proficiency classes, clinical hours must be directly supervised hours.

For the protection of all involved, athletic training students must be supervised in the clinical setting at all times. Unsupervised activity in an athletic training setting is not allowed. Athletic trainers in the state of Wisconsin must be licensed by the state medical examining board to practice. Any student found to be practicing athletic training without proper licensure in the state of Wisconsin or certification through the NATA/CO will be appropriately reported to those agencies and will be subject to disciplinary action as described in the conduct standards section of this handbook.

**Supervised Athletic Training Student**

When directly supervised by a Clinical Instructor (CI), an Athletic Training Student (ATS) can perform any skills in which he / she has been appropriately trained. If an ATS has had a class or practicum in which they learned a clinical competency / proficiency, has successfully completed the skill in their proficiency course, and feels comfortable with that proficiency, they are allowed to perform that task when supervised directly.

A typical progression of student skills is listed below:

- **Freshman:** First Aid Skills, Ice application
- **Sophomore:** 1st semester sophomore: Lower Extremity Assessment and superficial heat or ice
application no advanced modalities.

2nd semester sophomore: Upper Extremity Assessment and Modality application as these skills have been acquired in class or lab.

Junior:  
1st semester Junior: All assessments, modality application and post rehabilitation therapeutic exercise also strength and conditioning programs.
2nd semester Junior: All athletic training skills with emphasis on assessment of general medical disorders for referral to a physician.

Senior: All skills.

Evaluation of Clinical Performance
Clinical education is an integral part of the clinical proficiency classes each semester – ATTR 2981, 2982, 3983, 3984, and 3985. Successful accomplishment of your clinical assignment is necessary to earn a passing grade in those classes. Your participation and skill accomplishment is tracked in those classes by use of the “Individual Clinical Education Plan” form. This is filled out at the beginning of each semester by the student and the instructor of their proficiency class so that the student, the course instructor, and the CI all are well aware of the goals and tasks to be accomplished in the clinical setting. This form will be distributed at the beginning of each semester in your proficiency course packets.

A student’s performance on his/her clinical affiliation is judged on the basis of technical skills, clinical reasoning and professional behavior. These are assessed through the use of a Clinical Performance Evaluation Tool, which the clinical instructor completes for each student at the conclusion of the clinical rotation. Students learn early in the curriculum the importance of professional behaviors in clinical practice and how these essential skills augment clinical skills. Our experience with student performance in the clinical setting suggests that failures in the clinical practicum are predominantly due to inappropriate professional behaviors, rather than a lack of knowledge or technical skill. These behaviors are also assessed utilizing the same Clinical Performance Evaluation Tool. The Conduct Standards section of the Athletic Training Student Handbook lists the procedures for addressing deficits in professional behaviors. Some students may require additional clinical time to sufficiently meet the knowledge, skill and professional behavior expectations for each clinical experience. Such additional time may delay or alter a students’ graduation date or prerequisite course time lines.

Marquette University has specific requirements that each student must fulfill prior to each clinical experience. Proof of meeting the following requirements must be on file in the program office at least two weeks prior to the start of each clinical affiliation. Failure to meet these requirements may delay the start of your clinical experiences:

1) Proof of health insurance
2) Current First-aid and CPR certification (first-person hands-on rescuer)
3) Verification of current vaccinations on file with Exercise Science / Athletic Training office:
   a) MMR – Two doses, or positive titer’s for all three (Measles, Mumps, and Rubella).
   b) Tetanus – valid through entire length of clinical internship
   c) Hepatitis B series or waiver
4) Completion of OSHA training (yearly)
5) TB test within one year of end date of clinical (some sites may require within 30-90 days of start of clinical)
Students are also required to show proof of fulfillment of these requirements to their clinical sites, and maintain a current record of these documents in case an issue arises during the clinical. Some clinical sites may have requirements above and beyond those of the University. This information will be kept in the student files in the Exercise Science / Athletic Training office, with the exception of student health forms related to technical standards, which are kept locked in the Program Directors office. Students are responsible for determining and satisfying additional requirements that a specific clinical site may have once it is established that a student is going to attend a given site. Additional requirements may include, but are not limited to, drug testing, criminal background checks, chest x-rays, additional physical examinations, etc. The results of those checks and/or tests may affect the student’s eligibility for specific clinical placements.

Students are responsible for all personal costs such as travel, housing, meals, etc. required to complete the clinical experience.

**On-Campus Clinical Instruction Personnel**

**Clinical Coordinator of Athletic Training Education:** Dave Leigh MS, LAT, ATC

<table>
<thead>
<tr>
<th>Approved Clinical Instructor</th>
<th>Sport/Activity Involvement at MU</th>
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<tbody>
<tr>
<td>Ernest Eugene</td>
<td>Men’s Basketball</td>
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<tr>
<td>Jeremy Johnson</td>
<td>Head Athletic Trainer, Women’s Basketball, Golf, M Tennis</td>
</tr>
<tr>
<td>Aaron Doering</td>
<td>W Soccer, M/W Track and Cross Country</td>
</tr>
<tr>
<td>Elizabeth Rozulmalski</td>
<td>W Volleyball, M/W Track</td>
</tr>
<tr>
<td>Lauren Boyler</td>
<td>M Soccer, W Tennis, Golf</td>
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Additionally, the athletic training faculty assist with student supervision in the athletic training room setting and occasional event coverage.