University of South Carolina

Post-Professional Athletic Training Program

Certificates of Graduate Study

Critical Incident Management and Primary Care in Athletic Training
Behavioral Health in Athletic Training

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Athletic Training
Arnold School of Public Health
UNIVERSITY OF SOUTH CAROLINA

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INTRODUCTION TO POST-PROFESSIONAL ATHLETIC TRAINING PROGRAM

The Post-Professional Athletic Training Program at the University of South Carolina is committed to distinguishing itself as a state and national leader in its efforts to address the needs of its patients, community, and the athletic training profession.

A. The Athletic Training Profession - What is an Athletic Trainer?

Athletic trainers (ATs) are highly qualified, multi-skilled healthcare professionals who render service or treatment under the direction of or in collaboration with a physician in accordance with their education, training, and the state's statutes, rules, and regulations. As part of the healthcare team, athletic trainers provide services including primary care, injury and illness prevention, wellness promotion and education, emergent care, examination and clinical diagnosis, therapeutic intervention, and rehabilitation of injuries and medical conditions.

- National Athletic Trainers' Association. (2012). [www.nata.org]

B. Post-Professional Athletic Training Preparation

All USC Graduate Assistants are required to be certified through the Board of Certification to be enrolled in the Post-Professional AT Program. USC's athletic training program requires all graduate students to have completed a professional bachelor's or master's degree, which covers the clinical competencies for didactic and clinical knowledge from the following subject matter areas: evidence-based practice, clinical examination and diagnosis, therapeutic intervention, healthcare administration, prevention and health promotion, acute care of injury and illness, psychosocial strategies and referral, and professional development and responsibility.

Post-professional graduate degree programs are designed to prepare athletic trainers for advanced clinical practice, and research and scholarship, to enhance the quality of patient care, optimize patient outcomes and improve patients' health-related quality of life. The athletic trainer's post-professional preparation is based on developing students' knowledge, skills, and abilities, beyond the professional level, as determined by the Commission on Accreditation for Athletic Training Education. Post-professional athletic training degree programs incorporate core competencies required for advanced clinical practice.

The Post-Professional Core Competencies include:

- Evidence-Based Practice
- Interprofessional Education and Collaborative Practice
- Quality Improvement
- Healthcare Informatics
- Professionalism
- Patient-Centered Care

C. BOC Certification

Please visit the Board of Certification website at **www.bocatc.org** for more detailed information.

I. USC ATHLETIC TRAINING PROGRAM FACULTY DIRECTORY

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III. UNIVERSITY MISSION

A. University Of South Carolina's Mission (Approved by Board of Trustees – October 13, 2023)

Mission Statement

The mission of the University of South Carolina is to educate students through outstanding teaching and to provide research, scholarship, and service that drives community and economic impact for the benefit of the state, nation, and world.

Description of the University

As the flagship institution of the USC system, our university is dedicated to pioneering innovative educational approaches that are attuned to the evolving needs of the workforce, ensuring that our graduates are not only well-prepared but also empowered to shape the future as engaged, global citizens. Through personalized learning journeys and an array of experiential opportunities, we equip our students with the knowledge and skills needed to thrive in an ever-changing world. The University propels transformative research and discovery, elevates knowledge and culture, and pursues truth for an enhanced quality of life.

The University of South Carolina boasts its renowned campus where academic and professional ambitions come to life and where more than 200 years of collective history meet breakthrough academics and research that change the world in real time. The University of South Carolina is the major research institution of the university system and its largest campus serving a diverse population of undergraduate and graduate students with widely varying backgrounds and career goals. The university offers degrees at the bachelor's, master's, doctoral, and professional program levels, including some with global dimensions, affording students a comprehensive array of educational programs. The university provides additional opportunities for associate degrees through the regional Palmetto College campuses (Lancaster, Salkehatchie, Sumter, and Union). Personal and career development are also provided through outreach and continuing education.

To fulfill its mission, the University employs world-class faculty and staff members from diverse academic backgrounds. Through classroom and laboratory instruction delivered in a variety of face-to-face and distance learning modalities, degree programs are offered in the following areas: arts and sciences; business; education; engineering and computing; hospitality, retail, and sport management; information and communications; law; medicine; music; nursing; pharmacy; public health; and social work. Beyond the classroom, students engage in a variety of high-impact experiences that develop their knowledge, skills, and abilities to stimulate personal growth and a lifetime connection to the Carolinian community. The University is recognized by the Carnegie Foundation as a top research and community engaged institution and confers over 30% of all bachelor's and graduate degrees awarded at public institutions in South Carolina.

B. Arnold School of Public Health Guiding Statements

The Arnold School of Public Health is the primary public health research and education resource in South Carolina with a 50-year history of impact. Our work is guided by the following vision, mission, and goals.

Vision

Improved population health…statewide and worldwide.

Mission

The Arnold School of Public Health will improve population health and well-being by fostering innovative education, research and practice that promotes health and healthy environments. The Arnold School will use that knowledge and experience to promote prevention and effective response to disease, disability, and environmental degradation in all communities.

Goals

Goal 1: Provide undergraduate and graduate educational programs of excellence
Goal 2: Promote high quality, impactful and ethical research
Goal 3: Recruit and retain highly qualified faculty and staff to meet our mission
Goal 4: Support community engagement activities that promote and improve the public's health
Goal 5: Meet the fiscal and physical resource needs of the school

C. Athletic Training Programs' Vision

The University of South Carolina's Athletic Training Programs are among the largest and most impactful in the nation. From professional and post-professional graduate education to continuing education opportunities, our programs serve and inspire hundreds of athletic training students and certified professionals each year. Through a commitment to excellence in education, community outreach, research, national engagement, and international initiatives, we empower athletic trainers to serve diverse populations both locally and globally.

Our vision is to be a nationally recognized leader in athletic training education and service—distinguished by our innovative academic and clinical training, our dedication to inclusive and lifelong learning, and our commitment to advancing the health and well-being of our communities. We strive to cultivate clinicians and scholars who are equipped with the knowledge, skills, and compassion necessary to lead, serve, and shape the future of the athletic training profession.

Certificate of Graduate Studies in Athletic Training

Mission

- The Post-Professional Athletic Training Certificates of Graduate Study at the University of South Carolina is dedicated to preparing athletic trainers for advanced clinical practice in order to advance the quality of patient care, optimize patient outcomes, and improve patient's health-related quality of life. There are two certificates of graduate study options: Behavioral Health in Athletic Training and the Critical Incident Management and Primary Care in Athletic Training

- The Post-Professional Athletic Training Program is committed to distinguishing itself as a state and national leader in its efforts to address the needs of its students, the athletic training profession, and the community. The pursuit of excellence in both the academic and clinical education setting is our program's approach to providing certified athletic trainers with the knowledge and skills required to enhance athletic training and make meaningful contributions to the profession of athletic training.

IV. USC CERTIFICATE OF GRADUATE STUDIES IN ATHLETIC TRAINING PROGRAM DESCRIPTIONS

The one-year program is designed to offer advanced studies and clinical experiences in athletic training to BOC-certified athletic trainers while also providing health care to patients and student-athletes in the state of South Carolina. Graduate assistantships with stipends, out-of-state tuition waivers, and tuition credits are available for qualified students. However, non-graduate assistant routes are available for this online post-professional program.

The USC AT Program provides students with theoretical knowledge and understanding of the allied health profession of athletic training as well as current procedures and techniques in behavioral health, primary care, and critical incident management. Students gain this knowledge through required coursework and clinical experiences as they prepare to make successful contributions to the athletic training profession.

The program emphasizes evidence-based practices, practical decision-making, and the development of comprehensive care plans. Individuals who complete the certificate will enhance their leadership skills and be poised to secure advanced practice positions.

All USC graduate assistants are required to be a Board of Certification certified athletic trainer. The post-professional athletic training program requires all graduate students to have completed an entry-level route to certification (either a bachelor's or master's degree in athletic training)

CERTIFICATE OF GRADUATE STUDY – BEHAVIORAL HEALTH IN ATHLETIC TRAINING

The Certificate of Graduate Study in Behavioral Health in Athletic Training at the University of South Carolina is designed to equip athletic trainers with advanced skills in recognizing, supporting, and referring patients with behavioral and mental health conditions. This program promotes a holistic approach to patient care, integrating physical, social, emotional, and mental wellness.

- **Holistic Patient Care:** You'll be trained in addressing both physical and mental wellness. With the rise in mental health concerns such as anxiety, depression, and eating disorders among athletes, this expertise empowers you to recognize early warning signs, provide crucial support, and make informed referrals.
- **Advanced Clinical Skills:** You'll gain advanced clinical skills to manage behavioral health conditions, improving patient outcomes and fostering a healthier environment for physically active populations. The program culminates in a multi-day hands-on, in-person institute featuring live training events, seminars, and simulation-based learning.
- **Career Advancement:** You'll position yourself at the forefront of athletic training by gaining a competitive edge in diverse athletic and clinical environments. Certificate holders are well-positioned to lead mental health initiatives and collaborate with healthcare professionals to optimize patient outcomes and care coordination.
- **Leadership in Behavioral Health**: You'll develop advanced leadership skills and gain expertise in evaluating and referring to mental health conditions across diverse patient populations.
- **Crisis Management**: You'll learn how to identify crisis situations and design mental health policies and procedures for recognition and referral pathways.
- **Evidence-Based Practice**: Our program emphasizes evidence-based practices, ethical decision-making, and the creation of prevention and support programs to enhance behavioral health care in athletic training settings.

CERTIFICATE OF GRADUATE STUDY – CRITICAL INCIDENT MANAGEMENT & PRIMARY CARE IN ATHLETIC TRAINING

The Certificate of Graduate Study in Critical Incident Management and Primary Care (CIMPC) in Athletic Training at the University of South Carolina is designed to empower athletic trainers with cutting-edge skills and knowledge in emergency and primary care to ensure optimal patient outcomes. Students can specialize in areas such as primary care screening, urgent care, exertional and traumatic injuries, and pharmacological interventions.

- **Comprehensive Learning Experience:** You'll take online classes in synchronous and asynchronous formats through peer collaboration led by leading scholars and clinicians in athletic training. The program culminates in a multi-day hands-on, in-person institute featuring live training events, seminars, and simulation-based learning.
- **Advanced Clinical Skills:** You'll be prepared to manage emergencies, traumatic injuries, and primary care conditions in physically active populations. You'll enhance your leadership skills in high-pressure situations to improve patient outcomes and elevate your professional practice.
- **Career Advancement:** Position yourself at the forefront of athletic training and gain a competitive edge in diverse athletic and clinical environments. Certificate holders are well-positioned to serve as their institution's EAP coordinator, pre-event medical meeting leader, and chair of policy development committees.
- **Leadership Practices:** You'll develop advanced leadership skills and integrate diverse, equitable, and inclusive strategies into athletic training.
- **Trauma and Medical Management:** You'll learn to assess and manage traumatic injuries and medical conditions, apply pharmacological interventions, and collaborate with interprofessional teams.
- **Evidence-Based Practice:** Our program emphasizes evidence-based practice, policy development, and ethical decision-making to enhance care for diverse populations.

V. GRADUATE STUDENT ACADEMIC INFORMATION

A. Certificate of Graduate Study

The Certificate of Graduate Study is a program of a minimum of 12 semester hours of graduate coursework.

Certificate Degree Requirement

At least half of the program coursework must consist of required courses, although all hours may be prescribed; at least half the total hours in the program of study must be in courses at the 700 level or above; and at least half of the hours required for a certificate must be University of South Carolina credits. There is no residency requirement, but all courses must be completed within six years of enrollment.

Certificate Program of Study

A program of study is a list of courses that satisfy the requirements for the certificate. Every degree-seeking student, including students enrolled in a certificate program, must complete a program of study (POS) form approved and signed by student's academic advisor, and approved by the graduate director of the program that administers the certificate and the dean of the Graduate School. The signed POS is sent to the Graduate School and placed in the student's file. This formal agreement serves a number of purposes that benefit both the student and the University. It causes the student and advisor to engage in early planning with a specific goal in mind; it provides information on program requirements and for the planning of course offerings; it facilitates subsequent advisement; and it protects the student in the event of unexpected curriculum or faculty changes. The student must file a completed POS form prior to graduation. If necessary, an approved program of study can be modified with a Program of Study Adjustment Form.

Transfer Credit

Coursework not part of a completed certificate program or graduate degree from USC or another institution may be transferred for credit toward a Certificate of Graduate Study or Specialist Degree. No more than 6 hours of credit may be transferred into graduate programs of 12 to 17 hours; no more than 9 hours of credit may be transferred into graduate programs of 18 or more hours. Only credits with grades of B or better (equivalent to 3.0 on a 4.0 grading scale) may be transferred from another institution into a Certificate or Specialist program

Coursework transferred for credit toward a Certificate of Graduate Study or Specialist Program must be from an accredited institution and must be no more than six years old at the time of graduation.

Coursework transferred from another institution for credit toward a graduate certificate or specialist program must be relevant to the program and have course content and a level of instruction equivalent to that offered by the University's own graduate programs. Approval for acceptance of transfer credit to a student's program of study must be obtained and justified by the student's academic department and submitted to the dean of the Graduate School for final approval on the request for transfer of academic credit (G-RTC) form.

Transient Enrollment Privilege

A USC graduate student in a certificate program seeking transient enrollment privilege at another institution should complete and submit the Special Enrollment Request (AS-30) form available on the Office of the Registrar's website to the dean of The Graduate School for approval. Before enrolling in graduate courses at another institution, students should contact the graduate director of the certificate program for permission to enroll and to ensure that the credits from the other institution will be approved for inclusion on the student's certificate program of study.

Revalidation of Out-of-Date Courses

Students enrolled in a certificate program may, with permission of the academic department administering the certificate, request revalidation of USC graduate courses over six years old for inclusion in the certificate program of study. Each academic program will determine whether a course is appropriate for revalidation. The Permit for Revalidation Examination (PRE) form must be completed and submitted

to the dean of The Graduate School for approval prior to revalidation. Proof of payment of required fees must be submitted with the Permit for Revalidation Examination form. Complete revalidation instructions available here. **Note:** Coursework taken at other institutions may not be revalidated.

Course Enrollment Load:

A graduate student may enroll for a term load not to exceed 15 graduate hours. Some programs limit their students to a 9- or 12-hour maximum term course load. A student with a term course load of 9 or more hours during a fall or spring term is classified as full-time for academic purposes. The maximum course load in each of the two summer sessions is 6 hours. May session enrollment is part of the 6-hour limit for Summer 1 term. A student must be enrolled for at least 1 credit hour during any semester in which thesis progress is made and such University resources as the library, computer facilities, or faculty time are used.

Right to an Advisor

Every graduate student admitted to a degree program is entitled to an advisor. The academic program graduate director is the default academic advisor for graduate students until another academic advisor is assigned or an advisory committee is formed. Students are urged to consult with an advisor prior to enrollment.

B. USC Admissions Process

Graduate students are admitted through a cooperative effort between The Graduate School and the colleges or departments that offer degree programs. When the Graduate School receives your application and supporting documents, they are entered into our Student Information System, scanned, and shared through a password-protected Web interface with the faculty of the program to which you wish to be admitted. This process is coordinated by a faculty member who serves as the Graduate Director for that program. After reviewing your credentials, the program makes a recommendation to The Graduate School. Your program may inform you that it has recommended your acceptance. Official notice of your admission can come only from The Graduate School.

USC Admissions for the Graduate School

The Graduate School Application is hosted by a third-party vendor, Collegenet/Applyweb. Every applicant must create an account prior to beginning the Graduate School Application. Once an account is created you may use that account to apply to both the Degree Seeking and Non-Degree seeking applications. You do not need to complete your application at one sitting. You may save your work and come back to the application at any time. Other institutions use the Collegenet/Applyweb systems for their application. If you have applied to another institution through the Collegenet/Applyweb system, you can use the same collegenet/applyweb account to apply to The Graduate School.

USC Admissions Process

Graduate students are admitted through a cooperative effort between The Graduate School and the colleges or departments that offer degree programs. When the Graduate School receives your application and supporting documents they are entered into our Student Information System, scanned, and shared through a password protected Web interface with the faculty of the program to which you wish to be admitted. This process is coordinated by a faculty member who serves as the Graduate Director for that program. After reviewing your credentials, the program makes a recommendation to the Graduate School. Your program may inform you that it has recommended your acceptance. Official notice of your admission can come only from the Graduate School.

- Application Requirements
  1. **Application:** A completed application with all requested information and supporting documents supplied.

  2. **Application Fees:** A $50 graduate application fee is required for admission. A Change of Status fee of $15 is charged when requesting a change in program or degree intent with submission of a Change of Status (COS) form.

3. **Transcripts:** Official transcripts showing all college-level course work attempted and the award of the baccalaureate or higher degree by an accredited college or university. Official transcripts verifying all previous college-level course work are required for the University's records. To be considered official, transcripts must be sent directly from the institution to The Graduate School or delivered in a sealed envelope bearing a registrar's stamp. **Please send transcripts to:**

   The Graduate School
   1705 College Street
   Close-Hipp Suite 552
   Columbia, SC 29208

4. **Letters of Recommendation:** Applicants are required to submit at least **two** letters of recommendation through the electronic application process. Please carefully consider the waiver of right to view letters of recommendation because this decision cannot be altered after submission.

5. **International Applicants:** International applicants whose native language is not English are also required to submit a satisfactory score on the TOEFL or the IELTS Intl. Academic Course Type 2 exam. The minimum acceptable score on the TOEFL is 80 Internet-based or 570 paper-based. The minimum acceptable overall band score on the IELTS Intl. Academic Course Type 2 exam is 6.5. Programs may set higher score requirements. See International Students and Credentials for more information. **Note:** TOEFL and IELTS scores are valid for two years.

6. **Graduate School Academic Tuition & Fees (2026-2027 subject to change)**

Academic Tuition & Course Fees	Full-Time (6 Credits)	Part-Time (Per Credit)
Graduate Resident Student	**~$6,867**	**~$572.25**
Graduate Non-Resident Student	~$14,880	~$1,240.00
Technology Fee	$200	$17 per credit hour
Health Insurance**	$2,591	------
Health Center Fee (6-8 hours)	$127.00	------
Health Center Fee (9-11 hours)	$190.00	------
ASPH Health Professions Program Fee (Resident)	$800 (Per Semester)	$80 (Per Credit)
ASPH Health Professions Program Fee (Non-Resident)	$1,100	$110 (Per Credit)
Athletics Event Fee (optional)	$86	$86
Course Fees (depends on course – AT Courses below)	**Cost**	**Cost**
Health Professions Program Fee (per semester)	$250	$250

Note: This does not include all other University fees and course fees. These can be found on the University website: http://www.sc.edu/bursar/fees.shtml

Health Insurance - $4,000**: Graduate students who take 6 credit hours or more, graduate assistants and international students are **required** by the university to have health insurance. Students can either purchase insurance or waive out by providing documentation of enrollment in a comparable plan.). For graduate students who **do not** have their own insurance and are granted a Graduate Assistantship, they will qualify for a ***Graduate Assistant Insurance Full Subsidy. Beginning Fall 2022, Colleges (and grants, where applicable) will assume the full balance of health insurance beyond the $1000 subsidy, which will continue to be covered by the Graduate School/Provost Office.

C. CERTIFICATES OF GRADUATE STUDIES IN ATHLETIC TRAINING

1. USC Certificate of Graduate Studies in Athletic Training

The one-year program is designed to offer advanced studies and clinical experiences in athletic training to BOC-certified athletic trainers while also providing health care to patients and student-athletes in the state of South Carolina. Graduate assistantships with stipends, out-of-state tuition waivers, and tuition credits are available for qualified students. However, non-graduate assistant routes are available for this online post-professional program.

2. Academic Course Work – Certificate of Graduate Study in Athletic Training

ATHLETIC TRAINING REQUIREMENT: (18 hours)

Behavioral Health in Athletic Training (*Core Courses)		
ATEP 735 (Summer)	Contemporary Issues in Athletic Training	(3)
ATEP 751* (Summer)	Concepts of Behavioral & Mental Health	(3)
ATEP 753* (Fall)	Assessing & Treating Feeding and Eating Disorders, Exercise and Food Addiction	(3)
PUBH 700 (Fall)	Perspectives in Public Health	(3)
ATEP 752* (Spring)	Mental Health Challenges in Sport & Physical Activity	(3)
ATEP 754* (Spring)	Supporting Mental Wellness in Athletic Training	(3)

ATHLETIC TRAINING REQUIREMENT: (18 hours)

Critical Incident Management & Primary Care in Athletic Training (*Core Courses)		
ATEP 735 (Summer)	Contemporary Issues in Athletic Training	(3)
ATEP 761*(Summer)	Primary Care in Athletic Training	(3)
ATEP 742* (Fall)	Traumatic Catastrophic Injury Management	(3)
PUBH 700 (Fall)	Perspectives in Public Health	(3)
ATEP 743* (Spring)	Management of Exertional Injuries & Medical Conditions	(3)
ATEP 762* (Spring)	Pharmacological Interventions in Sports Medicine	(3)

3. Comprehensive Examination

- The Comprehensive Examination (the "Exam") is designed to assess students' mastery of core knowledge, applied skills, and integrative competencies across all courses contributing to the Certificate of Graduate Study.
- The Exam emphasizes case-based and problem-based decision making reflective of professional practice and serves as a required milestone prior to participation in the in-person institute.

Eligibility and Timing

- All students enrolled in the Certificate of Graduate Study are required to complete and pass the Comprehensive Examination.
- The Exam will open on Reading Day annually, and must be successfully completed prior to the start of the in-person institute.
- Students are responsible for completing the Exam within the designated testing window and planning adequate time for potential remediation attempts.

Examination Format and Administration

- The Exam will be administered electronically via Blackboard on the program page,
- The Exam will consist of approximately 60 multiple-choice questions.
- Questions will be mostly case-based or problem-based, requiring application of knowledge rather than recall alone.
- Each course contributing to the certificate will be represented by 10 questions, ensuring balanced coverage of program content. This includes the four content courses, ATEP 735 and PUBH 700.
- The Exam is designed to be completed in a single sitting. Once started, students are expected to complete the Exam without interruption in 75 minutes.

Exam Conditions and Academic Integrity

- The Comprehensive Examination is a closed-book assessment unless otherwise specified by the program.

- Students must complete the Exam independently and in accordance with the institution's academic integrity policy.
- Any suspected academic dishonesty, including but not limited to unauthorized collaboration, use of prohibited resources, or misrepresentation of identity, will be referred for formal review and may result in disciplinary action.

Passing Standard

- A minimum score of 80% (48 out of 60 questions correct) is required to pass the Exam.

Attempts and Remediation

- Students are permitted up to three total attempts to pass the Exam (the initial attempt plus two remediation attempts).
- A waiting period of 24 hours is recommended between attempts.
- Remediation attempts are intended to allow students time to review course materials, identify areas of weakness, and strengthen understanding prior to retesting.
- The content of remediation attempts may include different questions but will assess the same learning objectives and course representation as the original Exam.

Notification of Results

- Exam scores will be communicated to students electronically following each attempt.
- Students will be informed whether they have met the passing standard or are eligible for remediation by reviewing the gradebook on Blackboard and an email from the Program Director.
- Detailed item-level feedback will not be provided to protect exam integrity; however, students may receive general guidance on content areas needing improvement.

Accommodations

- Students requiring testing accommodations must work with the appropriate institutional office and notify the program in advance of the Exam opening date.
- Approved accommodations will be implemented in the Blackboard exam environment to the extent feasible.

Technical Issues

- Students are responsible for ensuring reliable internet access and a compatible device prior to beginning the Exam.
- In the event of a verified technical failure during the Exam, students must notify the program immediately.
- The program reserves the right to determine whether an additional attempt will be granted due to technical difficulties.

Policy Review and Modifications

- This policy is subject to periodic review to ensure alignment with program outcomes and institutional standards.
- The program reserves the right to make reasonable modifications to the Exam or procedures, with appropriate notice to students.

Approved by: Post-Professional Athletic Training Faculty
Effective Date: January 28, 2026
Revision Date: April 27, 2026

- Academic Regulations
  1. **Transfer of Course Credit**: Course work not part of a completed certificate program or graduate degree from USC or another institution may be transferred for credit toward a master's or doctoral degree. Course work transferred from another institution must be relevant to the program and have course content and a level of instruction equivalent to that offered by the University's own graduate programs. Approval for acceptance of transfer credit to a student's program of study must be approved and justified by the student's academic program and submitted to the dean of The Graduate School for final approval on the Request for Transfer of Academic Credit (G-RTC) form. No more than 12 semester hours of graduate credit may be

transferred into a master's program that requires 30-36 hours; no more than 15 semester hours of graduate credit may be transferred into a master's program that requires 37-45 hours; and no more than 18 semester hours of graduate credit may be transferred into a master's program that requires 46 or more semester hours. Only credits with grades of B or better may be transferred from another institution into a master's or doctoral degree program. Course work transferred for credit toward a master's degree must be from an accredited institution and must be no more than six years old at the time of graduation and coursework transferred into a doctoral degree program must be no more than eight years old at the time of graduation. Transfer credit is not posted to the student's official academic transcript until the term of graduation.

2. Grading Policies: The letter grades A, B, C, D, and F are employed to designate excellent, good, fair, poor, and failing work, respectively. The grades B+, C+, and D+ also may be recorded. Courses graded D+ or lower cannot be applied to graduate degree programs. The letter grades S (satisfactory) and U (unsatisfactory) are assigned only in courses that have been approved for Pass-Fail grading or in a standard graded course where the student, with the approval of the dean of The Graduate School, has elected an individual Pass-Fail Option. Courses completed with an S may be counted in total credits earned. Grades of T (satisfactory progress) or U (unsatisfactory progress) are given for thesis (799) and dissertation (899) preparation. Grades of T in thesis (799) and dissertation (899) preparation are not computed in the cumulative graduate grade point average. Graduate-level courses completed with the grade of U are calculated as an F in the cumulative graduate grade point average. In certain circumstances, grades of I (incomplete) or NR (no record) may be assigned by the instructor. Note: Retaking a graduate course does not delete the original grade.

The grade of I (incomplete) is assigned at the discretion of the instructor when, in the instructor's judgment, a student is prevented from completing a portion of the assigned work in a course because of an illness, accident, verified disability, family emergency, or some other unforeseen circumstance. The student should notify the instructor without delay and request an extension of time to complete the course work, but the request for a grade of incomplete must be made to the instructor before the end of the term. The instructor will determine, according to the nature of the circumstance and the uncompleted requirements, how much additional time, up to 12 months, will be allowed for completing the work before a permanent grade is assigned. An Assignment of Incomplete Grade form is completed by the instructor in VIP as part of the usual grade submission process. The justification for the incomplete grade, conditions for make-up, a deadline for completion, and a backup grade if the coursework is not completed by the deadline must be included on the form. Re-enrolling in a course will not make up an incomplete grade. A grade of I is not computed in the calculation of a student's cumulative grade point average until the make-up grade is posted.

There is no automatic time period for completion of the work for which a grade of incomplete is given. The instructor should give the student a reasonable deadline, up to one year after the scheduled end of the course, to complete the work. After 12 months and I (incomplete) grade that has not been replaced with a letter grade is changed permanently to a grade of F or to the backup grade indicated by the faculty member on the Assignment of Incomplete Grade form. In the rare instance the instructor believes there is justification for an extension beyond the 12 month limit, a request for extension of incomplete time should be submitted to the dean of The Graduate School before the expiration of the 12 month period on the Extension of Incomplete Time Period Authorization (GS-47) form for approval. The Graduate School does not approve the make-up of I grades in courses which are already out-of-date for use on a student's program of study or extensions of time without sufficient justification and/or supporting documentation.

Graduate students cannot register for additional coursework if there are 3 or more temporary grades of incomplete (I) that have not yet been replaced with a permanent grade on their academic record. Student enrolled in graduate study may not graduate with a temporary grade of I on their record, even if that course is not listed on the Program of Study.

NR (no record) is a temporary mark on the transcript assigned by the Office of the University Registrar if a grade has not been submitted by the instructor at the proper time or if any grade not approved for a particular course has been submitted. As a temporary mark on the transcript the NR must be replaced by a grade. If the NR is not resolved or replaced by the instructor with a valid end-of-term grade before the end of the major (Fall or Spring) term following the term for which the grade of NR was recorded, a grade of F will be assigned.

3. Academic Standard for Grade Point Average: The cumulative grade point average (GPA) is defined as the GPA of all graduate credit courses recorded on the official USC transcript. In-date courses are eight or less years old for doctoral students and six or less years old for Master's, specialist, graduate certificate, and non-degree students. Revalidated courses are also included in the cumulative GPA calculation. Grades earned for graduate credits transferred from other colleges or universities are not included in the cumulative GPA.

4. Academic Standard for Progression: Graduate courses may be passed for degree credit with a grade as low as C, but a degree-seeking student must maintain at least a B (3.00 on a 4.00 scale) cumulative grade point average. Some programs stipulate that no grade below B can be applied to a core course. Programs may cancel a student's registration privilege if the student fails to make adequate progress toward degree as defined by the program's academic policies. A student's registration privileges may also be cancelled for failure to meet academic standards as defined by The Graduate School.

5. Academic Standard for Graduation: At the time of graduation, the student's graduate cumulative grade point average (GPA) must be at least 3.00 (B) on a 4.00 scale. Additionally, the student's average on all grades recorded on the program of study for courses numbered 700 or above must be at least 3.00 and all courses listed on the program of study must be at least 3.00.

6. Academic Suspension Policy: Graduate degree-seeking students whose cumulative grade point average (GPA) drops below 3.00 (B) will be placed on academic probation by The Graduate School and allowed one calendar year in which to raise the cumulative GPA to at least 3.00. In the case of conversion of grades of incomplete that cause a cumulative GPA to drop below 3.00, a degree-seeking student will be placed on academic probation at the end of the semester in which the grade is posted. Students whose cumulative GPA falls below the required minimum of 3.00 by receiving a grade for a course in which they received a grade of Incomplete will, instead of a one-year probationary period, be granted only one major semester of probation dating from the semester in which the Incomplete conversion grade is received by the registrar in which to raise their cumulative GPA to 3.00 or above. Students who do not reach a cumulative 3.00 grade point average during the probationary period will be suspended from graduate study and will not be permitted to enroll for further graduate course work as a degree or a non-degree student

7. Reinstatement after Suspension: The Graduate School's Policy on Academic Probation and Suspension stipulates that when a degree-seeking graduate student's cumulative graduate grade point average (GPA) falls below 3.0 the student is placed on academic probation. The student has one calendar year, or in the case of an Incomplete conversion one major term, from the academic probation term to increase their cumulative graduate GPA to at least 3.0. Failing to meet this condition will result in academic suspension from all graduate study at the University of South Carolina.

   After suspension, reinstatement to graduate study or non-degree enrollment status cannot be granted for one calendar year following the term of suspension. To appeal for reinstatement the student must submit through the student's academic program a completed petition packet to the dean of The Graduate School following the guidelines below. Appeals may be initiated at any point following suspension, but petition packets must be received by The Graduate School at least 45 days before the start of the term for which the student wishes to be readmitted. A student

must contact the academic program and ask for support for reinstatement to graduate study. The department must recommend reinstatement for an appeal to go forward. Only packets containing all of the required letters, documentation, and recommendations and forwarded to the dean of

The Graduate School from the graduate director of the academic program will be considered. Appeal packets must contain all of the following:

- A letter from the student that explains the factors that resulted in their academic suspension.
- An explicit plan written by the student and endorsed by the graduate director showing how the student will overcome the extenuating circumstances noted in the student's letter of appeal (e.g., medical treatment, change of major, adjustment of work demands, etc.) and raise their GPA. Supporting documentation of extenuating circumstances must be included.
- A feasible projection of what grades will be required in what courses and which semesters to yield the requisite overall cumulative GPA of 3.0.
- A letter from the appropriate department chair or graduate director to confirm that all materials for this appeal are in order and that the appeal is supported by faculty of the academic program.

Complete packets may be delivered in person, by U.S. mail, or by campus mail to:

Dean of the Graduate School
The Graduate School
1705 College Street
Close-Hipp Suite 552
Columbia, SC 29208

Note: Students who have not been enrolled for three or more years must reapply to The Graduate School.

8. Academic Forgiveness Policy: The Academic Forgiveness Policy is intended to assist former University of South Carolina graduate students whose cumulative USC graduate grade point average (GPA) is below 3.00 to reenroll in graduate study without having to overcome the burden of previous unsatisfactory academic performance. Any former USC graduate student who has not been enrolled in graduate study for at least 24 consecutive months is eligible to apply for academic forgiveness. Academic forgiveness sets aside all former grades earned as a USC graduate student so that previous grades will not be calculated into the student's cumulative graduate GPA. Once academic forgiveness is granted courses taken during and prior to the term elected cannot be revalidated or count toward the completion of a graduate degree. A student who seeks academic forgiveness must submit a written petition for academic forgiveness to the dean of The Graduate School. That petition must include:
   - A letter from the student that explains the factors that resulted in the student's previous academic record.
   - An explicit plan written by the student and endorsed by the graduate director showing how the student will address those factors in future graduate study if academic forgiveness is granted.
   - A letter from the appropriate department chair or graduate director in support of granting academic forgiveness and recommending reinstatement.
   - Notice of the specific term for which courses taken during and prior to that term are to be segmented on the student's academic record as forgiven.

Each appeal for academic forgiveness will be considered on a case-by-case basis. If granted, the registrar's office will upon notification from the dean of The Graduate School segment the student's academic record showing all courses and grades to be included in academic forgiveness and will

recalculate the USC graduate cumulative GPA accordingly. The courses and grades will remain a part of the student's academic record. A notation will appear on the transcript indicating the student was approved for academic forgiveness.

9. **Academic Grievances:** Students who have problems with their instructors, course grades, or course sequencing should talk to their instructor. Every student has the right to petition and can pick up the petition form in Student Affairs in the Arnold School of Public Health. The petition will be sent to the Department Chair and will be reviewed by the department grievance committee. If the student's grievance is not satisfied the student may bring formal charges to the Student Affairs Committee of the Arnold School of Public Health. The committee will not act if the dispute is solely over a grade.

10. **Post-Professional Athletic Training Student Obligations Class Attendance:** The USC Post-Professional AT Program faculty are responsible for the design and instruction of the academic courses contained within the curriculum. The faculty feel that these courses, combined with clinical education and experience, are vital to students' overall success in the AT Program. As such, the faculty expect students enrolled in the Post-Professional AT Program to attend all class meetings – virtual or in-person. Therefore, all students will be required to attend and be actively involved in all AT Program courses. Students are expected to be prepared to initiate class activities at the designated start time. Faculty may, at their discretion, choose to refuse admittance to anyone who arrives after class has begun (i.e., lock classroom doors or dismiss student.)

    Post-Professional Athletic Training (PPAT) students may occasionally be absent from courses while engaged in other aspects of athletic training education (e.g., traveling with a team). PPAT students will not be excused from class to observe surgeries. In these instances, students are encouraged to provide advance notice to all their professors using the university athletics travel form. Understandably, there will be times when absences will be excused (illness, family emergency, etc.).

VI. CLINICAL EDUCATION

A. South Carolina Licensure

Athletic training GAs/Interns must be licensed through the South Carolina Labor Licensing Regulation (LLR) Board of Medical Examiners. The Board of Medical Examiners regulates the practice of athletic training in South Carolina. LLR prohibits work in the capacity of an athletic trainer or calling oneself an athletic trainer unless that person is licensed by the state to do so. South Carolina licensure for athletic trainers requires BOC certification and passing a fingerprint/background check.

B. Clinical Sites

a. USC Athletics – football, tennis/golf, track and field, beach volleyball, swimming and diving, and equestrian
b. USC Campus Recreation and Club Sports
c. Columbia College
d. USC Student Health Center
e. USC Marching Band and Betsy Blackmon Dance

C. Graduate Assistantship Package (2026-2027)

Assistantship Package	Amount
Stipend & Tuition (See Note Below)	~$30,800
Out of State Tuition Waiver (3 semesters difference in tuition)	~$12,020
Graduate Assistant Insurance Subsidy	$4,000
AT Clinical Practice Insurance – covered under University Policy	------
TOTAL	$46,820
NOTE: Graduate Assistants are on a 11-month contract (June 22, 2026-May 31, 2027). *GAs will use contract to pay in-state tuition,* and the remaining balance per semester will be distributed in a bi-	

monthly stipend. Students are responsible for the balance remaining on their tuition bills. Funds allocated for tuition & stipend are as follows:

Tuition (~$10,300): Paid across 3 semesters (Summer, Fall, Spring)
Salary (~$20,500): Paid bi-monthly across the length of the contract

D. Evaluations

1. The students will complete self, patient, and supervisor evaluations using the AT Milestones at end of the fall term and end of the spring term.

E. Clinical Hours

The Post-Professional Athletic Training Student Clinical Hours Policy was created to ensure that students, faculty, and clinical supervisors all follow the same guidelines in accordance with the university policy. This policy outlines the minimum and maximum number of clinical experience hours graduate students are expected to complete as part of their graduate assistantship. **Work Assignment: average of 20-30 hours per week.**

1. **Equitable Workplace:** Graduate Assistants should not be subjected to unfair treatment within the context of their employment. Given the nature of the working relationship between graduate assistants and their supervisors, graduate assistants can be vulnerable to assignments and workloads that exceed the reasonable parameters of the assistantship. For example, graduate assistants hired for ten (10) hours per week should not be expected to work twenty (20) hours per week. Effort may vary throughout the semester, but the average weekly hours should align with the appointment level.

   The **Provost Study Group on Graduate Life 2008** agreed that departments and programs should effectively communicate to graduate assistants the nature and duration of their appointment, expectations regarding performance of duties, criteria by which performance in an assistantships is evaluated, the basis upon which an appointment would be renewed or continued, the criteria the department or program uses to allocate assistantships, and the process through which the graduate assistant can raise concerns about their appointment. The University is dedicated to maintaining an equitable workplace for all graduate assistants.

2. **Conflict resolution:** Measures should be taken at the hiring unit level to ensure a fair work environment for graduate assistants. Clear delineation of standards and practices is of the utmost importance, as it levels the playing field by alerting all graduate assistants to departmental expectations. They can also be valuable in resolving any misunderstanding that may occur. Graduate students should not be expected to fulfill or scheduled for graduate assistant responsibilities that are in conflict with the graduate student's required academic activities. Graduate students can refuse any non-professional activities (outside their terms of appointment) for their advisor or anyone else (e.g., babysitting, yard clean-up, meeting outside of academic facilities, etc.). When there is a misunderstanding or concern over unfair treatment of graduate assistants, here are recommended steps for resolution:
   - Prepare a written summary of the concerns and send to the immediate GA supervisor with a request for a face-to-face meeting to discuss the concerns and their resolution;
   - Contact the **Student Ombudsperson** for a confidential, neutral, informal and independent discussion to gain perspective on the seriousness of the concerns and possible paths for resolution;
   - Prepare a written summary of the concerns and send to the unit supervisor (Graduate Director or department chair) with a request for a face-to-face meeting to discuss the concerns and their resolution.

- Prepare a written summary of the concerns and send it to the college or School's Dean's Office (Associate Dean for Graduate Programs) with a request for a face-to-face meeting to discuss them and their resolution.

- Prepare a written summary of the concerns and send it to the Graduate School Dean with a request for a face-to-face meeting to discuss them and their resolution. The dean will attempt to resolve appeals filed with the Graduate School and will refer unresolved issues to the Graduate Council, whose decision will be the final action taken within the Graduate School. Any further appeal must be directed to the Office of the Provost.

3. It is the responsibility of the graduate student to design a schedule based on needs of each individual clinical site. GA/Interns are required to provide athletic training services for all home events. Athletic training graduate students must keep track of their clinical hours. The Clinical Supervisor (at the sport or site that you are assigned) is responsible for verifying the completed hours, however it is the graduate student's responsibility to turn in all clinical hours to the Program Director or the Student Experience Coordinator.

4. How to Report Clinical Hours and Productivity Reports
   - It is the PPAT student's responsibility to record and report all clinical hours electronically. Link will be sent out to each student every 2 weeks.
   - Graduate students should keep a copy of the hours they submit electronically.
   - PPAT Graduate students will record one hour for each hour they are in the athletic training facility working or engaged in athletic training activity. Graduate students must also record the type of activity they are participating in while in the clinical setting.
   - When traveling on a road trip, only actual hours spent working in athletic training activities can be recorded (hours to and from the site or hours spent in lodging are not acceptable)
   - All reporting of clinical hours must be submitted electronically every 2-weeks. If you have questions, contact Dr. Zachary Winkelmann or Courtney McQuaker. Failure to report clinical hours on designated dates will result in disciplinary actions. See section V (Violation of Code of Conduct or Clinical Site Rules).

5. Hours That Do Not Count toward USC AT Program Requirements
   - Hours spent traveling (team travel, lodging, etc.). However, while traveling, hours spent giving treatment and those spent at the competition and practice sites will count
   - Hours spent at clinical sites not affiliated with the USC AT Program

F. SUPERVISION OF USC AT PROGRAM PROFESSIONAL STUDENTS

Athletic training students in the clinical rotations will be exposed to a variety of experiences with different levels of supervision by Preceptors. CAATE has defined supervision of students in a way that distinguishes between direct and indirect supervision as follows:

1. Direct Supervision: The athletic training student must include provision for supervised clinical education with a preceptor. Students must be directly supervised by a preceptor when delivering athletic training services. The preceptor must be physically present and able to intervene on behalf of the athletic training student and the patient.

2. Emergency Action Plan: All athletic training students must have immediate access to the emergency action plan. Students must also have access to and use of proper sanitation precautions (e.g., hand washing stations at all sites) to prevent bloodborne pathogens.

I. CLINICAL EDUCATION INFORMATION AND CLINICAL POLICIES

1. Employment during Clinical Assignments

PPAT students should expect considerable commitment at their clinical site. This includes weekends, evenings, and USC-designated academic breaks/holidays. Employment during the academic year is

permitted but comes secondary to the assistantship. GAs/Interns are expected to follow the schedule of their clinical assignment. It is the student's responsibility to discuss their schedule with their Clinical Supervisor prior to the start of their clinical assignment. Any outside employment schedule must not conflict with clinical expectations and requirements.

2. Mandatory Athletic Training Program Events:
    - **Monthly PPAT Meeting:** All Graduate Students/Interns are required to attend a monthly meeting. The dates for these are set and typically the 4th Monday of each month over lunch.
    - **Engaging in Professional Development:** Multiple options will be provided, including weekly clinical chats for the GA/Interns to engage in professional development
    - **End of the Year Banquet:** All Graduate Students/Interns are required to attend the end of the year Banquet.

3. Professional Appearance

As a member of the allied health professional staff at USC, Post-Professional AT Students/Interns are required to maintain a professional and appropriate appearance. This is a necessary measure to present a professional image to our USC faculty, staff, and students as well as maintaining a positive public image for the Post-Professional AT Program and athletic training profession. It is the Post-Professional AT Student/Intern's responsibility to be always in appropriate dress when working. Clothing is available through USC AT Program but is not required to purchase. You can purchase non-logo clothing on your own.

At no time will a Post-Professional AT Student/Intern's absence or tardy report for athletic training duties be excused for a student being dismissed by primary or secondary supervisor for inappropriate dress. Collared shirts, t-shirts and other apparel are usually ordered at the beginning of each semester through the Post-Professional AT Program Director.

Proper Attire for Clinical Sites

- Must wear name badge during **ALL** clinical obligations.
- USC (or plain) Athletic Training collared shirt (no "Cocks" logos).
- Flat-bottomed shoes (no open-toed shoes)
- Khaki-style pants, shorts, or slacks in one of the following colors: black, gray, or khaki – should be proper length
- Post-Professional students must adhere to the dress code mandated by clinical supervisor and/or coaching staff. ** Indoor/court sports may require professional and/or business casual dress.*
- Business-style/professional dress may be required for court sport games, physician practice rotations, etc.

Additional Guidelines for Appearance at Clinical Sites

- If a PPAT student has visible tattoos, they must follow the clinical site recommendation for "covering" tattoos, if needed
- Large facial jewelry should be removed (e.g., lips, nose, eyebrow, and tongue) and clear studs can be worn. Students must also abide by the clinical site's dress code policy.
- All Post-Professional AT Students/Interns maintain a well-groomed appearance.
- Fingernails must be maintained and kept at an appropriate length. It is highly recommended not to wear acrylic/fake long nails. Please see CDC guidelines for Nail Hygiene.
- No yoga pants, tight, or sweatpants
- No flip flops,
- Do not wear any other college or high school logo clothing
- No workout clothing (**tank tops, mesh shorts, basketball shorts, running shorts, etc.**) are allowed at any practice and/or game unless shorts were specifically issued by sport or clinical site.

- Hairstyles should be neat and maintained.

3. Clinical Experience Attendance Policy

The clinical experience portion of the Post-Professional Athletic Training Program is where graduate students are introduced to, implement, practice, and master skills vital to their success as athletic training professionals. These experiences are provided in the form of clinical assignments (both on and off campus) and assigned a clinical primary supervisor.

A PPAT student enrolled in the AT Program is required to attend and actively participate in scheduled/assigned clinical experiences. Therefore, all athletic training graduate students will be required to attend and be actively involved in AT Program clinical experiences as assigned. Additionally, being "tardy" for any clinical assignment will be considered an unexcused absence under the terms of this policy. PPAT students are expected to be ready to initiate the clinical assignment at the designated time. Those graduate students not ready, including appropriate dress and equipment, to initiate the clinical assignment as described will be considered tardy.

Furthermore, the clinical supervisor may choose to refuse admittance to anyone who arrives late to the clinical assignment (dismiss graduate student). Please note that athletic teams may alter scheduled practices and games without warning or notice; it is our requirement that these events receive the same consideration and attendance as all other events. At no time is anyone other than the primary supervisor and PPAT Program Director allowed to excuse a graduate student from a clinical experience. *Those requests for excused absences (including dates and reason) must be submitted in writing to the PPAT Program Director AND Clinical Supervisor TWO weeks prior to the absence.* These documents will be kept on file in the graduate student's portfolio. Failure to comply with this procedure will result in the absence being treated as unexcused/unapproved. (See Time-off Policy below)

Understandably, there will be times when absences cannot be pre-approved (illness, family emergency, etc.). These will be dealt with at the discretion of the Program Director. It is the graduate student's responsibility to communicate with all appropriate instructors, staff, and coaches when these instances do arise. Again, the graduate student should make every effort in advance of their absence to follow this notification procedure. Athletic training graduate students are encouraged to provide advance notice to all their clinical supervisors. Habitual tardiness or absence from clinical assignments will be addressed by the following guidelines. Records of absences and tardiness will become a part of the graduate student's permanent record.

Any graduate student who is tardy or absent from assigned clinical experiences will be reprimanded by the following guidelines:

- Graduate Student will be reprimanded by supervisor (Warning)
- Graduate Student will have written documentation in sent to the PPAT Program Director
- Graduate Student may be removed from their clinical site
- Graduate Student will have to meet with chair, program director, and departmental representative to discuss continuance in the program.
- In all cases a record of this negligence will be placed in the graduate student's permanent folder which will factor into consideration for continuance in the program.

4. Clinical Education Availability and Punctuality

- Arrive at practices before the start and remain until all post-practice activity is complete or until dismissed.
- When anticipating arriving late, call immediately.
- Be ready to participate when entering the facility.
- Look for something to do before sitting and talking.
- When unable to make an assigned duty, call one your clinical supervisor and the graduate program director in advance where arrangements can be made to cover your absence.

- If unable to provide medical services at a practice, game, etc. or assigned sport, advance notice must be given to the staff and Dr. Winkelmann
- Failure to report to duties and unexcused absences will lead to probation, suspension, or termination from the Athletic Training Program.

5. Benefits Graduate Assistants Receive

Graduate students from out of state who hold qualifying assistantships are granted an out-of-state waiver and will pay in-state tuition. Graduate assistantship paperwork must be completed no later than 25 calendar days from the first day of class in order to qualify for this reduction. In addition, graduate students who hold assistantships in the spring semester and pre-register for the upcoming fall semester automatically are accorded the reduced in-state tuition rates during the summer sessions (Maymester, Summer I, and Summer II).

NOTE: Graduate assistants DO NOT receive any of the following benefits: free parking passes; paid activity or technology fees; *sick leave or paid holidays*; insurance; or reduced textbook rates at either bookstore. Graduate assistants are NOT entitled to faculty benefits or privileges. Graduate assistants may pay separately for health services/activities fees by paying the University fee at the time of registration.

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6. TIME-OFF

Post-Professional AT Graduate Assistants/Interns are on contract from Summer (late June to July) to May 31. There is no University policy for time-off for GA/Interns, meaning that GAs/Interns do not get paid time-off nor can they accrue time-off. USC AT Program will honor all University Holidays (14 days) and will give the students 11 days to take throughout the year for a total of 25 days. Two weeks notification AND the permission of the direct supervisor are required for not working during USC-recognized holidays. If a GA/Intern works on a USC Holiday, that day can be used at another time. Fall break, Winter break, and Spring break are NOT considered official USC holidays, and graduate assistants are required to fulfill their clinical obligation.

NOTE: Any time requested off beyond the (25 days per contract) will be taken into consideration on an "individual" basis and made at the discretion of the direct supervisor and PPAT Program Director. Please note that every clinical site is different; therefore, responsibilities for each clinical site are determined by the discretion of the direct clinical supervisor.

1. Request for Time Off

All time-off requests must be made at least TWO weeks in advance and email Dr. Zachary Winkelmann and copy Mr. Dwaun Sellers. Do NOT schedule time-off until cleared with the direct clinical supervisor AND Post-Professional AT Program Director. Time-off requests not made within the TWO weeks, will be decided on an individual basis but not guaranteed.

The Post-Professional AT Graduate Assistant/Intern is responsible for seeking someone to provide medical services during all time off. If the GA/Intern must take emergency leave, the direct clinical supervisor and/or the Program Director will arrange for medical services for the GA/Intern. Time off missed will be made up at another time. It is HIGHLY discouraged to request time off during in-season or when hosting home events.

2. Time Off Winter Break

Winter break is from the last day of Fall semester exams to the first day of the Spring semester. Because GA/Interns are still getting paid during this time, time-off is not guaranteed. GA/Interns are REQUIRED to request the time off during winter break. All time-off requests for Winter break must be submitted no later than November 1st so that the direct supervisors and faculty can plan athletic training services accordingly. GA/Intern is required to provide clinical services (any home events or regular scheduled practices or clinical hours) during the winter break. GAs/Interns with a longer break may be reassigned to another clinical site unless they have

requested and have approval of time-off by the primary supervisor and Post-Professional AT Program Director.

Please note: It is NOT to be assumed that graduate students/interns will have time off because their clinical site does not require athletic training services (e.g., season is over, or school has ended) and/or they get all Winter break off without approval from the Post-Professional AT Program Director. It is the responsibility of the GA to notify the PPAT Program Director in the event there is no need for you to attend your clinical site (supervisor gave you the day off, no practice or game, etc.). If they are not notified, this could lead to further disciplinary actions.

3. *May Time Off*
    a. *Graduation/end of certificate program is in early May;* however, ALL contracts end *May 31 annually.* It should not be assumed that graduation fulfills the student's contract obligations. The AT Program will only allow release of the contract if the student has an official job offer letter **AND** it specifies a start date. All time off will follow normal time off policy with appropriate approval. Although the student may have days to request time off, if the clinical site is still active with practice and competition, time off is not guaranteed.

4. Summer Responsibilities (June 22 to July 19)
    a. **Summer Time-Off Request:** Summer time-off requests will be due upon arrival for Certificate GAs. This date will be confirmed by mid-semester. The program highly suggests students do not take all of their time-off together in the summer.

    b. All PPAT GA/Interns will be required to work between June 22 and July 19 (tentative each year) which will be scheduled by the Program Director in coordination with the site supervisors. All PPAT GAs/Interns will be responsible for summer athletic training services at a current clinical site (e.g., high school summer workouts, small college/university summer workouts, USC Rec Center summer intramurals, etc.). PPAT GA/Interns must fulfill athletic training services as assigned by the direct clinical supervisor/PPAT Program Director prior to signing up for paid summer camps. **This is priority before time off and summer camp sign up.**

Please note: It is NOT to be assumed that graduate students/interns will have time off because their clinical site does not require athletic training services (e.g., season is over, or school has ended) and/or they get all Winter break off a priority before time off and summer camp sign-up without approval from the Post-Professional AT Program Director. It is the responsibility of the GA to notify the PPAT Program Director in the event there is no need for you to attend your clinical site (supervisor gave you the day off, no practice or game, etc.). If they are not notified, this could lead further disciplinary actions.

    c. **Summer Camps:** The staff athletic trainers overseeing the summer camp will contact the Program Director to begin scheduling the PPAT GAs/Interns for the summer camps. GAs/Interns may also sign up for additional camp coverage as a Gatorade Team Leader, separate from medical staff, for larger camps; **ONLY** if all other summer clinical site coverage does not require an Athletic Trainer at their site.

    d. **End of Contract:** GA/Interns will NOT be allowed to request time-off during the May contract (3 weeks), unless it has been pre-approved by direct clinical supervisor AND the Post-Professional AT Program Director.

We encourage all students to make sure they do the following prior to the requesting time-off and/or to travel out-of- state:

1. **Instructor of Record:** Speak to your instructor about the possibility of missing class due to quarantine. It will be up to the individual instructor to decide how they will work with the

student during this time.

2. **Requesting Time-Off:** You will use the TIME OFF REQUEST FORM on Blackboard (it was also emailed to every student). Please complete it using Adobe and return via e-mail to Dr. Winkelmann and copy Dwaun Sellers.

G. PREPARATION RESPONSIBILITIES FOR CLINICAL OUTREACH

a. **Initial Contacts:** A contact list will be distributed to all GAs/Interns on the first day of USC AT Program Orientation. GAs/Interns are expected to contact their Primary Contact or site administrator at their clinical assignment immediately and set up a formal appointment to go out to the clinical site for an introduction, tour facilities, meet the Athletic Director, Athletic Trainer (if applicable) and coaches, and discuss budget and ordering of supplies.

b. **Keys:** One of the first priorities is to get keys so that GAs/Interns will have access to all areas necessary to carry out responsibilities. Primary contact will provide GAs/Interns with keys or tell them how to go about securing keys. Other than outside entrance and athletic training facility keys, additional keys may be necessary to access athletic training facility cabinets and storage areas. Be sure that you survey all playing areas prior to the first practice session, try keys to all doors and gates, and let the administrator know if you find that additional keys are needed. Remember that GAs/Interns should always have access to a telephone in the event of an emergency. Never assume that someone else has a key to a critical area or that keys will always work.

c. **Supplies:** During one of the early visits to the athletic training facility, the GA/Intern should plan to inventory supplies. Open all cabinets, drawers, and storage areas to see what you will have to work with. Check to see if any supply requisitions or purchase orders were submitted prior to arrival. GA/Interns should attempt to locate this purchase order and compare it with the supplies in the athletic training facility. If supplies that were ordered have not been delivered, some are missing, or that none were ordered, you should discuss this with the administrators as soon as possible.

d. **Emergency Care Equipment:** A top priority is to inventory the emergency care equipment well ahead of your first practice session in the Fall. If a piece of basic equipment is missing, or if other items are needed, check with the athletic director about purchasing them as soon as possible. It is also important that the GA/Intern checks all emergency equipment for proper working order. Proper equipment is essential to a complete emergency care plan. Do not be caught without the equipment you may need.

e. **Therapeutic Modalities:** It is essential that the GA/Intern be sure that all therapeutic modalities are in working order. Note equipment that needs repair and contact the site administrators. This equipment should not be used until it is restored to proper working order by a qualified technician. GA/Intern also need to be sure that ground fault interrupters have been installed in all electrical outlets used for hydrotherapeutic or electrotherapeutic modalities. Make sure that modalities have been calibrated on an annual basis, if not do not use them until a calibration can be performed. Failure to have calibrated modalities will result in disciplinary actions. See section V (Violation of Code of Conduct or Clinical Site Rules).

f. **Accident Reports/Injury Records:** Previous records should be reviewed well in advance of each sports season. GA/Intern should attempt to identify all athletes who may need follow-up care. These files may include 1) a standard student accident report, 2) medical referral forms, and 3) daily treatment logs and 4) injury reports. Failure to keep and disseminate accident reports/injury reports will result in disciplinary actions. See section V (Violation of Code of Conduct or Clinical Site Rules).

g. **Physical Examinations:** GAs/Interns will need to determine each site's individual plan for physical examinations and the extent of their involvement. GAs/Intern should review all physical examination forms prior to the beginning of each sport season for any medical information that may be helpful in the care of your athletes. Important information regarding allergies, drug reactions, and pervious

injuries or illnesses can often be obtained from these records. Failure to have updated physical examines from all participating athletes will result in disciplinary actions. See section V (Violation of Code of Conduct or Clinical Site Rules).

h. **Emergency Information Cards:** All schools and colleges require that an emergency card be kept on file for all athletes. These cards provide basic information including parent's home and business phone numbers, preferred physicians and hospitals, and other pertinent information that may be critical for the proper management of an emergency situation. These cards should be in your possession before an athlete is allowed to practice. Coaches should have copies in the graduate student's absence. The graduate student will need to find the most efficient way to file these cards so that they are readily accessible at any time.

i. **Emergency Action Plan:** One of the most critical areas to access in the athletic injury emergency care plan at the site. A comprehensive emergency plan includes essential basic components including (a) development of general procedures and guidelines that will govern actions, (b) emergency care personnel training, c) maintenance of necessary emergency care equipment, d) establishment of an effective communication system, e) arrangement for emergency transportation, 6) development of emergency care protocol, and f) completion and filing of accident reports. Failure to have an updated and accessible EAP will result in disciplinary actions. See section V (Violation of Code of Conduct or Clinical Site Rules).

j. **Institutional Policies and Procedures**: Review thoroughly. Should the GA/Intern find any problems they should plan to discuss them immediately with the supervisor. In preparation for emergencies, do not leave anything to chance and never assume that someone else has taken care of things. Ensure all policies match the NATA position and consensus statements including asthma, concussion, diabetes, medication, and lightning policies. Failure to have an updated Policy and Procedure Manual will result in disciplinary actions. See section V (Violation of Code of Conduct or Clinical Site Rules).

k. **Football Equipment:** During the first meeting with the supervisor, GA/Intern will need to determine the procedures used for issuing and fitting football equipment. It is highly desirable that the GA/Intern be involved in this process. Thus, they should be well versed in the proper fitting procedures. Whether or not they are directly involved in the fitting procedure, graduate students should make it a point to periodically check each player's equipment for defects and proper fit. This is an important part of the job.

l. **Consent to Treat Form:** If the GA/Intern is working with minors they will need to have consent from their parent/guardian to treat them. Most schools have a standard form that has to be signed prior to participation. This is especially important if the GA/Intern is utilizing Graston Technique as a form of treatment. Failure to have an updated consent to treat form for Graston will result in disciplinary actions. See section V (Violation of Code of Conduct or Clinical Site Rules).

m. **Athlete Insurance:** Most schools require that all athletes have proof of insurance prior to participation. Make sure you have a copy in the athletic training facility and a copy in any kits that travel with teams in addition to the emergency contact information. Failure to have an updated insurance form will result in disciplinary actions. See section V (Violation of Code of Conduct or Clinical Site Rules).

n. **Medical Team:** It is important to develop a list of individuals in the local medical community to be members of the medical team if one does not already exist. Compiling a list of competent doctors and dentists with various specialties should be done before the season begins. Remember, insurance will often dictate whom the athlete can see, so, be sure to have this type of emergency information easily on hand at all times. If the school or the assistantship is sponsored through our system, these physicians should be given priority to be part of the medical team. Also, priority of referral should be to this hospital. However, athletes and parents always have the right to see whomever they wish.

o. **Additional State Policies:** It is important that graduate students know the policies concerning athletic competition as well as medical issues set forth by the governing body for the clinical site (i.e., SCHSAA). For example, return to play criteria for skin disease or how many practices an athlete must participate in order to be eligible to participate in a game.

p. **People to Contact - School Nurse & Janitor/Equipment Manager:** The GA/Intern should plan to visit with the school nurse. She/he can be a valuable source of information regarding school policies and procedures governing the health care of the student-athletes. Sometimes the school nurse is in charge of biohazard and therefore a discussion of disposal should occur. The custodian is a particularly good person to get to know. He/she can supply the ATR with various cleaning items that may be needed and help the graduate student gain access to places where keys do not fit. Most likely, the school has an established policy for submitting a requisition for repairs which you will need to become familiar with.

q. **Communication Systems:** The essentials of an effective emergency care communication system include 1) a telephone, 2) lists of emergency telephone numbers, 3) posted information to be given during emergency telephone calls, and 4) policies for notification of emergency department personnel, parents, and school administrators. Telephones with direct outside lines should be available in all athletic training facilities and should be accessible to all those who may need them for emergency calls on a 24-hour basis. If for some reason, any of the team's practices are located off-campus the GA/Intern will need to be sure that an emergency telephone is also available at these sites.

   Emergency telephone numbers must be in place prior to the first practice session in the fall. This list should include telephone numbers for:

   a. Emergency transportation system (911),
   b. Private ambulance companies,
   c. Hospital emergency departments,
   d. Your team physician's office and answering service,
   e. Athletic trainers' home or cell phone,
   f. Athletic training facility,
   g. Your school administrators

   It is also recommended the GA/Intern type emergency telephone numbers on wallet-size cards and distribute them to all athletic administrators, coaches, and student trainers. Emergency numbers should also be taped inside all athletic training kits. Emergency information should be typed and posted by each telephone. The following specific information should be given during calls to the emergency medical system (911) and posted by all telephones.

   1. The caller's name and position (e.g., coach, athletic trainer)
   2. The telephone number from which you are calling.
   3. A brief description of the problem (type of injury)
   4. The name of the school and the school address
   5. Specific directions to the location of the injured athlete including location of access doors or gates to be used by emergency vehicles. Notification of emergency department personnel, parents and administrators is necessary in any serious or life-threatening situation in which an injured student-athlete has been transported.

   6. In any situation involving serious or life-threatening injuries/illnesses, the parents or guardians should be notified as soon as possible following stabilization of the injury and the necessary emergency care measures. With the exception of situations in which life-saving measures need to be taken, most hospitals require parental consent for follow-up

medical treatment. Thus, the graduate student should do everything possible to facilitate contact between parent and emergency department personnel. Information of the emergency information card should be given to emergency department personnel. In situations involving life-threatening, catastrophic or other serious injuries, appropriate school administrators should be notified as soon as possible.

r. Game and Practice Medical Services: The dual responsibilities of a GA/Intern at the University and as a high school athletic trainer will place significant demands on time. As a general policy, GAs are required to attend all classes as a first priority. The graduate student also needs to attend home athletic events and away varsity football games in addition to practice sessions during the time that your school is in session. In view of academic responsibilities and conflicting class schedules at the University, graduate students may find it difficult or impossible to adhere to this policy completely. In order to provide some flexibility graduate students should establish several types of game and practice services with the administrators ahead of time. All class conflicts should be communicated with the supervisor as early as possible and possible solutions discussed with the supervisor and professor.

s. Injury Management: Parent Notification - Previously discussed. 2) Medical referral forms - The use of a medical referral form is strongly advised as a means of direct communication between the graduate student and the attending physician. A copy should be sent with the athlete and then returned by the athlete with physician comments and recommendations for further treatment. 3) Injury Reports to Coaches - Time factors will often limit opportunities to communicate with coaches regarding the status of injured athletes. Graduate students must remember that coaches need to have this information in order to plan for practices and games. It is suggested that in order to facilitate this communication graduate students provide a daily injury report to coaches to inform coaches of 1) new injuries, 2) update an athlete's injury status, and 3) recommendations and/or restrictions of an athlete's practice activities.

t. End-of-Season Reports*:* It is recommended that, at the end of each sports season graduate students provide head coaches with a written summary of the rehabilitation progress of all athletes who were injured during the season. This report should include a list of those athletes who should continue to report for daily treatment sessions and those who should continue an extended post-season rehabilitation program. Involvement of coaches in the encouragement of athletes to report for post-season rehabilitation sessions is frequently highly effective. Check with administrator as to what reports the school requires.

u. End-of-the-Year Closing: Toward the end of the school year, GA/Interns will need to begin thinking of things that will need to be done to close the athletic training facility for the summer months. One of the most important matters that should be taken care of before closing for the summer is to remove the athletic injury reports and records of graduating seniors from your active files. Contact your administrative personnel for record storage or destruction instructions. All therapeutic modalities should be checked for proper working order. As a general rule, electrotherapeutic modalities should be checked annually by a qualified service member. Arrangements should be made for the repair or replacement of any defective emergency care equipment. Summary report of the number of athletes treated, number of injuries, etc. should be compiled.

It is highly suggested that a list of all available supplies, equipment, policies, procedures and medical personnel contacts be left for the next athletic trainer. Cleaning the facility, defrosting the refrigerator, and arranging athletic training facility supplies are some of the last-minute details that should be taken care of before final closing. GA/Intern should return keys to the appropriate administrator.

H. Clinical Education Rules and Guidelines

a. General Rules

- Profanity, horse play, or similar actions are unacceptable to the allied health care professional and will not be tolerated.
- All rules of the NCAA and SEC governing varsity practices, events, or competitions are to be followed by the athletic training students.
- Schedule all personal appointments away from athletic training clinical hours
- Personal business should not be conducted in the athletic training facility
- Appropriate emergency procedures are discussed and demonstrated with each new student.

I. Visiting Teams

All visiting teams are to be treated with proper courtesy and respect. Remember these athletes and staffs are our guests. We should try to meet their needs as much as possible. Once an athlete is injured, we are all on the same team. Hopefully, if our guests are treated properly here, they will reciprocate the same attitude and availability when we visit them.

J. Travel

Graduate students are to abide by the respective rules of their assigned varsity sport/clinical site when traveling on a road trip. They should be ready to go if requested by their clinical supervisor. Graduate students are to adhere to all travel regulations that apply to that team. It is mandatory that in any travel situation the graduate student should arrive at least 15 minutes earlier than the departure time.

K. Transportation

GA/Interns are responsible for their own transportation to and from their clinical site. All GAs/Interns must have a valid driver's license.

L. Transportation of Patients

GA/Interns are **not** permitted to transport any patients that are minors (Under the age of 18) and non-minors (age above 18) off-site to a physician appointment or medical facility. If transportation is needed a parent, coach, or ambulance should be used. If transportation is required for an adult patient, we recommend that you do not transport them in a personal vehicle. Request a full-time staff member or team manager to transport the patient. If not available, we recommend asking for the use of a university-owned vehicle or scheduling a ride share option. When possible, always have a third-party person in the vehicle with you.

M. Post-Professional Athletic Training Graduate Assistant Clinical Requirements (Must Complete):

a. Emergency Cardiac Care certification must be completed biannually. Course must provide adult and pediatric CPR, AED, 2nd Rescuer CPR, Airway Obstruction, and Barrier Devices (e.g., pocket mask, bag valve mask). Acceptable ECC providers are those adhering to the most current International Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiac Care. The two most common courses that meet these requirements are: 1) CPR/AED for the Professional Rescuer through the American Red Cross, and 2) BLS Healthcare Provider through the American Heart Association.

b. Annual documented completion of Blood Borne Pathogen (BBP) training: https://sc.edu/about/offices_and_divisions/ehs/training/research_laboratory_safety/biological_safety_training/index.php

c. Graduate assistants must provide electronic documentation of completing these guidelines.

N. Post-Professional Athletic Training Student Code of Conduct

a. ***Professional Responsibility Policy***

Post-Professional Athletic Training Students/Interns are expected to uphold the Code of Ethics of the National Athletic Trainers' Association, the BOC Standards of Professional Practice, and the Carolinian Creed. Post-Professional Athletic Training Students are encouraged to review the Code of Ethics (Appendix in Post-Professional AT Handbook), which can be found on the National Athletic Trainers' Association website (www.nata.org), BOC Standards of Professional Practice (Appendix in Post-

Professional AT Handbook), and The Carolinian Creed (Appendix in Post-Professional AT Handbook). For example:

- **Organization & Administration (Standard 7 of the BOC Standards of Professional Practice):** It is the professional obligation for all Athletic Trainers to document all procedures and services in accordance with the local (program policies), state and federal laws, rules and guidelines. The USC AT PPAT Programs does require all students to submit bi-weekly clinical hours, monthly productivity reports, and on clinical site visits the Athletic Trainer (GA) will have to verify how they are documenting procedures and services (EMR, written documentation, etc.).

The Post-Professional AT Program Director and Primary Supervisors reserve the right to dismiss and/or terminate Post-Professional AT Students/Interns from their clinical site for professional irresponsibility and/or inappropriate behavior. Post-Professional AT/Interns are expected to follow the guidelines for personal conduct established by the USC Post-Professional AT Program, the University of South Carolina, the National Athletic Trainers' Association, and the BOC Standards of Professional Practice. Any behavior deemed embarrassing to the USC Post-Professional AT Program, the University of South Carolina, or a clinical site would qualify as inappropriate behavior. Use of any substance (drugs and alcohol) is prohibited during all USC AT Program clinical experiences (this includes travel).

**This includes travel with outreach clinical sites, any USC or USC AT program affiliated clinical site.*

O. Post-Professional Athletic Training Student Clinical Site Relationship Policies

a. **POLICY 1.1:**

Athletic Training Programs' (AT Program) Post-Professional Students/Interns should always conduct themselves in a professional manner. At no time should they engage in conduct that would undermine their patients' confidence or cause a conflict of interest in their patients' care. Relationships (casual or sustained) between AT Program Post-Professional Student/Interns and any individual at a clinical education site (patients, administrators, staff, or full-time athletic trainers, graduate assistants, other students, coaches, student assistants, etc.) are prohibited. It is a clear conflict of interest to serve in a clinical education setting providing athletic training services to a patient with whom an AT Program Post-Professional Student/Intern has such a relationship. Relationships, including but not limited to athletic trainers, graduate assistants, AT students, coaches, staff, and/or student assistants in the clinical education setting, can also be detrimental to patient care and the learning process. Therefore, AT Program Post-Professional Students/Interns must notify the Post-Professional AT Program Director before beginning a personal relationship with any individual in the clinical education setting.

If a Post-Professional Student/Intern fails to follow the appropriate notification procedures for the disclosure of a relationship, they risk termination of the Post-Professional Graduate Assistant/Intern position. Each disciplinary action pertaining to Post-Professional AT Students/Interns will be determined by the Post-Professional AT Program Disciplinary Committee.

b. **POLICY 1.2:**

This policy includes all social interaction with individuals (patients, administrators, athletic trainers, graduate assistants, other students, coaches, staff, student assistants, etc.) outside of the Post-Professional AT Program Student/Intern's clinical education experience. Post-Professional AT Program Student/Intern will follow the rules and procedures of their clinical education site regarding social interactions with all representatives of that site. The USC AT Program will support the rules implemented by the clinical education sites. However, the USC AT Program prohibits socializing with any representative of a site, whether within their assigned clinical education site, at other clinical education sites, or outside any assigned clinical education site. The Post-Professional AT Program Student/Interns are considered an extension of the USC AT Program and the USC/Prisma Sports Medicine Staff and are always to conduct themselves in a professional manner. If a Post-Professional

AT Student/Intern fails to follow the appropriate notification procedures, he/she/they will risk possible termination of the Post-Professional Graduate Assistant/Intern position. Each disciplinary action pertaining to Post-Professional AT Students/Interns will be determined by the Post-Professional AT Program Disciplinary Committee.

NOTE: If any Post-Professional AT student/intern is suggested to have a "relationship" with a patient, undergraduate student, professional AT student, or underage student/patient. Their case will automatically be sent to Human Resources and the Office of Equal Opportunity for investigation. This may jeopardize not only employment status but academic status as well.

P. Professional Communication Policy

Post-Professional AT Students/Intern are required to communicate in a professional and appropriate manner with all persons associated with the USC AT Program and its affiliated clinical sites. You will find yourself interacting and communicating with a variety of individuals, each with a different personality and communication style. It is imperative to understand your role, as it may differ depending on the person you are conversing with.

Telephone

- When leaving a voicemail, leave your name, title/affiliation, message, and contact information.
- Your personal voicemail message should be professional. For example:

> "You have reached *your name*. Athletic trainer at *your clinical site*. I am currently unable to answer your phone call. If this is an emergency call 911. If this is not an emergency, leave your name, number, and short message, and I will get back to you as soon as possible."

Text Messages

- Maintain professionalism and proper etiquette in all text message communication. Do not use abbreviations (e.g., LOL, u, idk, etc.).
- Use complete sentences to avoid sounding abrupt. However, if the message is too long, consider a phone call instead.
- Double-check your message before hitting the send button (especially when you talk to text)

Email

- All e-mails should be professionally addressed and written. Use appropriate salutations (i.e., Dr., Mrs., Mr., etc.), grammar (i.e., complete sentences, punctuation, capitalization, etc.), terminology, and signature. Do not address emails with "Hey," Hey there, Yo, Bro," etc.
- E-mail is easy to misinterpret unless you have made it noticeably clear. Readers of e-mails cannot see your face or hear your tone of voice.
- Do not use e-mail as a medium for initiating or prolonging a disagreement. If you have a problem with an individual, we encourage you to resolve the situation face-to-face or over the phone.
- If you read something that offends you, do not respond immediately. It may not have been intended to offend. Take time to calm down ("The 24-hour rule"), reread and respond without being offensive, only if you consider it worthy of response.
- Discussing medical information attached to a patient's name within an e-mail is discouraged. The University suggests that messages containing protected health information, personally identifiable information, credit card information, and any information protected by institutional regulations be encrypted. To learn more how to add e-mail message encryption, please follow this link: https://scprod.service-now.com/sp/?sys_kb_id=e235f901db327300c3d917e15b961911&id=kb_article_view&sysparm_rank=5&sysparm_tsqueryId=383e10a5dbb8c8d41300f2f5ab9619d0
- All AT students are required to create a professional e-mail signature using the university generator for detailed signatures which can be located at https://sc.edu/about/offices_and_divisions/communications/toolbox/resources/email_signature_generator/index.php. After doing so, the student is required to add this to their Outlook

(desktop and mobile, if possible). Directions on how to add an e-mail signature in Outlook can be found at: https://www.lifewire.com/how-to-create-an-email-signature-in-outlook-1173664#:~:text=Select%20File%20%3E%20Options%20%3E%20Mail%20%28under%20Outlook,OK%20again%20in%20the%20Outlook%20Options%20dialog%20box.

- You are encouraged to insert the following disclaimer in your e-mail signature:

> "This e-mail transmission, in its entirety and including all attachments, is intended solely for the use of the person or entity to whom it is addressed and may contain information, including health information, which is privileged, confidential, and the disclosure of which is governed by applicable law. If you are not the intended recipient, you are hereby notified that disclosing, distributing, copying, or taking any action in relation to this e-mail is STRICTLY PROHIBITED. If you have received this e-mail in error, please notify the sender immediately and destroy the related message."

Additional Guidelines for Personal Contact

Patients - As an AT you should practice communication skills in a manner that separates you from the patient. Common courtesy is necessary. At times, a patient may demonstrate inappropriate behavior. Do not tolerate this behavior and address it immediately to maintain discipline in the athletic training setting.

Athletic Training Colleagues and ATSs – It is expected that graduate ATs address supervisors, staff ATs, and ATSs with respect. Communication with ATSs should be non-demeaning. All issues, whether clinical or academic, should be addressed in the appropriate environment at the appropriate time. Never address a situation or discuss medical information in the direct presence of additional parties who should not be privy to the information. Never address a situation in front of a patient unless the patient's immediate health is in jeopardy. When hosting an event, you are expected to introduce yourself to the visiting AT or appropriate visiting staff.

Physicians and Other Medical Professionals - The physician-AT relationship is imperative and highly valued within the USC AT Program. Numerous opportunities will be presented to you to observe and interact with physicians. Physicians affiliated with the USC AT Program value the educational aspect of all AT students and Interns. Athletic trainers should appreciate the opportunity to interact with physicians and treat such interactions as a privilege. When communicating with physicians, use proper medical terminology, address them by the appropriate title, and respect their medical decisions. You will come in contact with a variety of other medical professionals, including physical therapists, chiropractors, nurses, physician assistants, paramedics, and others. Everyone should be treated with the utmost respect. If hosting an event, be familiar with all medical personnel in attendance (e.g., EMTs providing services at the event). If you have a conflict with one of these individuals, maintain your professionalism and report serious conflicts to a supervisor.

Other Clinical Site Personnel - Communication with coaches, administrators, parents, and other personnel at your clinical site will occur regularly. Represent yourself with confidence, introduce yourself to all associated personnel, and treat all individuals with respect. Whether by phone or in person, medical information should not be provided to an individual without the patient's consent.

Conflicts

In the event of a communication problem, you are expected to direct the concern to a supervisor or the next appropriate person within the chain of command. If at any time you feel you are not being treated with respect by a coach, administrator, or other personnel, attempt to address the situation and discuss it with a supervisor. During any conflict, professional language and mannerisms are always to be practiced. Using vulgar language or raising your voice is not appropriate. Conflicts should be handled immediately

and in a proper manner. If you feel that you cannot handle a conflict in a professional manner, it may be appropriate to distance yourself from the situation and follow up later.

Inappropriate Communication

If at any point you feel that an individual associated with the USC AT Program, or your clinical site, has been unprofessional in their communication with you, notify a supervisor immediately. It is inappropriate to send text messages to patients, coaches, AT colleagues, and any other personnel affiliated with USC AT Program and clinical sites that include or depict unprofessional behavior. Any non-athletic training communication (e.g., pictures of yourself, discussion of weekend party plans, any sexual connotations that may be deemed sexual harassment, etc.) to patients, coaches, administrators, ATSs, or any personnel affiliated at your clinical site is strictly prohibited. The Post-Professional AT Program reserves the right to dismiss any athletic training member (Post-Professional AT Student or Intern) from their/their clinical assignment for any violation of this policy. Disciplinary action pertaining to Post-Professional AT Students/Interns will be determined by the Post-Professional AT Program Disciplinary Committee

Q. Privacy Protection of Personal Health & Educational Records (FERPA, HIPAA, & Confidentiality

By reading and signing this Statement, I agree and acknowledge the following:

1. I may come into contact with other persons' educational, medical, financial, or other personal information.
2. I will participate in biannual training relative to federal and local acts (e.g., FERPA, HIPAA confidentiality, etc.) directed as privacy protection of personal health and educational records to be prepared for the changing healthcare environment and clinical site placement.
3. This information, whether oral or recorded (written, electronic, etc.), is private and confidential under Federal and state laws and under University of South Carolina policy.
4. I have a duty to follow adequate safeguards for the protection of other person's medical, private, and educational information, which includes proper disposition of records and proper protection of my password and of my workstation.
5. I will not use or disclose any form of another person's educational, medical, financial, or other personal information, whether written, oral, recorded electronically, heard, seen, or memorized to anyone outside the Department, except as specifically authorized.
6. It is a violation of Federal and state laws and the University of South Carolina policy to repeat or to release another person's educational, medical, financial, or other personal information, without the express written permission of the person.
7. If I am in doubt about whether it is appropriate to share, use, or disclose another person's medical, personal, or educational information, I will consult with my supervisor. This means that each clinical site placement may have different regulations of which guidelines to follow, but as a member of the program you must adhere to FERPA regulations at all times.
8. Failure to abide by this policy could result in my IMMEDIATE termination, dismissal, expulsion, or suspension from the Department of Exercise Science, from the University of South Carolina, and from any academic or nonacademic program, course, and involvement, prior to any hearing to which I may or may not have a right to request.
9. This statement will be maintained in any file pertaining to me and may be used as evidence by anyone, including law enforcement, in the event that I violate the policies, procedures, or practices of the Department or if I use or disclose another person's individual's medical, private, or educational information without valid authorization.

R. Social Media Policy

The following are guidelines for members of the University of South Carolina (USC) Post-Professional Athletic Training Program (AT Program) who participate in social media (Facebook, Twitter, Instagram, LinkedIn, Snapchat, TikTok, Google+, GroupMe, etc.). These guidelines apply to any individual posting to their own sites or commenting on other sites:

1. Follow all applicable USC and USC AT Program policies. For example, you must maintain patient privacy. Among the policies most pertinent to this discussion are those concerning patient confidentiality, university affairs, mutual respect, photography and video, and release of patient information to media.
2. Write in the first person. Where your connection to USC and USC AT Program is apparent, make it clear that you are speaking for yourself and not on behalf of USC or USC AT Program. In those circumstances, you should include this disclaimer: "The views expressed on this [blog; website] are my own and do not reflect the views of USC or USC AT Program." Consider adding this language in an "About me" section of your blog or social media profile.
3. If you identify your affiliation to USC or USC AT Program, your social media activities should be consistent with USC and USC AT Program's high standards of professional conduct and Carolinian Creed.
4. If you communicate on the public internet about USC or USC AT Program-related matters, you must disclose your connection with USC or USC AT Program and your role at USC or USC AT Program.
5. Be professional, use good judgment and be accurate and honest in your communications; errors, omissions or unprofessional language or behavior reflect poorly on USC or USC AT Program, and may result in liability for you, USC, or USC AT Program. Be respectful and professional to fellow students, faculty, staff, clinical affiliations, business partners, competitors, and patients.
6. Ensure that your social media activity does not interfere with your USC or USC AT Program commitments.
7. The USC AT Program prohibits "friending" of patients on social media websites. Members of the USC AT Program in patient care roles should not initiate or accept friend requests except in unusual circumstances such as the situation where an in-person friendship pre-dates the treatment relationship.
8. The USC AT Program prohibits members in Preceptor roles from initiating "friend" requests with Athletic Training Students (ATS) they supervise.

Any violation of the social media policy outlined above could be ***grounds for termination from the clinical education site and/or USC Post-Professional Athletic Training Program***. The Post-Professional AT Program Director and Primary Supervisors reserve the right to dismiss any athletic training member (GA or Intern) from their clinical assignment for any violation. Disciplinary action pertaining to GA Students/Interns will be determined by the Post-Professional AT Program Disciplinary Committee.

S. Acknowledgment of Risk

Participation in the Post-Professional Athletic Training Program is a potentially hazardous/dangerous activity. Serious injuries, including permanent paralysis and even death, can occur. Neither the University of South Carolina nor any of its employees assume any responsibility in the event of an accident. In consideration of the below signed Post-Professional Athletic Training Student being permitted to participate in the above-listed program, I/we hereby release the above-named institution and its employees, together with all persons assisting with any phase of such activities, from all liability and responsibility in connection with such activity. I/We further agree to indemnify and hold harmless said parties from all claims hereafter made and asserted by or on behalf of the below signed Post-Professional Athletic Training Student, their parents, guardian(s), heirs, executors, or assigns.

T. Violations of Code of Conduct or Clinical Site Rules

Any violation of the professional behavior code of conduct outlined above could be grounds for dismissal from the clinical site and/or USC athletic training education program. Clinical supervisors reserve the right to dismiss any athletic training graduate student from their clinical assignment for any violation of clinical site rules and regulations. The typical sequence of disciplinary actions follows:

- 1st Offense Mandatory discussion with Graduate Student, Clinical Supervisor, and PPAT Program Director. A written reprimand will be placed in the student's file. Depending on the student's violation, it is possible the student can be dismissed from the program for their 1st offense.

- 2nd Offense Mandatory meeting with AT Program committee (Chair of Department, PPAT Director, Clinical Supervisor, and one additional AT Program faculty member) and possible dismissal from clinical experience and/or athletic training education program.

*All cases will be handled on an individual basis by the AT Program committee (AT Program Faculty, PPAT Program Director, and Chair of the Department). *

U. Grievances

There are bound to be some interpersonal problems with any staff larger than one person. These problems can and should be handled quietly and efficiently with little disruption of routine. They should be handled in the office and not during treatment or rehabilitation. All that is required is some maturity and patience. All interpersonal problems should first be tried to be resolved by those involved. If no progress can be made, then the parties must look to the staff for arbitration.

For student-to-student problems, the individual should first look to the clinical supervisor with direct responsibility for the athletic training graduate student. Each party will register their complaint separately so that the moderator may hear both sides and then meet with the clinical supervisor to discuss resolutions.

The same procedure applies to graduate students to staff problems. The only difference is that another staff member who is uninvolved in the incident will fill the role of arbitrator. It is our feeling that fairness will be best served in this manner. The USC Grievance Policy, as published in the University of South Carolina Policies and Procedures, will ultimately be followed for grievances that are not easily resolved.

V. Probation/Dismissal

Failure to meet one or more of the requirements for program progression will result in the student being placed on program probation. While on program probation, subsequent failure to meet any program requirements will result in dismissal from the program.

Failure to meet the 2.75 cumulative GPA requirements automatically places the student on academic probation. If the student fails to re-establish the GPA to a 2.75 after one semester, the student will be dismissed from the program. Students on academic probation are not eligible for a clinical assignment/rotation. Each case is handled on an individual basis by the AT Program committee, which consists of the AT Program director, the AT Program clinical coordinator, department chairperson, and departmental representative.

Appeals

Each case brought to the Graduate Athletic Training Program committee will be handled on an individual basis and a recommendation will be made regarding probation or termination from the program. The student may appeal the committee's decision per university procedures.

W. Violations of USC PPAT Graduate Assistant/Intern Code of Conduct

Any violation of the professional behavior code of conduct outlined in the USC Athletic Training Graduate Student Handbook could be grounds for dismissal from the clinical site and/or USC athletic training education program. Clinical supervisors reserve the right to dismiss any athletic training graduate student from their clinical assignment for any violation of clinical site rules and regulations. For additional information on this policy, please contact the Athletic Training Program Director or review your Athletic Training Graduate Student Handbook. A copy of the performance evaluation can be found in the appendix.

VII. UNIVERSITY OF SOUTH CAROLINA WELLNESS PROGRAM: ALCOHOL, DRUGS, AND HEALTH

A. Scope

Participation in the Wellness Program is required of all University of South Carolina student-athletes, including scholarship and non-scholarship student-athletes, and other students directly associated with

the Athletics Department, including cheerleaders, student athletic trainers and equipment managers (collectively referred to in this policy as "student-athletes"). Student-athletes whose eligibility has expired or who no longer participate in intercollegiate athletics but who continue to receive athletic aid are subject to the Wellness Program.

B. Policy Statement

The Athletics Department is concerned about the potential use and abuse of drugs and alcohol by student-athletes at the University of South Carolina. This concern includes the use of illegal drugs, the use of anabolic steroids, the use of drugs that are not medically indicated, the misuse of prescription drugs, the use of alcohol, and the use of diuretics and "masking agents" designed to prevent the detection of such drug and alcohol use.

The Athletics Department believes that drug and alcohol use and abuse, in addition to being a violation of team rules, poses a significant threat to the health, growth, development and overall physical and mental well-being of its student athletes; results in diminished academic and athletic performance; increases the risk of injury to student-athletes and, in team sports, to their teammates and opponents; may retard the healing of injuries; and may produce dependence and addiction problems that can have devastating societal, financial and career ramifications.

Therefore, the Athletics Department has adopted and implemented this Wellness Program, including a mandatory program of drug testing, education, and counseling, in an effort to protect the health, safety and wellbeing of student-athletes associated with the Athletics Department.

C. Purpose

The purpose of the Wellness Program is:

1. To educate student-athletes about the dangers and effects of drug and alcohol use and abuse.
2. To identify through periodic and random testing those student-athletes who may be involved in drug and alcohol use and abuse.
3. To recommend and provide confidential assessment and treatment for those student-athletes identified as having drug or alcohol related problems.
4. To provide corrective actions for those student-athletes found in violation of the Wellness Program.

D. Prohibited Substances

The Wellness Program tests for substances identified by the Athletics Department or the National Collegiate Athletics Association ("NCAA") as purporting to be performance-enhancing or potentially harmful to the health, safety, or well-being of student-athletes, or that are illegal under applicable federal or state law. Student-athletes are reminded they are responsible for the presence of any banned or illegal substance in their body and are to refrain from areas of risk. Student-athletes are therefore prohibited from using the following substances:

1. Illegal drugs, including but not limited to, marijuana, phencyclidine, stimulants (e.g., amphetamines, ecstasy, and cocaine), and hallucinogens (e.g., LSD).
2. Anabolic steroids and similar growth-enhancing or performance-enhancing substances.
3. Prescription or over-the-counter drugs not medically indicated.
4. Drugs banned by the NCAA.
5. Diuretics and "masking agents" designed to prevent the detection of drug and alcohol use, not otherwise medically indicated.
6. Alcohol

The Athletics Department reserves the right to modify the list of prohibited substances as it deems appropriate to meet the purposes of the Wellness Program. The NCAA's list of banned drugs may change during the academic year. An updated list may be found on the NCAA website (www.ncaa.org).

E. Procedural Guidelines

1. *General.*
The Athletics Department considers education to be the most important part of its Wellness Program. The Athletics Department will endeavor to educate its student-athletes about the risks inherent in drug and alcohol use and abuse. The Director of Wellness will be responsible for coordinating and making available to student-athletes drug and alcohol related educational programs, services, and information throughout the year, including, for example:

(a) programs for student-athletes, such as educational and motivational speakers, that will provide necessary information to enable student-athletes to make decisions that will enhance and encourage a healthy lifestyle.

(b) dissemination of information and materials available from campus and community resources regarding drugs, alcohol, and tobacco, as well as materials related to general health and well-being; and

(c) providing opportunities for student-athletes to discuss the health, legal and ethical risks of drug and alcohol use and abuse.

2. *Annual Orientation Program*.
At the beginning of each academic year, prior to the commencement of drug testing, all student-athletes will be required to participate in an athletics Department orientation program that will include presentations regarding the Wellness Program. Each student-athlete will receive a copy of the Wellness Program, and the drug testing procedures to be used by the Athletics Department will be explained in detail.

All student-athletes will be required to sign a consent form acknowledging their agreement to abide by the terms and conditions of the Wellness Program and granting the Athletics Department permission to perform drug tests at any time and to disclose test results to certain designated individuals. Student-athletes will be subject to drug testing in accordance with the Wellness Program at any time thereafter.

3. *First-year student and Transfer Student-Athletes.*
In addition to the orientation program held at the beginning of each academic year, the Athletics Department will conduct an initial education program for all first-year students and transfer student-athletes on the dangers of drug and alcohol use and abuse within twenty (20) days of the first day of classes of the semester of their initial enrollment. First-year student and transfer student-athletes will be drug tested for medical evaluation purposes immediately thereafter ("Medical Test"). Medical Test results indicating the presence of a prohibited substance shall not be considered a positive test result for purposes of the Wellness Program; provided, however, student-athletes will be:

a. Referred for assessment, counseling and treatment as determined by the Director of Wellness; and
b. Scheduled for follow-up testing as deemed necessary by the Director of Wellness in order to monitor the continued presence and concentration of the prohibited substance in the student-athlete's system. Decreased levels of the same prohibited substance not otherwise medically expected to have been cleared from the student-athlete's system will not be considered a positive test result.

First-year students and transfer student-athletes will be subject to drug testing in accordance with the Wellness Program any time after the Medical Test.

4. *Drug Testing Procedure.*
Drug testing will be conducted throughout the year, and student-athletes may be drug tested in-season, out-of-season, and during summer school, if they are enrolled at the University of South Carolina. Testing takes a variety of forms:

a. Random Individual Test -- student-athletes' names are computer-generated, and each student-athlete receives notification that they will be tested and the date, time, and place of the test.
b. Team Testing -- a team or any portion of a team may be tested with or without notice immediately before or after a workout, practice or competition.
c. Non-Random Testing for Reasonable Cause -- a student-athlete may be tested with or without notice if reasonable cause exists that the student-athlete may be using a prohibited substance. The Director of Wellness, or the Director of Sports Medicine, will determine reasonable cause. Circumstances which may constitute reasonable cause include, but are not limited to, the following: current or past involvement with the criminal justice system for drug-related activities; prior treatment for drug problems; admission of a current drug problem; prior positive test for any prohibited substance, including alcohol; physiological signs or other reasonable indications of possible use of or impairment from drugs or alcohol; or a pattern of aberrant behavior.
d. Arrest on a Drug or Alcohol Related Criminal Offense; Ticketed Offenses -- a student-athlete arrested on a drug or alcohol related criminal offense will be required to submit to an immediate drug test at a time and place designated by the Athletics Department. Additionally, for purposes of the Wellness Program, any ticketed offense related to or involving the presence of or consumption of drugs or alcohol, including without limitation the possession or use of false identification, will result in automatic referral for drug testing.

Student-athletes selected for testing will be required to provide a urine specimen for purposes of determining the presence or absence of prohibited substances.

To ensure validity, each specimen will be obtained under direct supervision and will be coded to ensure confidentiality. Security of the specimen (chain of custody) will be implemented from the moment the student-athlete signs in at the site of the drug test until final completion of analysis of the specimen.

With respect to testing for prohibited substances, urine specimens will be sent to an independent laboratory for screening to determine its specific gravity and the presence or absence of prohibited substances. Screening for drugs will be performed at the highest level of sensitivity and testing confidence. All specimens that show the presence of a prohibited substance will be subject to a confirmation test using state-of-the-art technology. Positive specimens will be retained by the laboratory for a period of sixty (60) days following a positive test report.

5. *Contact of Student-Athlete for Drug Test.*

Student-athletes will be contacted for drug testing as follows:

a. Contact for Random and Non-Random Drug Test: Once a student-athlete has been placed on a manifest for drug testing, the Director of Wellness or their designee will have four (4) hours from the time the test starts to notify student-athletes to appear at the specified test session. The Director of Wellness or their designee is prohibited from notifying student-athletes prior to the four (4) hour time period. Student-athletes who are not contacted within the specified time period will remain on the manifest for subsequent tests. Student athletes who are not contacted for two (2) consecutive tests may be prohibited from working-out, practicing, or participating in competition until a valid specimen is provided.

   Notwithstanding the above, student-athletes with previous positive tests may be required to submit a specimen on each test date and may be prohibited from working-out, practicing, or participating in competition until a valid specimen is submitted.

b. Contacting for Team or Partial Team Drug Test: Student-athletes selected as part of a team or partial team for drug testing will be notified in person upon presenting for a practice or competition or immediately at the conclusion of a practice or competition. Once the

student-athlete has been notified of a scheduled drug test, the student-athlete must produce a urine sample within the allotted time period not to exceed three (3) hours prior to leaving the locker room or facility. Leaving the designated area prior to producing a sample will constitute a "no show" offense.

6. *Failure to Provide Urine Sample at Drug Test ("No Void").*
Student-athletes who fail or are unable to provide a urine specimen during a drug test ("no-void") may be prohibited from working-out, practicing, or participating in competition until a valid specimen is provided.

7. *Failure to Appear for Drug Test ("No Show").*
Student-athletes who fail to appear for drug testing after receiving notification of the test ("no show") will be subject to the following; provided, however, a student-athlete's failure to appear for drug testing will not be considered a "no show" in the event extenuating circumstances, as determined by the Director of Wellness and the Director of Sports Medicine, justified their failure to appear:

    a. *First "No Show" Offense*
        1. Student-athletes will be required to submit to an immediate drug test at a time and place designated by the Athletics Department.

            a. If the drug test is positive, the student-athlete will be subject to corrective actions as set forth hereinafter.
            b. If the drug test is negative, the student-athlete's failure to appear for drug testing will not be considered a no-show; however, the student-athlete will be scheduled for non-random drug testing as deemed necessary by the Director of Wellness.

    b. *Second "No Show" Offense.*
        1. Student-athletes may be prohibited from working-out, practicing, or participating in competition until a valid specimen is provided.
        2. Student-athletes will be required to submit to an immediate drug test at a time and place designated by the Athletics Department.

            a. If the drug test is positive, the student-athlete will be subject to corrective actions as set forth hereinafter.
            b. If the drug test is negative, the student-athlete's failure to appear for drug testing will not be considered a no-show; however, the student-athlete will be scheduled for non-random drug testing as deemed necessary by the Director of Wellness.

8. *Willful Refusal to Participate in Drug Test.*
In the event a student-athlete is notified of a drug test and willfully and intentionally refuses to test or to make themselves available for testing, the student-athlete will be suspended from the team and subject to dismissal.

9. *Specific Gravity; Dilute Specimens.*
All specimens determined by an independent laboratory to have a specific gravity of less than 1.0030 will be considered dilute specimens. For dilute specimens, test results for prohibited substances will be determined and reported by quantity via normalized standard lab procedures performed by the testing laboratory.

Student-athletes found to have a dilute specimen may be prohibited from working out, practicing, or participating in competition until a valid, non-dilute specimen is provided.

10. *Positive Test Results*

A student-athletes urine specimen will be considered a positive test result upon confirmation by an independent laboratory of the presence of a prohibited substance. Confirmation threshold levels for prohibited substances are set forth in Exhibit 1, attached hereto.

Positive test results from NCAA-administered tests will be considered a positive test result under this Wellness Program and will subject the student-athlete to corrective actions as set forth hereinafter.

Student-athletes having a positive test result will be scheduled for follow-up testing as deemed necessary by the Director of Wellness in order to monitor the continued presence and concentration of the prohibited substance in the student-athlete's system. Upon notification of a positive test result, the student-athlete may be drug tested immediately to determine possible further utilization of the drug and appropriate corrective actions to be taken. Decreased levels of the same prohibited substance not otherwise medically expected to have been cleared from the student-athlete's system will not be considered a positive test result.

A student-athlete's failure to appear for drug testing following an arrest or ticketed offense as required by Paragraph E(4)(d) herein will result in the student-athlete being prohibited from working-out, practicing, or participating in competition until a valid specimen is provided.

A student-athlete's conviction, guilty plea, nolo contendere plea, or entry into pre-trial intervention, resulting from a criminal offense or ticketed offense involving a prohibited substance will result in the student-athlete being required to submit to non-random testing as determined by the Director of Wellness.

11. *Notification of Test Results*

The following University and Athletics Department officials may be notified of laboratory-confirmed positive test results, no-contacts, no-shows for drug tests, refusals to participate in drug tests, or arrests on drug or alcohol related criminal offenses or ticketed offenses:

(a) Director of Wellness.
(b) Director of Sports Medicine.
(c) Athletics Director and/or their designer.
(d) Student-athlete's head coach or supervisor.
(e) Student-athlete's parents or legal guardians; and
(f) Health care providers involved in assessment, counseling, and treatment to which the student-athlete may be referred.

F. Corrective Actions

The following corrective actions will be implemented by the Athletics Department in the event a student-athlete tests positive for a prohibited substance:

1. First Offense.

a. The student-athlete will be required to meet with the Athletics Director within forty-eight (48) hours of notice of the positive test. Unless there are extenuating circumstances, as determined by the Athletics Director, in the event the student-athlete fails to meet with the Athletics Director in a timely manner, he/she will be prohibited from working-out, practicing, or participating in competition until a meeting is held.

b. The student-athlete will, in the presence of the Athletics Director or the Director of Wellness or their designer, and the head coach or supervisor, notify their parents or legal guardians of the incident by telephone call or in person. The parents or legal guardians will also be informed of the corrective actions being taken via certified letter.

c. The student-athlete may be scheduled for testing each time drug testing is performed for a period of not less than twelve (12) months, and for non-random drug testing thereafter as deemed necessary by the Director of Wellness.

d. The student-athlete will be referred for mandatory assessment, counseling and treatment as determined by the Director of Wellness. If the student-athlete fails to cooperate, he/she may be suspended or dismissed from the team.

2. Second Offense.

a. The student-athlete will be required to meet with the Athletics Director within forty-eight (48) hours of notice of the positive test. Unless there are extenuating circumstances, as determined by the Athletics Director, in the event the student-athlete fails to meet with the Athletics Director in a timely manner, he/she will be prohibited from working-out, practicing, or participating in competition until a meeting is held.

b. The student-athlete will, in the presence of the Athletics Director or the Director of Wellness or their designer, and the head coach or supervisor, notify their parents or legal guardians of the incident by telephone call or in person. The parents or legal guardians will also be informed of the corrective actions being taken via certified letter.

c. The student-athlete may be scheduled for testing each time drug testing is performed for a period of not less than eighteen (18) months, and for non-random drug testing thereafter as deemed necessary by the Director of Wellness.

d. The student-athlete will be referred for mandatory assessment, counseling and treatment as determined by the Director of Wellness. If the student-athlete fails to cooperate, he/she may be suspended or dismissed from the team.

e. The student-athlete will be withheld from twenty-five (25%) percent of the team's season competition schedule, including post-season events (e.g., SEC Championships, NCAA Championships, and bowl games), beginning with the following consecutive events in the schedule. When calculating the withholding from competition, fractional numbers are always rounded to the next whole number. The student-athlete may practice but will be prohibited from dressing in uniform for a competition, traveling with the team, or being present in the team area on the day of competition.

3. Third Offense.

a. The student-athlete will be required to meet with the Athletics Director within forty-eight (48) hours of notice of the positive test.
b. The student-athlete will, in the presence of the Athletics Director or the Director of Wellness or their designer, and the head coach or supervisor, notify their parents or legal guardians of the incident by telephone call or in person. The parents or legal guardians will also be informed of the corrective actions being taken via certified letter.
c. The student-athlete will be referred for assessment, counseling, and treatment at their own expense.
d. The student-athlete will be dismissed from intercollegiate athletics at the University of South Carolina.
e. The student-athlete will forfeit further financial aid from the Athletics Department.

G. Self-Referral Program

1. *General*

Consistent with the educational mission of the Wellness Program, the Athletics Department has adopted this Self-Referral Program in order to encourage student-athletes to voluntarily seek

assistance for drug or alcohol use or abuse. The Self-Referral Program is a six (6) week program designed to allow student-athletes, without fear of disciplinary action, to initiate the process by which drug or alcohol use or abuse issues are identified, confronted, and addressed through voluntary participation in assessment, medical evaluation, counseling, and education. Student-athletes may avail themselves of the Self-Referral Program one-time during their association with the Athletics Department. Student-athletes may not self-refer for assistance regarding the use of anabolic steroids and similar growth enhancing or performance enhancing substances.

2. *Procedure*

   The Self-Referral Program shall be conducted as follows:

   a. The student-athlete shall advise the Director of Wellness or the Director of Sports Medicine of their desire to self-refer for assistance with drug or alcohol use or abuse. Such notification must be made before the student-athlete is notified that the student-athlete has been selected for a drug test pursuant to the Wellness Program.
   b. The student-athlete shall identify the drugs or alcohol used for which assistance is requested.
   c. The student-athlete shall submit to an immediate drug test to determine the presence and concentration of drugs or alcohol in the student-athlete's system. If the drug test reveals the presence of a prohibited substance not disclosed by the student-athlete at the time of self-referral, the student-athlete shall be automatically removed from the Self-Referral Program and subject to corrective actions as set forth in the Wellness Program.
   d. The Director of Wellness shall meet with the student-athlete, conduct a medical evaluation, as appropriate, and determine the characteristics of their drug or alcohol use or abuse. Thereafter, the student-athlete shall be required to submit to periodic drug tests as determined by the Director of Wellness so that the level of drugs or alcohol in the student-athlete's system can be continuously monitored. If any drug test reveals the presence of a prohibited substance not disclosed by the student-athlete at the time of self-referral, the student-athlete shall be automatically removed from the Self-Referral Program and subject to corrective actions as set forth in the Wellness Program.
   e. The Director of Wellness shall refer the student-athlete to health care professionals for assessment, counseling and education as deemed necessary to address issues regarding the student-athlete's drug or alcohol use or abuse.
   f. The maximum period of time that a student-athlete can remain in the Self-Referral Program is six (6) weeks. The Director of Wellness may release a student-athlete from the Self-Referral Program at any time once the student-athlete has completed all required counseling and education, and it is determined that the drugs or alcohol in question are no longer present in the student-athlete's system. The Director of Wellness may remove a student-athlete from the Self-Referral Program at any time if it is determined that the student-athlete is not fulfilling their obligations under the Self-Referral Program or that the student-athlete is continuing to use the prohibited substance for which the student-athlete self-referred.
   g. While participating in the Self-Referral Program, a student-athlete shall not be subject to drug testing as otherwise required by the Wellness Program unless there is reasonable cause to believe that the student-athlete may be using a prohibited substance not disclosed by the student-athlete at the time of self-referral, and shall not be subject to corrective action for positive test results for prohibited substances for which the student-athlete self-referred.
   h. A student-athlete's participation in the Self-Referral Program shall be confidential. However, student-athletes are encouraged to advise their head coach or supervisor and parents or legal guardians of their decision to participate in the Self-Referral Program.

H. Supplements and Prescription Medications

Many supplements and prescription medications are available today that may be banned by either the NCAA or national or international amateur athletics associations or federations. It is the responsibility of the student-athlete to be aware of banned substances and to understand that the use of any banned supplement or prescription medication may result in sanctions including but not limited to preclusion from athletics competition and loss of scholarship. Athletics Department staff or physicians will not

prescribe a banned supplement or medication unless it is medically indicated and only after advising the student-athlete that such medication is banned.

I. Miscellaneous

1. Nothing contained in this Wellness Program shall prohibit the head coach of a student-athlete who has tested positive for a prohibited substance from taking such additional corrective or disciplinary action as he/she deems appropriate, including but not limited to suspending or dismissing the student-athlete from the team.

2. The Athletics Department reserves the right to change the terms and conditions of this Wellness Program at any time upon reasonable notice to the student-athletes.

3. This Wellness Program shall be effective as of August 1, 2007 and shall supersede all previous Wellness Program documents.

EXHIBIT 1

For purposes of determining positive test results for prohibited substances and alcohol, the following confirmation threshold levels shall be utilized:

Prohibited Substance	Screen Cutoff	Confirmation Cutoff
Alcohol:	0.04g/dL 500ng/mL*	
Amphetamines:	1000 ng/mL	100 ng/mL
Ecstasy:	250 ng/mL	100 ng/mL
Amphetamine Class:	5000 ng/mL	5000 ng/mL
Cannabinoids (Marijuana):	20 ng/mL	5 ng/mL
Cocaine Metabolite:	100 ng/mL	50 ng/mL
Ephedrine:	5000 ng/mL	5000 ng/mL
Masking Agents & Diuretics:	Presence	Presence
Opiates:	100 ng/mL	100 ng/mL
Nitrites:	200 mcg/mL	200 mcg/mL
Chromate:	50 mcg/mL	50 mcg/mL
Phencyclidine (PCP Angel Dust):	10 ng/mL	10 ng/mL
Anabolic Steroids:	Presence	Presence

*EtG

The Athletics Department reserves the right to modify the confirmation threshold levels utilized to determine positive test results for prohibited substances and alcohol.

VIII. GENERAL HEALTH AND SAFETY STANDARDS

A. Student Health Insurance/Student Health Center

Student health insurance is available through the USC Student Health and Wellness Center. USC Healthcare fee coverage for students can be found within the same link.

B. Athletic Training Liability Insurance

Students will pay for their liability insurance through course fees. This insurance will ONLY cover GAs/Interns for USC clinical experiences assigned by the USC AT Program Director. Students engaging in clinical education experiences outside of their contracted clinical site must send details, including dates, times, location, and a copy of the EAP, to Dr. Winkelmann via email 24 hours prior to the event. If outside PRN events do not provide these resources, it will not be covered/counted as clinical education.

C. Communicable Disease Policy

All GAs/Interns are reminded that while it may seem admirable to carry on when one is sick, this creates an environment for infection to spread. If an athletic training student is ill, the student will report to the Student Health and Wellness Center (803-777-3175) or a physician of their choice. The physician will determine the appropriate treatment and the amount of time the student will be absent from clinical activity.

If the student has a communicable disease, the student will notify the PPAT Program Director and Primary Supervisor with whom they are working as soon as possible via phone or e-mail. The GA/Intern will be restricted from participating in a clinical experience until written notice is provided by a physician that she/he is no longer infectious. Any GA/Intern displaying signs and symptoms of a communicable disease and/or running a fever above 100 degrees will be asked to leave the clinical site and see a physician.

GAs/Interns are responsible for notifying the Office of Student Affairs (803-777-4172) if they contract a communicable and/or contagious disease which presents a significant degree of health risk to other members of the University community.

D. Blood Borne Pathogens Exposure Control Plan

As a healthcare professional, you are exposed to infectious diseases that are borne by blood and other bodily fluids. Following OSHA guidelines, these regulations are designed to protect those who might come in contact with another's bodily fluids and should be followed throughout your clinical experience. Annual blood-borne pathogens training will occur prior to the beginning of your clinical experience. All students are required to complete this training. Passing a quiz is required, and proof of completion must be submitted to the AT program director. It is essential that you become knowledgeable about your protection and adhere to the following:

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

OSHA requires employers to perform an exposure determination concerning which employees may incur occupational exposure to blood or other potentially infectious materials.

The exposure determination is made without regard to the use of personal protective equipment (i.e., employees are considered to be exposed even if they wear personal protective equipment).
This exposure determination affects all full-time athletic trainers on staff, graduate assistants, and athletic training students at USC.

OSHA also requires that this plan include a schedule and method of implementation for the various requirements of the standard. The following complies with this requirement:

Universal Precautions will be observed at this facility in order to prevent contact with blood, blood products, or other potentially infectious materials.

All blood, blood products, or other potentially infectious material will be considered infectious regardless of the perceived status of the source or source individual.

Where occupational exposure remains after the institution of these controls, personal protective equipment shall be used

E. Blood Borne Pathogens

Blood-borne pathogens are disease-causing microorganisms that can be potentially transmitted through blood contact. The blood-borne pathogens of concern include (but are not limited to) the hepatitis B virus (HBV) and the human immunodeficiency virus (HIV). Infections with these (HBV, HIV) viruses have increased throughout the last decade among all portions of the general population. These diseases have the potential for catastrophic health consequences. Knowledge and awareness of appropriate preventive strategies are essential for all members of society, including student-athletes.

The particular blood-borne pathogens HBV and HIV are transmitted through sexual contact, direct contact with infected blood or blood components, and perinatally from mother to baby. In addition, behaviors such as body piercing and tattoos may place student-athletes at some increased risk for contracting HBV, HIV or Hepatitis C.

The emphasis for the student-athlete and the athletics health-care team should be placed predominately on education and concern about these traditional routes of transmission from behaviors off the athletics field. Experts have concurred that the risk of transmission on the athletics field is minimal.

F. Hepatitis B Virus (HBV)

HBV is a blood-borne pathogen that can cause infection of the liver. Many of those infected will have no symptoms or a mild flu-like illness. One-third will have severe hepatitis, which will cause the death of one percent of that group. Approximately 300,000 cases of acute HBV infection occur in the United States every year, mostly in adults. Five to 10 percent of acutely infected adults become chronically infected with the virus (HBV carriers). Currently in the United States there are approximately one million chronic carriers. Chronic complications of HBV infection include cirrhosis of the liver and liver cancer.

Individuals at the greatest risk for becoming infected include those practicing risky behaviors of having unprotected sexual intercourse or sharing intravenous (IV) needles in any form. There is also evidence that household contacts with chronic HBV carriers can lead to infection without having had sexual intercourse or sharing of IV needles. These rare instances probably occur when the virus is transmitted through unrecognized-wound or mucous-membrane exposure.
The incidence of HBV in student-athletes is presumably low, but those participating in risky behavior off the athletics field have an increased likelihood of infection (just as in the case of HIV). An effective vaccine to prevent HBV is available and recommended for all college students by the American College Health Association. Numerous other groups have recognized the potential benefits of universal vaccination of the entire adolescent and young-adult population.

G. HIV (AIDS Virus)

The Acquired Immunodeficiency Syndrome (AIDS) is caused by the human immunodeficiency virus (HIV), which infects cells of the immune system and other tissues, such as the brain. Some of those infected with HIV will remain asymptomatic for many years. Others will more rapidly develop manifestations of HIV disease (i.e., AIDS). Some experts believe virtually all people infected with HIV eventually will develop AIDS and that AIDS is uniformly fatal. In the United States, adolescents are at

special risk for HIV infection. This age group is one of the fastest-growing groups of new HIV infections. Approximately 14 percent of all new HIV infections occur in persons aged between 12 to 24 years. The risk of infection is increased by having unprotected sexual intercourse, and the sharing of IV needles in any form. Like HBV, there is evidence that suggests that HIV has been transmitted in household-contact settings without sexual contact or IV needle sharing among those household contacts. As with HBV, these rare instances probably occurred through unrecognized exposure to wounds or mucous membranes.

H. Comparison of HBV/HIV

Hepatitis B is a much more "sturdy/ durable" virus than HIV and is much more concentrated in blood. HBV has a much more likely transmission with exposure to infected blood; particularly parenteral (needle-stick) exposure, but also exposure to open wounds and mucous membranes. There has been one well-documented case of transmission of HBV in the athletics setting, among sumo wrestlers in Japan. There are no validated cases of HIV transmission in the athletics setting. The risk of transmission for either HBV or HIV on the field is considered minimal; however, most experts agree that the specific epidemiologic and biologic characteristics of the HBV virus make it a realistic concern for transmission in sports with sustained close physical contact, such as wrestling. HBV is considered to have a potentially higher risk of transmission than HIV.

I. Testing of Student-Athletes

Routine mandatory testing of student-athletes for either HBV or HIV for participation purposes is not recommended. Individuals who desire voluntary testing based on personal reasons and risk factors, however, should be assisted in obtaining such services by appropriate campus or public-health officials. Student-athletes who engage in high-risk behavior are encouraged to seek counseling and testing. Knowledge of one's HBV and HIV infection is helpful for a variety of reasons, including the availability of potentially effective therapy for asymptomatic patients, and modification of behavior, which can prevent transmission of the virus to others. Appropriate counseling regarding exercise and sports participation also can be accomplished.

J. Participation by the Student-Athlete with Hepatitis B (HBV) Infection

Individual's Health—In general, acute HBV should be viewed just as other viral infections. Decisions regarding ability to play are made according to clinical signs and symptoms, such as fatigue or fever. There is no evidence that intense, highly competitive training is a problem for the asymptomatic HBV carrier (acute or chronic) without evidence of organ impairment. Therefore, the simple presence of HBV infection does not mandate removal from play.

Disease Transmission—The student-athlete with either acute or chronic HBV infection presents limited risk of disease transmission in most sports. However, the HBV carrier presents a more distinct transmission risk than the HIV carrier (see previous discussion of comparison of HBV to HIV) in sports with higher potential for blood exposure and sustained close body contact. Within the NCAA, wrestling is the sport that best fits this description.

The specific epidemiologic and biologic characteristics of hepatitis B virus form the basis for the following recommendation: If a student-athlete develops acute HBV illness, it is prudent to consider removal of the individual from combative, sustained close-contact sports (e.g., wrestling) until loss of infectivity is known. (The best marker for infectivity is the HBV antigen, which may persist up to 20 weeks in the acute stage). Student-athletes in such sports who develop chronic HBV infections (especially those who are e-antigen positive) should probably be removed from competition indefinitely, due to the small but realistic risk of transmitting HBV to other student-athletes.

K. Participation of the Student-Athlete with HIV

Individual's Health—In general, the decision to allow an HIV positive student-athlete to participate in intercollegiate athletics should be made on the basis of the individual's health status. If the student-athlete is asymptomatic and without evidence of deficiencies in immunologic function, then the presence of HIV infection in and of itself does not mandate removal from play.

The team physician must be knowledgeable in the issues surrounding the management of HIV-infected student-athletes. HIV must be recognized as a potentially chronic disease, frequently affording the affected individual many years of excellent health and productive life during its natural history. During this period of preserved health, the team physician may be involved in a series of complex issues surrounding the advisability of continued exercise and athletics competition.

The decision to advise continued athletics competition should involve the student-athlete, the student athlete's personal physician and the team physician. Variables to be considered in reaching the decision include the student-athlete's current state of health and the status of his/ her HIV infection, the nature and intensity of their training, and potential contribution of stress from athletics competition to deterioration of their health status.

There is no evidence that exercise and training of moderate intensity is harmful to the health of HIV-infected individuals. What little data that exists on the effects of intense training on the HIV-infected individual demonstrates no evidence of health risk. However, there is no data looking at the effects of long-term intense training and competition at an elite, highly competitive level on the health of the HIV-infected student-athlete.

Disease Transmission—Concerns of transmission in athletics revolve around exposure to contaminated blood through open wounds or mucous membranes. Precise risk of such transmission is impossible to calculate but epidemiologic and biologic evidence suggests that it is extremely low (see section on comparison of HBV/HIV). There have been no validated reports of transmission of HIV in the athletics setting[3,13]. Therefore, there is no recommended restriction of student-athletes merely because they are infected with HIV, although one court has upheld the exclusion of an HIV-positive athlete from the contact sport of karate[19].

L. Administrative Issues

The identity of individuals infected with a blood-borne pathogen must remain confidential. Only those persons in whom the infected student-athlete chooses to confide have a right to know about this aspect of the student-athlete's medical history. This confidentiality must be respected in every case and at all times by all college officials, including coaches, unless the student-athlete chooses to make the fact public.

M. Athletics Healthcare Responsibilities

The following recommendations are designed to further minimize risk of blood-borne pathogens and other potentially infectious organisms' transmission in the context of athletics events and to provide treatment guidelines for caregivers. In the past, these guidelines were referred to as "Universal (blood and body fluid) Precautions." Over time, the recognition of "Body Substance Isolation," or that infectious diseases may also be transmitted from moist body substances, has led to a blending of terms now referred to as "Standard Precautions." Standard precautions apply to blood, body fluids, secretions, and excretions, except sweat, regardless of whether or not they contain visible blood. These guidelines, originally developed for healthcare, have additions or modifications relevant to athletics. They are divided into two sections — the care of the student-athlete, and cleaning and disinfection of environmental surfaces.

Care of the Athlete:

1. All personnel involved in sports who care for injured or bleeding student-athletes should be professionally trained in first aid and standard precautions.
2. Assemble and maintain equipment and/or supplies for treating injured/ bleeding athletes. Items may include Personal Protective Equipment (PPE) [minimal protection includes gloves, goggles, mask, fluid-resistant gown if chance of splash or splatter]; antiseptics; antimicrobial wipes; bandages or dressings; medical equipment needed for treatment; appropriately labeled "sharps" container for disposal of needles, syringes and scalpels; and waste receptacles appropriate for soiled equipment, uniforms, towels and other waste.

3. Pre-event preparation includes proper care for wounds, abrasions or cuts that may serve as a source of bleeding or as a port of entry for blood-borne pathogens or other potentially infectious organisms. These wounds should be covered with an occlusive dressing that will withstand the demands of competition. Likewise, care providers with healing wounds or dermatitis should have these areas adequately covered to prevent transmission to or from a participant. Student-athletes may be advised to wear more protective equipment on high-risk areas, such as elbows and hands.
4. The necessary equipment and/or supplies important for compliance with standard precautions should be available to caregivers. These supplies include appropriate gloves, disinfectant bleach, antiseptics, designated receptacles for soiled equipment and uniforms, bandages and/or dressings, and a container for appropriate disposal of needles, syringes, or scalpels.
5. When a student-athlete is bleeding, the bleeding must be stopped, and the open wound covered with a dressing sturdy enough to withstand the demands of activity before the student-athlete may continue participation in practice or competition. Current NCAA policy mandates the immediate, aggressive treatment of open wounds or skin lesions that are deemed potential risks for transmission of disease. Participants with active bleeding should be removed from the event as soon as is practical. Return to play is determined by appropriate medical staff personnel and/or sport officials. Any participant whose uniform is saturated with blood must change their uniform before return to participation.
6. During an event, early recognition of uncontrolled bleeding is the responsibility of officials, student-athletes, coaches, and medical personnel. In particular, student-athletes should be aware of their responsibility to report a bleeding wound to the proper medical personnel.
7. Personnel managing an acute blood exposure must follow the guidelines for standard precaution. Gloves and other PPE, if necessary, should be worn for direct contact with blood or other body fluids. Gloves should be changed after treating each individual participant. After removing gloves, hands should be washed.
8. If blood or body fluids are transferred from an injured or bleeding student-athlete to the intact skin of another athlete, the event must be stopped, the skin cleaned with antimicrobial wipes to remove gross contaminate, and the athlete instructed to wash with soap and water as soon as possible. NOTE: Chemical germicides intended for use on environmental surfaces should never be used on student-athletes.
9. Any needles, syringes or scalpels should be carefully disposed of in an appropriately labeled "sharps" container. Medical equipment, bandages, dressings, and other waste should be disposed of according to facility protocol. During events, uniforms or other contaminated linens should be disposed of in a designated container to prevent contamination of other items or personnel. At the end of competition, the linen should be laundered and dried according to facility protocol; hot water at temperatures of 71°C (160°F) for 25-minute cycles may be used.

Care of Environmental Surfaces:

1. All individuals responsible for cleaning and disinfection of blood spills or other potentially infectious materials (OPIM) should be trained on procedures and the use of standard precautions.
2. Assemble and maintain supplies for cleaning and disinfection of hard surfaces contaminated by blood or OPIM. Items include Personal Protective Equipment (PPE) [gloves, goggles, mask, fluid-resistant gown if chance of splash or splatter]; supply of absorbent paper towels or disposable cloths; red plastic bag with the biohazard symbol on it or other waste receptacle according to facility protocol; and properly diluted tuberculocidal disinfectant or freshly prepared bleach solution diluted (1:100 bleach/water ratio).
3. Put on disposable gloves.
4. Remove visible organic material by covering with paper towels or disposable cloths. Place soiled towels or cloths in red bag or other waste receptacle according to facility protocol. (Use additional towels or cloths to remove as much organic material as possible from the surface and place in the waste receptacle.)
5. Spray the surface with a properly diluted chemical germicide used according to manufacturer's label recommendations for disinfection, and wipe clean. Place soiled towels in waste receptacle.

6. Spray the surface with either a properly diluted tuberculocidal chemical germicide or a freshly prepared bleach solution diluted 1:100 and follow manufacturer's label directions for disinfection; wipe clean. Place towels in waste receptacle.
7. Remove gloves and wash hands.
8. Dispose of waste according to facility protocol.

Final Notes:

1. All personnel responsible for caring for bleeding individuals should be encouraged to obtain a Hepatitis B (HBV) vaccination.
2. Latex allergies should be considered. Non-latex gloves may be used for treating student-athletes and the cleaning and disinfection of environmental surfaces.
3. Occupational Safety and Health Administration (OSHA) standards for Bloodborne Pathogens (Standard #29 CFR 1910.1030) and Hazard Communication (Standard #29 CFR 1910.1200) should be reviewed for further information.

   Member institutions should ensure that policies exist for orientation and education of all health-care workers on the prevention and transmission of blood-borne pathogens. Additionally, in 1992, the Occupational Safety and Health Administration (OSHA) developed a standard directed to eliminating or minimizing occupational exposure to blood-borne pathogens. Many of the recommendations included in this guideline are part of the standard. Each member institution should determine the applicability of the OSHA standard to its personnel and facilities.

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APPENDICES

A. NATA Code of Ethics

Preamble

The National Athletic Trainers' Association Code of Ethics states the principles of ethical behavior that should be followed in the practice of athletic training. It is intended to establish and maintain high standards and professionalism for the athletic training profession. The principles do not cover every situation encountered by the practicing athletic trainer but are representative of the spirit with which athletic trainers should make decisions. The principles are written generally; the circumstances of a situation will determine the interpretation and application of a given principle and of the Code as a whole. When a conflict exists between the Code and the law, the law prevails.

The National Athletic Trainers' Association respects and values diversity amongst its members and patients served. Our members work respectfully and effectively with diverse patient populations in varied healthcare environments. The NATA prohibits discrimination based on race, ethnicity, color, national origin, citizenship status, religion (creed), sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, military status, family/parental status, income and socioeconomic status, political beliefs, or reprisal or retaliation for prior civil rights activity, or other unlawful basis, in any program or activity conducted or funded by the NATA (VATA, 2020).

Important Professional Values (PV) shared by the NATA membership include: 1) Caring & Compassion, 2) Integrity, 3) Respect, 4) Competence, and 5) Accountability. These shared PV underpin the NATA Code of Ethics, motivate honorable interpersonal behaviors, and conduct in member's interactions with all persons.

The Appendix to the Code of Ethics reveals a definition and sample behaviors for each shared PV.

PRINCIPLE 1. IN THE ROLE OF AN ATHLETIC TRAINER, MEMBERS SHALL PRACTICE WITH COMPASSION, RESPECTING THE RIGHTS, WELL-BEING, AND DIGNITY OF OTHERS

(PRINCIPLE 1 is associated with the PV of Respect, Caring & Compassion, and Competence.)

- **1.1** Members shall act in a respectful and appropriate manner to all persons regardless of race, religion, age, sex, ethnic or national origin, disability, health status, socioeconomic status, sexual orientation, or gender identity and expression.
- **1.2** Member's duty to the patient is the first concern, and therefore members are obligated to place the well-being and long-term well-being of their patient above other stakeholders to provide competent care in all decisions, and advocate for the best medical interest and safety of their patient as delineated by professional statements and best practices.
- **1.3** Members shall preserve the confidentiality of privileged information and shall not release or otherwise publish in any form, including social media, such information to a third party not involved in the patient's care without a release unless required by law.

PRINCIPLE 2. MEMBERS SHALL COMPLY WITH THE LAWS AND REGULATIONS GOVERNING THE PRACTICE OF ATHLETIC TRAINING, NATIONAL ATHLETIC TRAINERS' ASSOCIATION (NATA) MEMBERSHIP STANDARDS, AND THE NATA CODE OF ETHICS

(PRINCIPLE 2 is associated with the PV of Accountability.)

- **2.1.** Members shall comply with applicable local, state, federal laws, and any state athletic training practice acts.
- **2.2.** Members shall understand and uphold all NATA Standards and the Code of Ethics.
- **2.3.** Members shall refrain from, and report illegal or unethical practices related to athletic training.
- **2.4.** Members shall cooperate in ethics investigations by the NATA, state professional licensing/regulatory boards, or other professional agencies governing the athletic training profession. Failure to fully cooperate in an ethics investigation is an ethical violation.

2.5. Members must not file, or encourage others to file, a frivolous ethics complaint with any organization or entity governing the athletic training profession such that the complaint is unfounded or willfully ignore facts that would disprove the allegation(s) in the complaint.

2.6. Members shall refrain from substance and alcohol abuse. For any member involved in an ethics proceeding with NATA and who, as part of that proceeding is seeking rehabilitation for substance or alcohol dependency, documentation of the completion of rehabilitation must be provided to the NATA Committee on Professional Ethics as a requisite to complete a NATA membership reinstatement or suspension process.

PRINCIPLE 3. MEMBERS SHALL MAINTAIN AND PROMOTE HIGH STANDARDS IN THEIR PROVISION OF SERVICES

(PRINCIPLE 3 is associated with the PV of Caring & Compassion, Accountability.)

3.1. Members shall not misrepresent, either directly or indirectly, their skills, training, professional credentials, identity, or services.

3.2. Members shall provide only those services for which they are qualified through education or experience, and which are allowed by the applicable state athletic training practice acts and other applicable regulations for athletic trainers.

3.3. Members shall provide services, make referrals, and seek compensation only for those services that are necessary and are in the best interest of the patient as delineated by professional statements and best practices.

3.4. Members shall recognize the need for continuing education and participate in educational activities that enhance their skills and knowledge and shall complete such educational requirements necessary to continue to qualify as athletic trainers under the applicable state athletic training practice acts.

3.5. Members shall educate those whom they supervise in the practice of athletic training about the Code of Ethics and stress the importance of adherence.

3.6. Members who are researchers or educators must maintain and promote ethical conduct in research and educational activities.

PRINCIPLE 4. MEMBERS SHALL NOT ENGAGE IN CONDUCT THAT COULD BE CONSTRUED AS A CONFLICT OF INTEREST, REFLECTS NEGATIVELY ON THE ATHLETIC TRAINING PROFESSION, OR JEOPARDIZES A PATIENT'S HEALTH AND WELL-BEING.

(PRINCIPLE 4 is associated with the PV of Respect.)

4.1. Members should conduct themselves personally and professionally in a manner, which reflects the shared professional values, which does not compromise their professional responsibilities or the practice of athletic training.

4.2. All NATA members, whether current or past, shall not use the NATA logo or AT logo in the endorsement of products or services, or exploit their affiliation with the NATA in a manner that reflects badly upon the profession.

4.3. Members shall not place financial gain above the patient's well-being and shall not participate in any arrangement that exploits the patient.

4.4. Members shall not, through direct or indirect means, use information obtained in the course of the practice of athletic training to try and influence the score or outcome of an athletic event, or attempt to induce financial gain through gambling.

4.5. Members shall not provide or publish false or misleading information, photography, or any other communications in any media format, including on any social media platform, related to athletic training that negatively reflects the profession, other members of the NATA, NATA officers, and the NATA office.

B. Athletic Training's Shared Professional Values

Established from research conducted by the NATA Professional Responsibility in Athletic Training Committee in 2020, the following are the five shared professional values of athletic training.

Caring & Compassion is an intense concern and desire to help improve the welfare of another.

Sample behaviors include:

1) Listening for understanding and a readiness to help.

2) Focusing on achieving the greatest well-being and the highest potential for others.
3) Spending the time needed to provide quality care.

Integrity is a commitment that is internally motivated by an unyielding desire to do what is honest and right.

Sample behaviors include:

1) Providing truthful, accurate and relevant information.
2) Abiding by the rules, regulations, laws and standards of the profession.
3) Using applicable professional standards and established policies and procedures when acting or making decisions.

Respect is the act of imparting genuine and unconditional appreciation and value for all persons.

Sample behaviors include:

1) Engaging in active listening when communicating with others.
2) Acknowledging and expressing concern for others and their well-being.
3) Acting in light of the belief that the person has value.

Competence is the ability to perform a task effectively with desirable outcomes.

Sample behaviors include:

1) Thinking critically, demonstrating ethical sensitivity, committing to evidence-based practice, delivering quality skills and effective collaboration.
2) Making sound decisions while demonstrating integrity.
3) Ongoing continuous quality assessment and improvement.

Accountability is a willingness to be responsible for and answerable to one's own actions.

Sample behaviors include:

1) Acknowledging and accepting the consequences of one's own actions.
2) Adhering to laws, codes, practice acts and standards that govern professional practice.
3) Assuming responsibility for learning and change.

C. BOC Professional Standards of Practice
   a. https://www.bocatc.org/athletic-trainers/maintain-certification/standards-of-professional-practice/standards-of-professional-practice

D. Carolinian Creed

The community of scholars at the University of South Carolina is dedicated to personal and academic excellence. Choosing to join the community obligates each member to a code of civilized behavior.

As a Carolinian...

I will practice personal and academic integrity.

I will respect the dignity of all persons.

I will respect the rights and property of others.

I will discourage bigotry, while striving to learn from differences in people, ideas and opinions.

I will demonstrate concern for others, their feelings, and their need for conditions which support their work and development.

Allegiance to these ideals requires each Carolinian to refrain from and discourage behaviors which threaten the freedom and respect every individual deserves

ACKNOWLEDGEMENT OF USC POST-PROFESSIONAL AT POLICIES & PROCEDURES

I have received, read and reviewed the University of South Carolina (USC) Athletic Training Program (AT Program) Policy and Procedures listed below and have been appropriately informed and trained on all Policies and Procedures integrated into the AT Program. I understand that I have access to the Policy and Procedures for the AT Program through Blackboard at any time during my tenure within the AT Program.

POST PROFESSIONAL ATHLETIC TRAINING PROGRAM POLICY AND PROCEDURE HANDBOOK

My signature indicates that I have received access to read and review and agree to abide by all the policies and procedures of the AT Program. I understand that if I violate any of the Policy and Procedures of the USC AT Program, I am subject to disciplinary action, which may include dismissal from the AT Program and forfeit of all tuition, stipend and fees.

Name Printed, PPAT Student/Intern	*Signature, PPAT Student/Intern*	*Date*

ACKNOWLEDGEMENT OF RISK

My signature indicates that I have received, read, reviewed, and agree to abide by all the policies and procedures associated with the Acknowledgment of Risk for participation in the AT Program. I understand that if I violate any of the Policy and Procedures of the USC AT Program, I am subject to disciplinary action, which may include dismissal from the AT Program and forfeit of all tuition, stipend, and fees.

Name Printed, PPAT Student/Intern	*Signature, PPAT Student/Intern*	*Date*

CLINICAL EDUCATION TIME-OFF REQUEST POLICY

My signature indicates that I have received, read, reviewed, and agree to abide by all the policies and procedures associated with the Clinical Education Experience Hours Requirement of the AT Program. I understand that if I violate any of the Policy and Procedures of the USC AT Program, I am subject to disciplinary action, which may include dismissal from the AT Program and forfeit of all tuition, stipend, and fees.

Name Printed, PPAT Student/Intern	*Signature, PPAT Student/Intern*	*Date*

FERPA, HIPAA, & CONFIDENTIALITY POLICY

My signature indicates that I have received, read, reviewed, and agree to abide by all the policies and procedures with the FERPA, HIPAA, and Confidentiality Policy of the AT Program. I understand that if I violate any of the Policy and Procedures of the USC AT Program, I am subject to disciplinary action, which may include dismissal from the AT Program and forfeit of all tuition and fees.

Name Printed, PPAT Student/Intern	*Signature, PPAT Student/Intern*	*Date*

ACKNOWLEDGEMENT OF USC POST-PROFESSIONAL AT POLICIES & PROCEDURES (CONTINUE)

PROFESSIONAL COMMUNICATION POLICY

My signature indicates that I have received, read, reviewed, and agree to abide by all the policies and procedures associates with the Professional Communication Policy of the AT Program. I understand that if I violate any of the Policy and Procedures of the USC AT Program, I am subject to disciplinary action, which may include dismissal from the AT Program and forfeit of all tuition, stipend and fees.

Name Printed, PPAT Student/Intern	*Signature, PPAT Student/Intern*	*Date*

APPROPRIATE PROFESSIONAL BEHAVIOR POLICY

My signature indicates that I have received, read, reviewed, and agree to abide by all the policies and procedures associates with the Appropriate Professional Behavior Policy of the AT Program. I understand that if I violate any of the Policy and Procedures of the USC AT Program, I am subject to disciplinary action, which may include dismissal from the AT Program and forfeit of all tuition, stipend and fees.

Name Printed, PPAT Student/Intern	*Signature, PPAT Student/Intern*	*Date*

SOCIAL MEDIA POLICY

My signature indicates that I have received, read, reviewed, and agree to abide by all the policies and procedures associated with the Social Media Policy of the AT Program. I understand that if I violate any of the Policy and Procedures of the USC AT Program, I am subject to disciplinary action, which may include dismissal from the AT Program and forfeit of all tuition, stipend and fees.

Name Printed, PPAT Student/Intern	*Signature, PPAT Student/Intern*	*Date*

PROFESSIONAL APPEARANCE POLICY

My signature indicates that I have received, read, reviewed, and agree to abide by all the policies and procedures associates with the Professional Appearance Policy of the AT Program. I understand that if I violate any of the Policy and Procedures of the USC AT Program, I am subject to disciplinary action, which may include dismissal from the AT Program and forfeit of all tuition, stipend and fees.

Name Printed, PPAT Student/Intern	*Signature, PPAT Student/Intern*	*Date*

ACKNOWLEDGMENT OF USC POST-PROFESSIONAL AT POLICIES & PROCEDURES (CONTINUE)

CLINICAL EDUCATION SITE RELATIONSHIP POLICY

My signature indicates that I have received, read, reviewed, and agree to abide by all the policies and procedures associated with the Clinical Education Site Relationship Policy of the AT Program. I understand that if I violate any of the Policy and Procedures of the USC AT Program, I am subject to disciplinary action, which may include dismissal from the AT Program and forfeit of all tuition, stipend and fees.

Name Printed, PPAT Student/Intern	*Signature, PPAT Student/Intern*	*Date*

BLOODBORNE PATHOGENS TRAINING

My signature indicates that I have received, read, reviewed, completed, and agree to abide by all the policies and procedures associated with Blood Bourne Pathogens Training. I understand that if I violate any of the Policy and Procedures of the USC AT Program, I am subject to disciplinary action, which may include dismissal from the AT Program and forfeit of all tuition, stipend and fees.

Name Printed, PPAT Student/Intern	*Signature, PPAT Student/Intern*	*Date*

WELLNESS PROGRAM

My signature indicates that I have received, read, reviewed, and agree to abide by all the policies and procedures associated with the Wellness Program of the AT Program and USC Athletics. I understand that if I violate any of the Policy and Procedures of the USC AT Program, I am subject to disciplinary action, which may include dismissal from the AT Program and forfeit of all tuition, stipend and fees.

Name Printed, PPAT Student/Intern	*Signature, PPAT Student/Intern*	*Date*

CRIMINAL BACKGROUND CHECK AND REPORTING POLICY

My signature indicates that I have received, read, reviewed, and agree to abide by all the policies and procedures associated with the Criminal Background Check Policy of the AT Program. I understand that if I violate any of the Policy and Procedures of the USC AT Program, I am subject to disciplinary action, which may include dismissal from the AT Program and forfeit of all tuition, stipend and fees.

Name Printed, PPAT Student/Intern	*Signature, PPAT Student/Intern*	*Date*

REPORTING CONFLICT OF INTEREST (POLICY ON DISCLOSURE)

My signature indicates that I have received, read, reviewed, and agree to abide by all the policies and procedures associated with the Conflict of Interest and Disclosure Policy of the AT Program. I understand that if I violate any of the Policy and Procedures of the USC AT Program, I am subject to disciplinary action, which may include dismissal from the AT Program and forfeit of all tuition, stipend and fees.

Name Printed, PPAT Student/Intern	*Signature, PPAT Student/Intern*	*Date*