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ATEP Contact Information

Contact Information

Athletic Training Education Program
Illinois State University
School of Kinesiology & Recreation
McCormick Hall, Campus Box 5120
Normal, IL 61790-5120

ATEP Faculty

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Email</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jeremy Hawkins, Ph.D., ATC</td>
<td>Program Director</td>
<td><a href="mailto:jhawkin@ilstu.edu">jhawkin@ilstu.edu</a></td>
<td>309-438-2605</td>
</tr>
<tr>
<td>Justin Stanek, Ed.D., ATC</td>
<td>Clinical Education Coordinator</td>
<td><a href="mailto:jmstane@ilstu.edu">jmstane@ilstu.edu</a></td>
<td>309-438-5862</td>
</tr>
<tr>
<td>Kevin Laudner, Ph.D., ATC</td>
<td>Graduate Program Director</td>
<td><a href="mailto:klaudne@ilstu.edu">klaudne@ilstu.edu</a></td>
<td>309-438-5197</td>
</tr>
<tr>
<td>Noelle Selkow, Ph.D., ATC</td>
<td>Assistant Professor</td>
<td><a href="mailto:nselkow@ilstu.edu">nselkow@ilstu.edu</a></td>
<td>309-438-1875</td>
</tr>
<tr>
<td>Jeff Williams, M.S., ATC</td>
<td>Instructional Assistant Professor</td>
<td><a href="mailto:jgwilli@ilstu.edu">jgwilli@ilstu.edu</a></td>
<td>309-438-5366</td>
</tr>
</tbody>
</table>

Clinical Education Sites & Personnel

<table>
<thead>
<tr>
<th>Preceptor</th>
<th>Position</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>John Munn, MS, ATC</td>
<td>Head Athletic Trainer</td>
<td><a href="mailto:jcmunn@ilstu.edu">jcmunn@ilstu.edu</a></td>
</tr>
<tr>
<td>Joe Whitson, MS, ATC</td>
<td>Associate Athletic Trainer</td>
<td><a href="mailto:jhwits@ilstu.edu">jhwits@ilstu.edu</a></td>
</tr>
<tr>
<td>Kelly Haley, MS, ATC</td>
<td>Assistant Athletic Trainer</td>
<td><a href="mailto:klhaley@ilstu.edu">klhaley@ilstu.edu</a></td>
</tr>
<tr>
<td>Lindsey Schroeder, MS, ATC</td>
<td>Assistant Athletic Trainer</td>
<td><a href="mailto:ljschro@ilstu.edu">ljschro@ilstu.edu</a></td>
</tr>
<tr>
<td>Kristen Brummett, MS, ATC</td>
<td>Assistant Athletic Trainer</td>
<td><a href="mailto:kmbrum2@ilstu.edu">kmbrum2@ilstu.edu</a></td>
</tr>
<tr>
<td>Jordan Anderson, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:jander4@ilstu.edu">jander4@ilstu.edu</a></td>
</tr>
<tr>
<td>Sara Breslin, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:smbresl@ilstu.edu">smbresl@ilstu.edu</a></td>
</tr>
<tr>
<td>Corey Lanois, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:clansois@ilstu.edu">clansois@ilstu.edu</a></td>
</tr>
<tr>
<td>Dane Langellier, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:dmlange@ilstu.edu">dmlange@ilstu.edu</a></td>
</tr>
<tr>
<td>Stephanie Rendall, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:srrenda@ilstu.edu">srrenda@ilstu.edu</a></td>
</tr>
<tr>
<td>Katie Rogers, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:keroger@ilstu.edu">keroger@ilstu.edu</a></td>
</tr>
<tr>
<td>Eric Post, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:egpost@ilstu.edu">egpost@ilstu.edu</a></td>
</tr>
<tr>
<td>Melissa Wenig, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:mwenig@ilstu.edu">mwenig@ilstu.edu</a></td>
</tr>
</tbody>
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SMART Clinic

<table>
<thead>
<tr>
<th>Preceptor</th>
<th>Position</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Justin Stanek, Ed.D., ATC</td>
<td>Clinic Director</td>
<td><a href="mailto:jmstane@ilstu.edu">jmstane@ilstu.edu</a></td>
</tr>
<tr>
<td>Ashley Keck, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:ankeck@ilstu.edu">ankeck@ilstu.edu</a></td>
</tr>
<tr>
<td>Preceptor</td>
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</tr>
<tr>
<td><strong>Accelerated Rehab &amp; Sports Medicine</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Josh Smith, PT, ATC</td>
<td>Physical Therapist</td>
<td><a href="mailto:jsmith@acceleratedrehab.com">jsmith@acceleratedrehab.com</a></td>
</tr>
<tr>
<td><strong>Bloomington Blaze Hockey</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Matt Aiello, ATC</td>
<td>Head Athletic Trainer</td>
<td><a href="mailto:mnaieill@yahoo.com">mnaieill@yahoo.com</a></td>
</tr>
<tr>
<td><strong>Bloomington High School (BHS)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aaron Weidman, MS, ATC</td>
<td>Head Athletic Trainer</td>
<td><a href="mailto:aaron_weidman@yahoo.com">aaron_weidman@yahoo.com</a></td>
</tr>
<tr>
<td>Lean Gilley, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:lmgille@ilstu.edu">lmgille@ilstu.edu</a></td>
</tr>
<tr>
<td><strong>Heartland Community College/Normal Cornbelters</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satoshi Kajiyama, MS, ATC</td>
<td>Head Athletic Trainer</td>
<td><a href="mailto:skajiyama@gmail.com">skajiyama@gmail.com</a></td>
</tr>
<tr>
<td><strong>Illinois Wesleyan University</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bill A. Kauth, Ed.D., ATC</td>
<td>Head Athletic Trainer</td>
<td><a href="mailto:bkauth@iwu.edu">bkauth@iwu.edu</a></td>
</tr>
<tr>
<td>Emily Miller, MS, ATC</td>
<td>Assistant Athletic Trainer</td>
<td><a href="mailto:emiller@iwu.edu">emiller@iwu.edu</a></td>
</tr>
<tr>
<td>Peter Benjamin, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:pjbjenja@ilstu.edu">pjbjenja@ilstu.edu</a></td>
</tr>
<tr>
<td>Kathryn Deterding, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:kkdeter@ilstu.edu">kkdeter@ilstu.edu</a></td>
</tr>
<tr>
<td>Adam Kelly, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:arkelly@ilstu.edu">arkelly@ilstu.edu</a></td>
</tr>
<tr>
<td>Rebecca Mihalovits, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:rdmihal@ilstu.edu">rdmihal@ilstu.edu</a></td>
</tr>
<tr>
<td><strong>Neuro Ortho Rehab Center (NORC)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Joe Kingdon, ATC</td>
<td>Athletic Trainer</td>
<td><a href="mailto:Jkingdon08@gmail.com">Jkingdon08@gmail.com</a></td>
</tr>
<tr>
<td>Tim Boerger, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:tfboerg@ilstu.edu">tfboerg@ilstu.edu</a></td>
</tr>
<tr>
<td>Kyle Nolan, ATC</td>
<td>Athletic Trainer</td>
<td><a href="mailto:Ksquat11@yahoo.com">Ksquat11@yahoo.com</a></td>
</tr>
<tr>
<td><strong>Normal Community High School (NCHS)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jackie Lampert, MS, ATC</td>
<td>Head Athletic Trainer</td>
<td><a href="mailto:jlampert.osec@gmail.com">jlampert.osec@gmail.com</a></td>
</tr>
<tr>
<td>Lydia Morgan, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:ilmorga@ilstu.edu">ilmorga@ilstu.edu</a></td>
</tr>
<tr>
<td>Yuya Mukaihara, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:ymukaih@ilstu.edu">ymukaih@ilstu.edu</a></td>
</tr>
<tr>
<td><strong>Normal Community West High School (NCWHS)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kayla Baker, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:kmbaker@ilstu.edu">kmbaker@ilstu.edu</a></td>
</tr>
<tr>
<td>Jessica Wooldridge</td>
<td>Graduate Assistant</td>
<td><a href="mailto:jmwoold@ilstu.edu">jmwoold@ilstu.edu</a></td>
</tr>
<tr>
<td><strong>Orthopedic &amp; Sports Enhancement Center</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ryan Davis, MS, ATC</td>
<td>Physician Extender—Dr. Duhig</td>
<td><a href="mailto:rtdavi2@gmail.com">rtdavi2@gmail.com</a></td>
</tr>
<tr>
<td>Ashley Kingston, MS, ATC</td>
<td>Outreach/Bloomington Extreme</td>
<td><a href="mailto:mokingston@gmail.com">mokingston@gmail.com</a></td>
</tr>
<tr>
<td>Preceptor</td>
<td>Position</td>
<td>Email</td>
</tr>
<tr>
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<td>------------------------</td>
<td>---------------------</td>
</tr>
<tr>
<td>Chris Palmer, ATC</td>
<td>Head Athletic Trainer</td>
<td><a href="mailto:cpalmer@rivermen.net">cpalmer@rivermen.net</a></td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Preceptor</th>
<th>Position</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shannen Falconer, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:skfalco@ilstu.edu">skfalco@ilstu.edu</a></td>
</tr>
<tr>
<td>Britany Schulz, ATC</td>
<td>Graduate Assistant</td>
<td><a href="mailto:baschul@ilstu.edu">baschul@ilstu.edu</a></td>
</tr>
</tbody>
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Program Requirements

General Information for Prospective Students
Athletic Training Web site: http://kinrec.illinoisstate.edu/at/

Application timeline: all due by November 30th

Transfers: apply during first fall semester after transferring

Freshmen: apply during the fall semester of the sophomore year

Requirements for application:
- Application form (on-line)
- Completion of KNR 181, KNR 188, and KNR 188.01 (athletic training courses do not transfer as required program courses)
- Minimum 50 clinical observation hours from KNR 188.01
- GPA of 2.70 or higher
- Grade of ‘C’ or better in required courses (a grade of ‘B’ or higher is recommended in KNR 181)
- Interview with two athletic training faculty members
- 1 to 2 page essay describing why you have selected athletic training and what you would like to do as a career following completion of the program
- Athletic training general knowledge examination
- 2 recommendations (at least one from previous or current faculty at ISU)

Options: qualified and admitted, qualified but not admitted, non-admittance

Requirements once admitted:
- Submission of an approved physical examination
- Proof of Hepatitis B vaccination
- Current TB test
- Maintain GPA of 2.70 or better (both accumulative and major)
- Earn a ‘C’ or better in all major courses
- Successfully complete 1200 assigned clinical hours over five semesters including the formal off-campus internship
- Adhere to all program policies and procedures

ATEP Admission Policy
The Clinical Instruction Practicum is the component of the Athletic Training Education Program at Illinois State University in which students participate in supervised practice and mastery of athletic training competencies and proficiencies in the field, and during which they are evaluated on the achievement of required athletic training competencies. In order to be admitted to the Clinical Instruction Practicum, students must meet all requirements and follow the procedures for admittance as published and distributed in the University Catalog, in these Policies and Procedures, on the program website, and in KNR 188.

Admission to the Clinical Instruction Practicum is conducted on a selective basis for undergraduates enrolled in the Athletic Training Education Program. Prerequisite coursework to qualify for advancement
to the Clinical Instruction Practicum (ATL-I) includes:

- KNR 181 Anatomy & Physiology
- KNR 188 Introduction to Athletic Training
- KNR 188.01 Introduction to Athletic Training Laboratory

Completion of these courses, and earning a minimum cumulative GPA of 2.70 and a minimum 2.70 major GPA, is required prior to application to the Clinical Instruction Practicum. A minimum grade of a "C" or better is required for each course in the physical education/athletic training major curriculum. Before students are eligible to be admitted to Clinical Instruction Practicum, they are considered as pre-admitted students (Level 0), completing directed observation hours while enrolled concurrently in KNR 188 – Introduction to Athletic Training, and KNR 188.01 - Introduction to Athletic Training Laboratory. After completing the preliminary coursework for Athletic Training, the qualified student may apply for admittance to the Clinical Instruction Practicum. Given the limited placement availability at clinical sites, not all students meeting the qualification criteria are guaranteed admission to the Clinical Instruction Practicum. Therefore, a point system is used to rank the qualified applicants.

Selection for admission as a student in the Clinical Instruction Practicum of the Athletic Training Education Program is determined by the Athletic Training faculty in KNR. Notification of the application process and application due dates are announced in the introductory athletic training class and posted on the athletic training student bulletin board, and a timely application must be received by the Athletic Training Education Program Director not later than November 30th each year.

After each qualified student who has applied for the Clinical Instruction Practicum has scheduled and completed a personal interview with the athletic training education selection committee (ATEP faculty), a point system, based upon criteria considered in the selection process by the Athletic Training faculty, provides for committee objectivity.

Qualified students are further evaluated on the following criteria:

- Grade point average in athletic training courses,
- Score from interview by two faculty members,
- Minimum 30 clock-hours of experience in athletic training clinical setting(s),
- Quality of the student's written essay on the application form (blind review),
- Athletic training (didactic/clinical) competency evaluations from faculty,
- Evaluations from clinical supervisors based on student performance during clinical observations, performance on an athletic training general knowledge examination, written recommendations from other qualified individuals. (These individuals may include, but may not be limited to, other faculty members in the KNR School, athletic training staff members at Illinois State University, other Clinical Instructors at off-campus sites, or former faculty from another college or from high school).

The selection process results in one of the following outcomes for each student:

a. Acceptance into the Clinical Instruction Practicum
b. Qualified, but placed on a waiting list
c. Not qualified, not accepted.

All applicants are notified in writing of their status of admission within prior to the start of the spring semester classes. If students are not accepted for admission, they may reapply during the next
admission period.

**ATEP Criteria for Program Progression and Completion**

Once selected for the Clinical Instruction Practicum, the student is required to enroll in each of the series of five KNR 298 Professional Practice: Athletic Training Clinical Competencies courses. In addition to the students’ participation at the clinical site, these KNR 298 clinical courses include regular meeting times in which the focus is on learning over time and competency/proficiency assessment. The courses serve a dual purpose for instruction and practice of specific competencies linked to didactic courses, and to enable students to be evaluated by the course instructor on the competencies specified for each respective course. By fulfilling the assignments for each of these clinical courses, students complete and are evaluated on the competencies learned in the didactic courses.

Content for the five practicum courses:

- **KNR 298.11** – Competencies and Proficiencies in Prevention & Care of Athletic Injuries, Preventive and Protective Taping & Wrapping, Emergency Procedures, AED, CPR, First Aid
- **KNR 298.12** – Competencies and Proficiencies in Therapeutic Modalities and Assessment of Injuries to the Trunk and Lower Extremities
- **KNR 298.13** – Competencies and Proficiencies in Assessment of Injuries to the Head, Neck, and Upper Extremities
- **KNR 298.14** – Competencies and Proficiencies in Therapeutic Exercise and the Integration between Assessment, Treatment, Rehabilitation, and Return to Play decision making
- **KNR 298.15** – Competencies and Proficiencies in General Medical Conditions, Pharmacology and Mastery and Synthesis of prior knowledge and skills

The Clinical Instruction Practicum students are provided a clinical supervisor assignment during the semester following their selection. Students are assigned to, and rotated between, approved clinical supervisors who, in turn, are responsible for supervision of particular sport venues.

Upon completing 3 successful semesters in the program, the student is eligible to enroll in the capstone practicum, KNR 398.12 - Professional Practice experience. In order to remain a participant in the Clinical Instruction Practicum, a student must maintain the following academic and clinical standards:

1. Maintain a cumulative GPA of at least 2.70 in all coursework,
2. Receive no grade lower than a “C” in any major course,
3. Successfully complete all required coursework, clinical competencies, have strong clinical instructor evaluations, and be making satisfactory progress in the program.
Clinical Experience Rotations

Pre-admit students complete 30 directed observation hours via KNR 188.01, Introduction to Athletic Training Laboratory. The instructor for KNR 188.01 assigns the students to three sites for observation. Each site experience lasts for approximately 5 weeks. The number of weekly hours varies by the site but should be approximately 10 hours per rotation. If the directed observation student applies to and is successfully admitted to the Clinical Instruction Program, then the rotation among the clinical supervisors and approved clinical instructors begins. The goal of the rotations among the clinical instructors is to ensure students obtain significant exposure to a variety of experiences including collision & contact sports (high risk, equipment intensive), non-contact sports (low risk), upper extremity risk sports (throwing sports and swimming), and lower extremity risk sports (track, soccer, basketball). In addition, we consider factors such as exposure to high school athletics, small college athletics, and sports medicine clinics. The 800 core clinical hours are completed with clinical instructors directly affiliated with Illinois State University and Intercollegiate Athletics. This allows for close evaluation of the experiences and adjustments when necessary. The remaining 400 clinical hours required by the ISU ATEP are with affiliated sites and allied health settings and occur during the student’s internship. Those hours may or may not be under the direct supervision of a certified athletic trainer. The additional 400 hours allow for greater diversity in the student learning experience and allow for exploration of other traditional athletic training sites.

The clinical education coordinator meets with each student in the program to discuss future goals and his/her preference for the following semester’s rotation. Then the program director, clinical education coordinator, and head athletic trainer meet to discuss the placements of the students and make the clinical assignments. The considerations include level in the clinical instruction program, previous experiences, previous clinical instructor assignments, need for high-risk exposure, and future career aspirations. Secondary considerations may include stated or hidden conflicts of interest but these instances are rare.
Preceptor Content

Introduction

Welcome to the Illinois State University Athletic Training Education Program (ATEP). The faculty want to sincerely thank you for agreeing to be a part of our program. The ATEP, housed in the School of Kinesiology and Recreation, strives to provide students with comprehensive clinical education to prepare them for many of the possibilities for employment following graduation. As a preceptor, you provide a crucial role in facilitating the clinical education for our students.

Purpose

The purpose of this manual is to provide the preceptor with information, guidelines, and policies for academic and clinical experiences in the ATEP. This handbook is to be used as a reference manual for both preceptors and students involved with the ATEP. While an effort has been made to include as much pertinent information as possible, it is nearly impossible to address every possible issue, situation, or circumstance that might be encountered. Preceptors are expected to use sound reasoning and professional judgment in dealing with situations or issues that are not addressed in this manual. It is the responsibility of the preceptor to consult with the ATEP Program Director or Clinical Education Coordinator on any issues in question.

Mission

The mission of the Illinois State University Undergraduate Athletic Training Education Program is to develop graduates who possess entry-level knowledge and skills in the prevention, recognition, treatment, and rehabilitation of athletic injuries while emphasizing integrated learning, problem-solving, critical thinking, and professionalism. By effectively delivering a nationally accredited curriculum, graduates will be prepared to successfully challenge the Board of Certification exam and become certified athletic trainers who foster excellence, either by entering the work force or continuing educational pursuits in seeking an advanced degree.

Preceptor Responsibilities

A preceptor must function to:

a. Supervise students during clinical education;
b. Provide instruction and assessment of the current knowledge, skills, and clinical abilities designated by the Commission;
c. Provide instruction and opportunities for the student to develop clinical integration proficiencies, communication skills, and clinical decision-making during actual patient/client care;
d. Provide assessment of athletic training students’ clinical integration proficiencies, communication skills, and clinical decision-making during actual patient/client care;
e. Facilitate the clinical integration of skills, knowledge, and evidence regarding the practice of athletic training;
f. Demonstrate understanding of and compliance with the program’s policies and procedures.
Preceptor Qualification
A preceptor must:

a. Be credentialed by the state in a health care profession;
b. Not be currently enrolled in the professional athletic training education program at the institution;
c. Receive planned and ongoing education from the program designed to promote a constructive learning environment.

Preceptors Certified for Less than One Year
In some instances, a preceptor may be a newly certified athletic trainer (as is the case with graduate students) and have students assigned to him/her. In these instances, the newly certified preceptor will be supervised by a preceptor who has worked with the ATEP for at least 1 year. The Clinical Education Coordinator will also coordinate a meeting with the new preceptor at least once a semester to determine his/her progress.

Expectations of Preceptors
The following is a list of expectations that are required of preceptors working as affiliates of the Illinois State University ATEP. All expectations must be met in order for students to be able to complete clinical education hours at the clinical site.

- A current affiliation site agreement contract must be on file with the Program Director (Appendix A)
- Must attend and complete a preceptor training once every three years
- The following must be kept on file with the Clinical Education Coordinator and updated on a yearly basis:
  o A current vita form A-1 (Appendix B)
  o NATA Certification number
  o Copy of state of Illinois license
  o Copy of BOC card verifying that the preceptor is in good standing
  o Modality safety checks for modalities at clinical site (if applicable)
  o List of equipment available to students (rehab, modalities, emergency)
  o Emergency Action Plan for clinical site

Clinical Education Policy
The clinical education component of the ATEP is designed to provide “real life” learning experiences for students. The clinical experiences are designed to parallel the didactic coursework and are encompassed within 5 educational courses (KNR 298.11, 298.12, 298.13, 298.14, 298.15). It is important that the student is placed in a situation that challenges the student while not putting the patient or student-athlete at risk. There are over 30 ACIs, as well as other allied medical personnel who assist in the clinical education of students. The students are involved directly in the clinical setting throughout their progression through the program. This serves to ensure experiential learning in which the student learns knowledge and skills in the classroom setting, practices in laboratory with faculty members, and applies the information in a structured format under the supervision of the preceptor. The program also emphasizes the principles of critical thinking and problem solving; further skills necessary for success as an athletic trainer.
Criteria for successful completion of the clinical coursework are included in the syllabus for each clinical course (KNR 298.xx). The clinical rotations and assignments provide opportunities for students to gain clinical experiences associated with a variety of different populations including genders, varying levels of risk, protective equipment (to minimally include helmets and shoulder pads), and medical experiences that address the continuum of care that will prepare the student to function in a variety of settings and meet the domains of practice delineated for an entry-level certified athletic trainer in the profession.

Student clinical experiences are conducted in such a way as to allow the ATEP faculty/staff to regularly and frequently evaluate student progress and learning, as well as the effectiveness of that experience. It is the responsibility of the Clinical Education Coordinator to establish the evaluation procedures and instruments and see to their use to assess the effectiveness of the program components.

Required Educational Experience
Athletic training students complete required clinical experiences under the direct supervision of a preceptor during the 5 semesters in the program.

1. The preceptor will be physically present and have the ability to intervene on behalf of the athletic training student to provide on-going and consistent clinical education.
2. The preceptor will consistently interact with the athletic training student at the site of the clinical experience.
3. There will be regular planned communication between the Clinical Education Coordinator and the preceptor.
4. The number of students assigned to a preceptor in the clinical experience component will be maintained at a ratio that will ensure effective education and will not exceed a ratio of eight students per clinical instructor in any clinical setting.

Non-required Educational Experiences:
It is recognized that opportunities for clinical experiences may arise for athletic training students that are not a part of their formal or required program of study. The Illinois State University ATEP encourages students to take advantage of those opportunities whenever it is possible and appropriate for them to do so.

1. Athletic training students who find opportunities working with sports medicine clinical, professional sports teams, or any other off-campus organization work under the policies and procedures of that organization. Unless specifically arranged as an internship with course credit, the arrangement is strictly between the organization and the student.
2. Athletic training students may have a field experience opportunity that allows for team travel through Illinois State Intercollegiate Athletics without a staff athletic trainer/clinical supervisor. This experience will involve working only with those student-athletes who are physically healthy and able to contribute to the success of the team. Students are not expected to carry out long term treatment or rehabilitation responsibilities during this field experience. These responsibilities are not a part of their supervised clinical education experiences and are entirely voluntary.

Hour Requirement

The profession of Athletic Training sometimes requires the certified athletic trainer to work more than 40 hours per week. This fact is true of most salaried professionals. In addition, those athletic trainers working with athletic teams or other sporting events many times work weekends and/or
evenings. It is not the intention, nor should it be the practice, to make time demands on the athletic training student that approach those of the certified athletic trainer. The Illinois State University Athletic Training Education Program does, though, want the athletic training student to understand the responsibilities and obligations of the career, i.e., what it’s really like to work as an athletic trainer.

To that end, we will expect the athletic training student to participate with their preceptor in the care and treatment of student-athletes assigned to that preceptor. That expectation may include clinical experiences that occur prior to 8:00 am, after 5:00 pm in the evening, or on the weekends. It is not the expectation, nor is it the requirement, that the athletic training student be present with a team at all practices and games. It is the expectation, and should be the desire of the student, that he/she receives the experience necessary to gain the competencies and proficiencies required of that experience, as well as an understanding of what is required of the certified athletic trainer in that professional setting.

On average, the student should be spending between 15-25 hours per week at the clinical site. However, there will be variations in the weekly hours depending on the clinical site and sport assignment. Students are expected to complete a total of 1200 clock hours during the 5 semesters including the formal off-campus internship. Students will turn in monthly, signed hours sheets documenting their progress to the clinical education coordinator. Clinical hours will be monitored closely to ensure students and ACI/CI’s are following these recommendations.

Days Off

Additionally, every athletic training student should be scheduled at least one day off per week during the clinical experiences. It must be noted that many times more than one day off may be available when clinical education opportunities are light. The AT student may also ask for time off from their clinical assignment if necessary. However, it is expected that the student ask for time off at least 2-3 days in advance in case students need to be rescheduled.

Clinical Proficiencies

Students will be formally evaluated by their clinical instructor regularly throughout the semester. ACIs/CIs will receive a syllabus from the clinical education coordinator at the beginning of each semester detailing the proficiencies to be evaluated and the corresponding dates. All proficiencies requiring evaluation will be contained in the text *Developing Clinical Proficiency in Athletic Training: A Modular Approach 4th Edition*. All students admitted into the clinical education component are required to purchase this text. Your signature in the student’s text indicates they have met the standards for that proficiency. **It is the student’s responsibility to set up a time to complete the proficiency evaluation with the ACI/CI.** To prevent students from waiting until the last minute to complete modules, there will be limits on the number of modules that can be completed in a given week. This will encourage proper timing and prevent students from delaying module completion.

Evaluations (Appendix C)

Clinical instructors will be required to complete evaluations on each student they supervise. Evaluations will be conducted at the mid-term of the semester and at the end of the rotation. These evaluations **must be reviewed with and signed by the student** prior to turning them in.
Clinical Site Visits

The Clinical Education Coordinator will complete regular site visits throughout the rotation. The purpose of these visits is to observe the athletic training student in the clinical setting and to communicate with the ACI/CI. If the ACI/CI has any issues or problems, they may contact the clinical education coordinator at any time to set up a meeting.

Plan of Study
(Required AT Courses only)

<table>
<thead>
<tr>
<th></th>
<th>Fall</th>
<th>Spring</th>
<th>Fall</th>
<th>Spring</th>
<th>Fall</th>
<th>Spring</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 0</td>
<td>KNR 181: Anatomy &amp; Physiology</td>
<td>KNR 288: Prevention &amp; Care</td>
<td>KNR 288: Therapeutic Modalities</td>
<td>KNR 334: Therapeutic Exercise</td>
<td>KNR 361: Pathology &amp; Pharmacology</td>
<td>KNR 335: Administration of Athletic Training</td>
</tr>
<tr>
<td>Level 2</td>
<td>KNR 188.01: Intro to AT Lab</td>
<td>KNR 362: Seminar in Sports Medicine I</td>
<td>KNR 298.11: Professional Practice in AT I</td>
<td>KNR 298.12: Professional Practice in AT II</td>
<td>KNR 298.13: Professional Practice in AT III</td>
<td>KNR 298.14: Professional Practice in AT IV</td>
</tr>
</tbody>
</table>
Student Communicable Disease Policy

Students who are ill (including, but not limited to URIs, bronchitis, pneumonia, influenza, mononucleosis) must be under the care and guidance of a personal physician or Student Health Services. Students will be individually advised regarding participation in classroom, laboratory, or clinical rotations to avoid spread of contagious and other communicable diseases.

Additionally, students who have been diagnosed with an immunodeficiency or systemic disease must be under the direct care of a personal physician or Student Health Services. The nature of the clinical rotations for the program will place the student at additional risk for contracting common illnesses. The student must work with the physician to understand the risks and carefully follow infection control procedures.

Any costs borne from contraction of a communicable disease related to athletic training curricular/clinical requirements or voluntary assignments are the responsibility of the student. Neither Illinois State University, its trustees, administration, nor the faculty can be held responsible for infections or the spread of communicable diseases that occur as a result of failure to follow infection control procedures or OSHA regulations that are instructed annually to all AT Students.

Universal Precautions

"Universal precautions," as defined by CDC, are a set of precautions designed to prevent transmission of human immunodeficiency virus (HIV), hepatitis B virus (HBV), and other bloodborne pathogens when providing first aid or health care. Under universal precautions, blood and certain body fluids of all patients are considered potentially infectious for HIV, HBV and other bloodborne pathogens.

Universal precautions shall be observed throughout all areas of Illinois State University and its affiliated clinical sites where reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious material may result. All blood or other potentially infectious material will be considered infectious regardless of the perceived status of the source individual.

Administrative and work practice controls will be utilized to eliminate or minimize exposure to employees and students on campus and throughout clinical education sites. Where occupational exposure cannot be eliminated after institution of these controls, personal protective equipment shall also be utilized.

Personal Protective Equipment

Appropriate PPE shall be worn in accordance with training and severity of spill when responding to a bloodborne pathogen incident. Supervisors shall ensure that personnel use appropriate PPE at all times. All PPE shall be removed prior to leaving the immediate work area and properly disposed of. Expended PPE shall be replaced as soon as practical.

In the event personal clothing becomes contaminated, laundry services are available through Bromenn Laundry Services. The Supervisor of Building Service Workers should be notified to arrange for clothing.
to be appropriately containerized, stored and transported to the Student Health Services bio-collection room until it can be sent to BroMenn Laundry Services.

All health care workers should routinely use appropriate barrier precautions to prevent skin and mucous membrane exposure during contact with any patient's blood or body fluids that require universal precautions.

**Immunization**

Clinical instructors and students enrolled in the ATEP are encouraged to get the Hepatitis B vaccine. The immunization is offered through Student Health Services or the individual may obtain it on his/her own through the medical facility of choice.

**Blood Borne Pathogen Policy**

As an athletic trainer or athletic training student, you may be at risk and exposure to bloodborne pathogens.

When an individual incurs a bloodborne exposure incident, he/she shall report the incident to his/her supervisor. If the individual is not an ISU employee, the person should follow that employer’s bloodborne pathogen policy. If the individual is an ISU employee or student, he/she should subsequently be sent to the OSF Occupational Health Center for a post-exposure evaluation and appropriate follow up. The clinical education coordinator and program director of the ATEP shall also be notified. The individual’s supervisor should notify Environmental Health and Safety and complete an occupational incident report.

When reporting for a post-exposure follow-up plan, Student Health Services will provide the following information to the healthcare professional:

- A copy of 29 CFR Part 1910.1030, Occupational Exposure to Bloodborne Pathogens
- A description of the exposed employee’s/individual’s duties as they relate to the exposure incident
- Documentation of the route(s) of exposure and circumstances under which exposure occurred
- Results of the source individual's blood testing, if available
- All medical records relevant to the appropriate treatment of the employee/individual including immunization status
- The identification of the source individual, if known

Within 15 days of completion of the evaluation, the OSF Occupational Health Center shall provide a copy of the written opinion directly to the individual. The written opinion shall be limited to the following information:

- That the employee has been informed of the results of the evaluation; and
- That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.

Note: All other findings shall remain confidential and shall not be included in the written report.
Student Policies

Athletic Training Student Responsibilities
While participating in the clinical experiences or rotations, students are responsible for the following:

1. Abiding by the clinical site’s policies and procedures manual
2. Abiding by the ATEP policies and procedures manual
3. Reporting for all assigned clinical sessions including, but not limited to, practice sessions, competitions, treatment sessions, rehabilitation sessions, training sessions, meetings, in-services, and appointments.
4. Completing all coursework, assignments, and competencies and proficiencies associated with KNR 298.
5. Providing or obtaining transportation to and from the clinical sites and paying for all associated costs. This includes, but is not limited to, the expenses associated with fuel and parking. The ATEP is not responsible for costs or damages incurred while traveling to or from the clinical sites.
6. Obtaining the uniform or type of clothing deemed appropriate for the clinical site (see specific policy on attire later in this section).
7. Maintaining the minimum 6 credit hour enrollment with the university to ensure coverage under the university’s student liability insurance during their involvement with the clinical site.
8. Maintaining current CPR and AED certification.
9. Informing the clinical site supervisor AND Clinical Education Coordinator of any questions or concerns regarding the clinical rotations or clinical site.
10. Informing the clinical site supervisor AND Clinical Education Coordinator of any violations of local laws, state laws, federal laws, policies and procedures of the clinical site and/or the ATEP, and/or the NATA’s Code of Ethics.

Student Conduct and Appearance
All athletic training students are expected to conduct themselves in a professional manner at all times. Personal conduct and professional appearance are considered to be absolutely necessary while preparing for a career in athletic training, and should never have to be questioned.

Personal Appearance
All athletic training students must be concerned with personal appearance. Hair should be kept neat and out of the face. Mustaches and beards must be kept trimmed. Athletic training students are expected to use discretion with hairstyle, make-up, perfume, cologne, and jewelry. Jewelry must not interfere with the duties and responsibilities of an athletic training student.

Dress Code
Observation Site Students: Students assigned to observe at athletic training clinical sites are expected to dress appropriately. While observation students (enrolled in KNR 188.01) will not wear the official Illinois State athletic training education program attire, they will be expected to dress professionally when observing. This includes NOT wearing jeans, athletic shorts, sandals and flip-flops, mini shorts and skirts, yoga pants, halter-tops, tank tops, cropped tops, or any other immodest or unprofessional attire. The recommended attired for these rotations include khaki shorts or pants and an ISU t-shirt or polo.
shirt. If the observation is taking place off-campus, a neutral, solid-colored t-shirt or polo is recommended. Consult the Clinical Education Coordinator or preceptor at the site for any questions regarding appropriate attire.

**Clinical Instruction Program Students**: Students admitted to the Clinical Instruction Program must purchase and wear the official Illinois State University athletic training attire. Orders for clothing are taken annually. Such attire is described as a collared shirt or white/gray/red T-shirt with the ISU athletic training logo, khaki, red, or black shorts or long pants, black wind pants, and athletic shoes. Each student is required to purchase and wear the required attire (at a minimum, all students must have a uniform polo shirt). Blue jeans are not acceptable attire during the clinical experience. Ball caps (ISU logo) are acceptable as outdoor apparel only. Athletic shoes must also be worn during athletic training room hours. Sandals, flip-flops, mini shorts and skirts, halter tops, tank tops, cropped tops, or any other immodest or unprofessional attire are not permissible. In the event the student wears inappropriate attire to the clinical site, the preceptor may request that the student return home to change.

**General Medical Rotations**: When attending clinical rotations at the Prompt Care facilities, students should follow the dress of the physician they are observing. For males, this includes solid color pants, a collared buttoned shirt, and tie. For females, this includes dress pants and blouse or sweater. When in doubt, over-dress for the first visit.

**Game/Event Dress Code**: Athletic Training students assigned to an athletic event with a professional responsibility should check with the preceptor, an ATEP faculty member, as to appropriate dress at games/events. Generally, athletic trainers wear comfortable dress attire for the court sports such as volleyball, basketball, etc. (Example: Females should wear dress pants and dress shirt, and males should wear dress pants, dress shirt, and tie). Outdoor sports may have alternative professional dress expectations according to the tradition of the sport. Ball caps are acceptable as outdoor apparel, only.

**Professional Meetings**: When attending professional meetings (i.e. IATA, GLATA, NATA, etc.) students should follow the dress code for that event. In most cases, this will be “business casual.” Students are discouraged from wearing Illinois State athletic training attire and encouraged to follow dress code instead. Students holding office in a student association should follow the same guidelines as if they were presenting (Females should wear dress pants and dress shirt, and males should wear dress pants, dress shirt, and tie).

**Professional Confidentiality**
Any information about a patient’s medical condition or treatment that the athletic trainer may acquire in locker rooms, athletic training rooms, physician’s offices, prompt care facilities, or otherwise is considered confidential. The unique opportunity athletic training students have to observe and participate in athletics as a health care professional can and will be terminated if this confidentiality is violated. Furthermore, the professional rapport the athletic training student establishes with athletes, coaches, and physicians is jeopardized by the lack of discretion and violation of this ethical conduct. At the high school level, this confidentiality is equally, if not more important. Athletic training students must never forget that they are working with minors and their parents.
Personal and Social Conduct

It is a privilege to be a student in the Clinical Instruction Practicum, not a right. Students must conduct themselves in a professional manner at all times. Any misconduct may result in an indefinite probation period or dismissal, determined by the ATEP faculty. When traveling with an athletic team, students are to conduct themselves by the rules of the clinical supervisor and/or coach of the assigned team has established and in accordance with the ethical standards of the National Athletic Trainers’ Association (See the NATA Code of Ethics). Students working with high school athletes (read minors) are advised that professional conduct is critical to maintain the clinical relationships that exist between the ATEP and the area high schools.

Disciplinary Policy

Admission to the Athletic Training Clinical Instruction Practicum is a privilege, and continued participation is not guaranteed, but earned. The individual student’s progress in the program determines whether the student remains in an active clinical appointment. Provisions for disciplinary actions as an active member of the Clinical Instruction Practicum are as follows:

When athletic training student evaluations are completed twice each semester, the clinical instructor will record any observed infractions. The clinical instructor will discuss this with the athletic training student, and both will sign the evaluation. If there is disagreement between the athletic training student and the clinical instructor, then neither will sign the evaluation and both will meet with the Clinical Education Coordinator and other necessary parties to reach an agreement. The areas of concern during the clinical practicum and their point totals are presented below.

<table>
<thead>
<tr>
<th>Area</th>
<th>Infrequent</th>
<th>Occasional</th>
<th>Repetitive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attendance</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Tardiness</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Dress Code</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Dereliction of Duty</td>
<td>2</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Insubordination</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sexual Harassment</td>
<td></td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>Failure to Communicate</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Negligence</td>
<td></td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Breach of Confidentiality</td>
<td></td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>Felony Conviction</td>
<td></td>
<td></td>
<td>8</td>
</tr>
<tr>
<td>Attitude/Lack of Professionalism</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Intoxication/Controlled Substance Use</td>
<td>6</td>
<td></td>
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</table>

Infrequent is defined as one to two occurrences in the evaluation period. Occasional is defined as three occurrences in the evaluation period, and repetitive is defined as four or more occurrences in the evaluation period.

Point totals will be cumulative semester to semester. If an athletic training student accrues 3 points, then the penalty will consist of presenting a 20-minute presentation to the Athletic Training Club on an assigned topic. If an athletic training student accrues 6 points he or she will be placed on probation,
resulting in dismissal from a clinical assignment for a total semester time. If the student accrues 8 points, they will be expelled from the clinical instruction practicum and dropped from the program.

Athletic training students have a right to appeal any penalty. Appeals are heard by the athletic training faculty and the academic advisor to athletic training.

Examples of the terminology used in the chart above follow:

**Attendance** – failure to be present at an assigned responsibility such as a practice, game, treatment/rehabilitation session with an athlete, required program meeting, or other such athletic training function. Approved, excused absences are permissible.

**Tardiness** – arriving late to an assigned responsibility in which attendance is mandated.

**Dress Code** – failure to uphold the dress code of the program after a single warning has been issued.

**Dereliction of Duty** – failure to be engaged in the responsibilities of your clinical assignment including preparation activities, clean-up activities and other responsibilities characteristic of your assigned site.

**Insubordination** – failure to comply with the direct instructions of a faculty or staff member or, in certain instances, failure to comply with the instruction of an upperclassman if those instructions originated with a faculty or staff member and were specifically directed to you.

**Sexual Harassment** – violations of the university defined policy.

**Failure to Communicate** – failure to notify your clinical instructor or supervisor of such events as athlete injuries, modifications to treatment or rehabilitation plans, approved excused absences from the clinical site, or other occurrences which could risk the well-being of the student, athletes, supervisor, or program.

**Negligence** – any act of omission or commission committed by a student relative to the accepted duties and standard of care.

**Breach of Confidentiality** – divulging information regarding sensitive program information or any information regarding athletes or the personal information of an athletic team to any party outside of your immediate supervisor.

**Felony Conviction** – conviction of a felony without appeal during the time period between official acceptance to the program and graduation from the program. Keep in mind the Ethics of the National Athletic Trainers’ Association.

**Attitude/Lack of Professionalism** – this is distinct from the “bad days” or “moods” inherent of all of us. Consider this a willful lack of respect of other students, supervisors, faculty, athletes, or coaches after a warning of such behavior has been issued.

**Intoxication/Controlled Substance Use** – this pertains specifically to times when you are fulfilling the responsibilities of your clinical site or are otherwise engaged in clinical instruction or field experience.
Keep in mind your behavior while on road trips. You never know when you may be needed to assist in the care of an athlete or other team member.

**Student Work and Activities Policy**

**Extra-Curricular Activities**
AT program students are not permitted to engage in extracurricular activities that conflict with the assigned times for clinical rotations. This includes, but is not limited to, participation in Gamma Phi Circus, intramural athletics, and social and Greek organizations. The AT program does not prohibit students from participating in extracurricular activities, however, participation in the extra-curricular activities MUST NOT supersede the assigned responsibilities of the clinical requirements of the program.

**Varsity Athletics Participation**
With specific regard to varsity athletes, due to the time commitment required for athletic training, it is difficult to participate in an intercollegiate sport while also completing all clinical requirements for the AT program. Participation in varsity athletics requires careful planning between the ATEP program director/clinical education coordinator and the coach and the student can expect additional semesters beyond the traditional four years in order to fulfill all program requirements.

**Outside Employment**
It is recognized that some students must work part-time to support themselves. With the number of clinical hours required of athletic training students, proper time-management will be very important. Athletic training students are encouraged to consider very seriously the effect of their work activities upon the time required for their athletic training clinical education. Any work hours that conflict with the assigned clinical responsibilities of the student must be approved in advance by the AT Program Director in consultation with the preceptor and the Clinical Education Coordinator.

**Assignment of Schedule**
The student’s education should not be compromised in any way by his/her work schedule as an athletic training student, nor is the student to serve as a substitute for the athletic trainer who provides health care for athletes. The student’s athletic training tasks must be specific to athletic training competencies, and compulsory only in terms of being subject to standard student policies as required program components are completed.
Appendix A

Clinical Education Glossary of Terms

Preceptor (Formerly ACI): A preceptor is a BOC Certified Athletic Trainer with a minimum of one (1) year work experience as an athletic trainer, who has completed preceptor training. BOC Certified Athletic Trainers who wish to be a preceptor (e.g. graduate assistant) but who have less than one year experience must be supervised by a more experienced preceptor. A preceptor provides formal instruction and evaluation of clinical proficiencies in classroom, laboratory, and/or clinical education experiences through direct supervision of athletic training students.

Ability to Intervene: The CI or ACI is within the immediate physical vicinity and interact with the ATS on a regular and consistent basis in order to provide direction and correct inappropriate actions. The same as being “physically present.”

Affiliation Agreement: A formal, written document signed by administrative personnel, who have the authority to act on behalf of the institution or affiliate, from the sponsoring institution and affiliated site.

Allied Health Care Personnel: Physician Assistants, physical therapists, registered nurses, doctors of dental surgery, and other health care professionals, recognized by the AMA/AOA as allied health professionals, who are involved in direct patient care and are used in the classroom and clinical education portions of the ATEP. These individuals may or may not hold formal appointments to the instructional faculty.

ATEP: Athletic Training Education Program

Athletic Training Student (ATS): A student enrolled in the athletic training major or graduate major equivalent.

Clinical Education Coordinator (CEC): The individual a program may designate as having the primary responsibilities for the coordination of the clinical experience activities associated with the ATEP. The individual must be BOC credentialed for a minimum of 3 years and knowledgeable in the content areas required for training preceptors. The CEC is responsible for:

- Developing, implementing, and evaluating the clinical education program of the ATEP
- Coordinating clinical experiences for students
- Maintaining documentation with current clinical sites, including affiliation agreements and preceptor vita, BOC, and licensure information
- Facilitating the development of new clinical education sites/settings
- Communicating regularly with preceptors regarding students’ clinical education
- Conducting regular site visits with preceptors
- Administering yearly preceptor training

Clinical Education: The application of knowledge and skills, learned in classroom and laboratory settings, to actual practice on patients under the supervision of a preceptor.

Didactic Instruction: aka Formal Instruction; Teaching of required competencies and proficiencies with instructional emphasis in structured classroom and laboratory environments.

Direct Supervision: Supervision of the athletic training student during clinical education. The preceptor must be
physically present and have the ability to intervene on behalf of the athletic training students and the patient.

**Directed Observation Athletic Training Student:** A student who may be present in an athletic training facility, but not necessarily enrolled in the athletic training major, who is required to observe the practices of a Certified Athletic Trainer. This student may not provide direct patient care.

**General Medical Experience:** Clinical experiences that involves observation and interaction with physicians, nurse practitioners, and/or physician assistants where the majority of the experience involves general medical topics as those defined by the Athletic Training Educational Competencies.

**Learning Over Time (Mastery of Skills):** The process by which professional knowledge and skills are learned and evaluated. This process involves the initial formal instruction and evaluation of that knowledge followed by a time of sufficient length to allow for practice and internalization of the information/skill, and then a subsequent re-evaluation of that information/skill in a clinical (actual or simulated) setting.

**Medical Director:** The physician (MD or DO) who serves as a resource for the program’s director and ATEP faculty regarding the medical content of the curriculum. The Medical Director may also be the team physician; however, there is no requirement for the Medical Director to participate in clinical education.

**Pre-Professional Student:** A student who has not yet been admitted formally into the ATEP. May be required to participate in non-patient activities as described by the term Directed Observation Athletic Training Student.

**Program Director:** The full-time faculty member of the host institution and a BOC Certified Athletic Trainer responsible for the administration and implementation of the ATEP.

**Technical Standards:** The physical and mental skills and abilities of a student needed to fulfill the academic and clinical requirements of the ATEP. The standards promote compliance with the Americans with Disabilities Act (ADA) and must be reviewed by institutional legal counsel.
Appendix B

VITA FORM A-1

Faculty/Staff Vitae Form
(Do not exceed 2 pages on any individual)

<table>
<thead>
<tr>
<th>Name</th>
<th>Last</th>
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<th>Middle</th>
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<tr>
<th>Employment Position</th>
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<tr>
<th>Position within Athletic Training Program</th>
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<tr>
<th>Academic Rank</th>
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<tr>
<th>Education (begin with most recent education and include all professional education leading to a degree or professional credential)</th>
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<th>Location</th>
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<th>Year</th>
<th>Field of study</th>
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<tr>
<th>BOC Certification Number (*Attach a copy of current BOC card or CEU completion letter)</th>
<th>Year of BOC Certification</th>
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<tr>
<th>State Credential Type(s) (e.g. AT/L, RN, MD or indicate not applicable in your state)</th>
<th>State Credential Number(s)</th>
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<table>
<thead>
<tr>
<th>* ACI Training (date of most recent training)</th>
<th>*NATA Membership Number</th>
</tr>
</thead>
</table>

| (*) If applicable | |

<table>
<thead>
<tr>
<th>Workload (percentage of time spent in each category)</th>
<th>% Time</th>
<th>Credits</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Teaching</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Research</th>
<th></th>
</tr>
</thead>
</table>
### Supervision of Athletic Training Students

<table>
<thead>
<tr>
<th>Service</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Administration</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-academic Administration</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Athlete/Patient Care</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Other Activities** (Graduate students should place % time as a student here)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TOTALS</strong></td>
<td>100%</td>
</tr>
</tbody>
</table>

---

### Are you currently on either a paid or unpaid overload for your ATEP responsibilities?

<table>
<thead>
<tr>
<th>(“X” one selection)</th>
<th>NO</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Are you compensated for your ATEP overload responsibilities?

<table>
<thead>
<tr>
<th>(“X” one selection)</th>
<th>NO</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Professional Experience:

List in reverse chronological order (most recent first) Athletic Training and related employment experience for the past five years only.

---

### APPENDIX C

Agreement for Student Placement
This Agreement is entered into by and between the Board of Trustees of Illinois State University, a public body, corporate and politic of the State of Illinois with principal offices at Normal, Illinois, for and on behalf of its Athletic Training Program in the School of Kinesiology and Recreation, hereinafter “University” and <Your Agency> a corporation with principal offices at <Address> hereinafter “Facility”.

As part of its ongoing instruction and preparation of its students through classroom and laboratory experiences, University seeks relevant, supervised experiences in practice settings for its students who are in good academic standing. The Facility is able to provide a practice setting, supervised experience, and related educational facilities for these students (“placement”).

1. **Effective Date and Renewal**
   This Agreement shall become effective on <Date> and continue for one (1) year, and shall automatically renew from year to year thereafter unless terminated by either party.

2. **Placement of Students**
   Prior to the beginning of each student placement, Facility and University shall agree upon the number of students to be placed at the Facility and the duration of each placement, which agreement shall be memorialized in writing and attached hereto and made a part hereof as an Exhibit. Should any situation arise which may threaten a student’s successful completion of the placement, Facility and University will attempt to discuss and reach mutual agreement with the student regarding options for completing, rescheduling, or canceling the placement.

3. **University Responsibilities**
   3.1 University shall provide the basic preparation of the student(s) through classroom instruction and practice and shall provide the educational direction for the placement. University shall designate a faculty or staff member as a liaison to the Facility to provide consultation regarding student placements, supervision, and periodic review of student progress toward meeting the University’s educational objectives.

   3.2 University shall inform student(s) that they must adhere to the following requirements during the placement:

   a. Student will adhere to all policies, procedures, and standards established by the Facility. University or Facility may immediately remove any student deemed to be clinically unsafe to patients, employees, or others. Party who took the action to remove the student shall notify the other party of said action as soon as possible, but in no event later than 48 hours after said removal. Facility reserves the right to prohibit the return of any such student(s) unless a corrective action plan satisfactory to Facility has been proposed and its compliance assured by the Student. Facility further reserves the right to request University to remove any student whose conduct is contrary to Facility’s standards of conduct as set forth in its policies and procedures.

   b. Student will be responsible for his/her own transportation to and from Facility during placement.

   c. Student will provide Facility with proof of health insurance coverage during the placement, and shall comply with all health and immunization requirements of the Facility.
d. Student will be responsible for adhering to established schedules and notifying Facility and University of any absences or necessary schedule changes.

e. Student will obtain prior written approval of Facility and University before publishing any material relative to the placement.

f. Student will maintain confidentiality related to Facility’s employees, patients, clients, customers, and/or business operations.

4. **Facility Responsibilities**

4.1 Facility will provide supervision of student(s) and cooperate in providing systematic written review of the student performance in the placement. Facility and University shall mutually agree upon appropriate certifications or credentials and responsibilities of the supervisor. The Facility shall provide meaningful and appropriate learning experiences to student to achieve the University’s educational objectives for the placement. The Facility shall provide access to records, appropriate space, and other Facility resources as may be required.

4.2 If available, immediate provision of emergency health care to student(s) shall be assured in any instance of injury or illness at the Facility. Expenses of such care shall be the sole responsibility of the student.

4.3 A student is not an employee of the Facility under the terms of this Agreement and may not take the responsibility or place of qualified staff.

4.4 Facility agrees to comply with all applicable laws, regulations, rulings, or enactments of any governmental authority, and agrees to obtain (at its own expense) any necessary licenses, permissions, and accreditations necessary to maintain its operation.

4.5 Facility will provide orientation and/or training to Student(s) on any of Facility’s applicable policies, procedures, rules and regulations, or safety concerns.

5. **Insurance**

5.1 University agrees to maintain professional and general liability insurance, or self-insurance, in the minimum amounts of $1,000,000 per claim or occurrence, $3,000,000 aggregate, for its employees, agents, and servants with an insurance carrier acceptable to the Facility. University shall furnish Facility with a certificate of insurance or other written document reasonably satisfactory to the Facility as evidence of its insurance coverage in full force and effect. University shall send evidence of insurance coverage to facility at the address shown in Article 8 prior to the beginning of the student placement.

5.2 Facility agrees to maintain professional and general liability insurance, or self-insurance, in the minimum amounts of $1,000,000 per claim or occurrence, $3,000,000 aggregate, for its employees, agents, and servants with an insurance carrier acceptable to the University. Facility shall furnish University with a certificate of insurance or other written document reasonably satisfactory to the University as evidence of its insurance coverage in full force and effect. Facility shall send evidence of insurance coverage to College at the address shown in Article 8 prior to the beginning of the student placement.
6. **Liability**

Neither party to this Agreement shall be liable for any negligent or wrongful acts, either of commission or omission, chargeable to the other, unless such liability is imposed by law. This Agreement shall not be construed as seeking either to enlarge or diminish any obligation or duty owed by one party to the other or to a third party.

7. **Termination**

7.1 Either party may provide notice to the other of its intent not to renew this Agreement ninety (90) days prior to the expiration of the current term.

7.2 Either party may terminate this agreement for any reason upon ninety (90) days written notice to the other.

7.3 Either party may terminate this Agreement for breach, including but not limited to failure to meet insurance requirements, failure to provide a supervisor with appropriate credentials, or failure to maintain licensure or certification, if applicable. Notice to the other party of breach must be in writing pursuant to the provisions of paragraph 8. If the breach is not remedied within thirty (30) days, the Agreement may be terminated by giving ten (10) days written notice to the other party.

7.4 Notwithstanding the foregoing paragraphs, student(s) placed at Facility at the time notice of termination or non-renewal is given shall be allowed to complete the current placement.

8. **Notices:**

All notices required herein shall be in writing and shall be sent via registered or certified mail return receipt requested or by an overnight courier service to the persons listed below. A notice shall be deemed to have been given when received by the party at the address set forth below.

Notices to the Facility shall be sent to:

<Agency>
<Address>
<Attn: >

Notices to the University shall be sent to:

ISU Athletic Training Education  
Campus Box 5120  
Normal, IL 61790-5120  
Attn: Justin Stanek, Clinical Education Coordinator

9. **General Provisions**

9.1 University and Facility agree to comply with all applicable federal and state nondiscrimination, equal opportunity and affirmative action laws, orders and regulations. University and Facility shall not engage in unlawful discrimination or harassment against any person because of race,
color, religion, sex, national origin, ancestry, age, marital status, protective order status, disability, unfavorable discharge from the military, or status as a disabled veteran or a veteran of the Vietnam era.

9.2 Neither party shall use the name of the other in any written material including but not limited to brochures, letters, and circulars, without the prior written consent of the other, but with the exception of listings of facilities as may be required by University’s accrediting agencies.

9.3 This Agreement is to be governed and construed in accordance with the laws of the State of Illinois.

9.4 University and Facility acknowledge that certain information about University’s students is contained in records maintained by University and/or Facility and that this information is confidential by reason of University policy and the Family and Educational Rights and Privacy Act (FERPA) of 1974 (20 U.S.C. 1232g). both parties agree to protect these records in accordance with FERPA and University policy. To the extent permitted by law, nothing contained herein shall be construed as precluding either party from releasing such information to the other so that each can perform its respective responsibilities.

9.5 For purposes of the Health Insurance Portability and Accountability Act (HIPAA), University and Facility acknowledge that students are part of the Facility’s “workforce” as defined in HIPAA Privacy Regulations at 43 C.F.R. 160.103, and as such, no Business Associate agreement is required between the University and Facility. The Facility will provide the necessary HIPAA training to students and students will be expected to comply with HIPAA and any other confidentiality requirements of the Facility.

9.7. Nothing in this Agreement is intended to or shall create any rights or remedies in any third party.

9.8 The relationship of each party to the other under this Agreement shall be that of Independent Contractor.

9.9 Facility affirms that, to the best of its knowledge, there exists no actual or potential conflict between the Facility’s family, business, or financial interests ad its obligations under this Agreement; and, in the event of change in either its private interests or obligations under this agreement, the Facility will raise with the University any questions regarding possible conflict of interest which may arise as a result of such change.

9.10 The failure of either party at any time to enforce any provision of this Agreement shall in no way be construed to be a waiver of such provisions or affect the validity of this Agreement or any part thereof, or the right of either party thereafter to enforce each and every provision in accordance with the terms of this Agreement.

9.11 In the event that any provision of this Agreement is held to be unenforceable for any reason, the unenforceability thereof shall not affect the remainder of this Agreement, which shall remain in full force and effect and enforceable in accordance with its terms. All commitments by the University under this Agreement are subject to constitutional and statutory limitations and restrictions binding upon the University.
9.12 In the event of any litigation arising in connection with this Agreement, University and Facility agree to cooperate in risk management, prevention, claims investigation, and litigation under the direct control and supervision of their respective legal counsel.

9.13 This Agreement may not be assigned by either party without the prior written consent of the other party. Such consent shall not be unreasonably withheld.

9.14 This Agreement, attachments, and incorporated references shall constitute the entire Agreement between the parties with respect to the subject matter herein and supersedes all prior communications and writings with respect to the content of said Agreement.

9.15 This Agreement may not be modified by either party unless such modification is mutually acceptable to both parties, is reduced to writing, and signed by both parties.

This Agreement shall not be binding until signed by all parties. The persons signing this Agreement represent and warrant that they have authority to bind their respective parties.

The Board of Trustees of Illinois State University

By: ________________________
Sheri Noren Everts
Its Vice President & Provost

Date: ______________________

(Facility)

By: ________________________
Signed
Its: _______________________

Date: ______________________
Appendix D

Clinical Evaluation Form
# Illinois State University
## Athletic Training Education Program
### Student Clinical Evaluation Form

**ATS Name:** __________________________  
**ACI Name:** __________________________

**Clinical Assignment:** __________________________  
**Level of Student:** _____  
**Date:** ______________

Evaluations will be based on personal characteristics, professionalism, and demeanor in the clinical setting. The rating given for each attribute evaluated will give the student objective insight regarding their personal athletic training development. Completed evaluations will be kept as part of the ATS’s file. 
*(Note: SE = self-evaluation, CI = clinical instructor evaluation; 1 = mid-term, 2=final)*

Please rate the following items according to the scale below:

1 = Deficient  
2 = Below average  
3 = Average  
4 = Above average  
5 = Exceptional  
N/A = Unable to evaluate

### Professional Development & Responsibility

<table>
<thead>
<tr>
<th></th>
<th>SE1</th>
<th>CI1</th>
<th>SE2</th>
<th>CI2</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Demonstrates a sincere interest in athletic training</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Follows site policies/procedures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Works quickly and efficiently</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Takes initiative</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Punctuality—is consistently on time</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Dependability—balances clinicals w/ academics and other responsibilities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>Adaptability—shows flexibility with the changing circumstances in the ATR</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>Grooming, dress, and appearance appropriately for practices/games</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>Seeks to improve knowledge and skills</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>Communicates effectively with staff, athletes, and other personnel</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>Uses proper terminology/language for the situation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>Displays self-confidence</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13.</td>
<td>Innovation &amp; creativity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14.</td>
<td>Peer mentoring</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Goal Setting

To ensure you are successful during your clinical rotation, we ask that you set goals. Each goal must follow the “SMART” guide to ensure consistency in the evaluating progress.

**Specific:** Goals should be straightforward and emphasize what you want to happen. Clearly define the What, Why, and How of the goal. What are you going to do? Why is this important? How are you going to do it?  
**Measurable:** If you can’t measure it, you can’t manage it! Even for larger, more long-term goals, smaller measurements should be built into the goal to ensure progress. Establish concrete criteria for measuring progress toward your goal which will help you stay on track.  
**Attainable:** A goal needs to stretch you slightly so you can feel you can do it with a proper commitment. However, it should not be so far out of your reach that you won’t commit to doing. Balance the difficulty of the task to make sure you feel a sense of accomplishment upon completion.  
**Realistic:** This is not a synonym for “easy.” It means the skills needed to do the work are available and the project fits with your overall strategy. Devise a plan to achieve the goal which will make the goal realistic.  
**Timely:** The goal must have a timeframe. Putting an end-point on your goal gives you a clear target to work towards. If you don’t set a time, the commitment is too vague!
In the space below, develop 3 SMART goals for both your clinical skills and your professional development/responsibility as an athletic training student.

<table>
<thead>
<tr>
<th>Clinical Skills</th>
<th>SE1</th>
<th>CI1</th>
<th>SE2</th>
<th>CI2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Professional Development/Responsibility</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ATS Signature(1): _____________________ Date: __________
ATS Signature(2): _____________________ Date: __________
ACI Signature(1): _____________________ Date: __________
ACI Signature(2): _____________________ Date: __________
Preceptor Evaluation Form
(Note: Form now completed online)

Clinical Instructor Name: __________________________ Date: _____________
Clinical Site: ____________________________________ Level of student: ___________

Please rate the clinical instructor on the following criteria using the scale indicated. There is additional space for comments at the end of the evaluation form. This form will be summarized with others for the CI and the summary results will be shared with the CI. Evaluations will be maintained in a personnel file by the Director of Athletic Training Education for a period of two years.

Please rate the following items by circling the number according to the scale below:
1 = Deficient  2 = Below average  3 = Average  4 = Above average  5 = Exceptional  N/A = Unable to evaluate

I. Knowledge of Instructor

<table>
<thead>
<tr>
<th>Clinical instructor is knowledgeable about anatomy, physiology, and exercise physiology</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical instructor is knowledgeable about evaluation processes: history, inspection, palpation, neurological, functional, special testing</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>N/A</td>
</tr>
<tr>
<td>Clinical instructor is knowledgeable about therapeutic modalities</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>N/A</td>
</tr>
<tr>
<td>Clinical instructor is knowledgeable about rehabilitation techniques</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Comments: __________________________________________________________________________________________
__________________________________________________________________________________________

II. Instructor as a Teacher

<table>
<thead>
<tr>
<th>I was provided with an adequate orientation to individual patients/athletes and to my responsibilities to these people.</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>I always had a clear idea of what was expected of me</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>N/A</td>
</tr>
<tr>
<td>My own objectives were considered in planning the learning experience</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>N/A</td>
</tr>
<tr>
<td>The CI takes time to demonstrate and teach techniques</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>N/A</td>
</tr>
<tr>
<td>The CI allows for appropriate hands-on athlete care</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>N/A</td>
</tr>
<tr>
<td>The CI is open to suggestions regarding patient care</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>N/A</td>
</tr>
<tr>
<td>I have learned new skills, techniques, and procedures under the supervision of the CI</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>N/A</td>
</tr>
<tr>
<td>The CI adapts his/her teaching style based on my learning style</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Comments: __________________________________________________________________________________________
__________________________________________________________________________________________
III. Supervision

<table>
<thead>
<tr>
<th>Item</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervisor is on-site and available for feedback during the clinical experience</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Provides a balance between praise and criticism</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The CI uses tact when making corrections or suggestions</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>I received regular feedback from the CI</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>The CI demonstrated an interest in my learning as an ATS</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Provides opportunities for supervisory conferences</td>
<td></td>
<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Evaluates performance fairly</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Encourages me to become increasingly more independent and autonomous professionals</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

IV. OVERALL RATING OF CLINICAL INSTRUCTOR EFFECTIVENESS:

Outstanding | Above Average | Average | Below Average | Inadequate

Suggestions that would be beneficial to the clinical instructor:

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

V. Individual Site Measures

<table>
<thead>
<tr>
<th>Item</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>I had adequate individual attention</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There was adequate equipment to meet my learning objectives</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>I saw a variety of patients</td>
<td></td>
<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>The physical facilities were conducive to a health care facility</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>I interacted with a variety of health care professionals</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

VI. OVERALL RATING OF CLINICAL SITE

Outstanding | Above Average | Average | Below Average | Inadequate
Appendix E

Clinical Sites Job Description

Accelerated Rehab and Sports Medicine

PRECEPTOR: Michelle Novak, Josh Smith

Job Description

Hours:

Typical business hours are from 8:00am – 7:00pm Monday – Friday

Duties:

Attend during all assigned hours.

Assist with all aspects of clinic operations, including, but not limited to:

- Scheduling patients
- Patient check-in and payment
- Documentation and maintaining patient records
- Injury assessment
- Patient education
- Treatment, rehabilitation, and reconditioning
- Maintaining inventory
- Clinic upkeep including restocking supplies and cleaning

Expectations:

- Communication with preceptors is essential. You are expected to be at the clinic during your assigned hours. If a conflict arises, communicate this to your preceptors so we know not to expect you.
- Take initiative! Help out to your knowledge and skill level. Don’t be afraid to ask questions if you are unsure.
- Remain professional at all times. This is a health care facility and we rely on word of mouth for advertising. We strive to provide optimal rehabilitation services and education to restore the patient to normal function. Your interactions with patients will affect the experience of the patient so it is paramount that the patient has an outstanding experience.
- Cell phones: Students are expected to remain off their cell phone during clinic hours. If you must make or receive a call, please step out of the facility to do so.
- Naturally, there will be some downtime during clinic hours. Use this time to help with documentation, cleaning, and any other tasks that need to be completed. If these tasks are finished, use the time to practice skills or study for your AT classes. Use the resources/preceptors around you!!!

Appearance

Athletic training students are expected to dress appropriately while in the clinic. Remember, this is a health care facility so students are expected to look professional. “Business casual” should be the standard dress code for the facility. This includes khaki or similar styled pants and a polo shirt. Shirts must be tucked in for males. Females wearing women’s cut shirts may leave their shirt untucked, but skin should not be exposed while bending down or lifting arms. Students are encouraged to wear their ISU athletic training gear but may also wear any polo or dress shirt of choice. Athletic or dress shoes (closed toe) must be worn. When in doubt about a clothing choice, ask the preceptor to avoid being sent home to change.
Bloomington Blaze Hockey

**PRECEPTOR: Matt Aiello**

**Job Description: Working with both Juniors & Pros**

- **Training Camp** –
- **In-Season** – Juniors start mid-September/ Pro beginning of October
  - **Practice**: Blaze practice is run from 10am-11am on ice.
  - **Games**: 33 home games usually weekends sometimes weekdays
    - Jr. Blaze play games before, usually around 3 pm

- **Duties**
  - Attend practice and games
  - Pre-activity: Taping, rehab, setting up for practice/games
  - Post-activity: Stretching, icing, evals, cleaning duties in ATR
  - Other duties: Writing SOAP notes, injury reports, and treatment plans

**Expectations:**

- Required to attend all practices and games unless scheduling conflicts arise
  - Must be on time. If something comes up, COMMUNICATE. If it becomes a trend, action will be taken.
- Class comes first, your clinical rotation comes second, jobs and other activities come third.
- Taking initiative. Always be on your toes. This is your time to practices hands on skills, don’t just observe or wait for something to come to you.
  - Don’t be afraid to ask questions. This is your opportunity to learn and get the hands on experience.
- This is not your time to study. Occasionally looking over notes is okay, but your main focus/attention needs to be on the athletes. Practicing hands on skills is encouraged and enforced during down time.
- Remaining professional at all times – appropriate conversations with athletes, **NO** hanging out with athletes, professional demeanor at practice, games, and in the ATR.
- Participating in practice is not required. This could include keeping score during scrimmage or other non-athletic training duties. Medical needs always come first.
- Cell phones: An occasional text or call is okay but must be taken outside of practice facility. If it becomes an issue, no cell phones will be allowed.
- Appearance: Khaki shorts or pants – must be appropriate length. Athletic pants or shorts are allowed but **must be** red, black, or gray. Jeans and yoga pants are not allowed. ISU Athletic Training shirts are encouraged, but any ISU shirt is allowed as long as it is red, black, gray or white and has suitable content. Tennis shoes are required. If it is questionable, ask, but often it is not allowed.
- Practices times & locations may get changed or decided last minute, so be flexible & communicate.
- Be ready to work and participate. The athletes have a great sense of who to trust and who to work with, so work hard to earn their trust and you will have a great clinical experience.

**Perks:**

- Freedom to practice and develop proficiencies in a busy athletic setting
  - Injury Evaluations
  - Rehab Design
  - Administration
  - Prevention of injuries
  - Acute Care
- Exposure weekly to Orthopedic Surgeon and Sports Medicine Fellow in athletic training room and during games
- Exposure to collision sport with wide variety of injuries
• Opportunity for future professional recommendation
• Possibility of travelling with either team on road games especially if day trip
• Possible clothing – especially if you travel.
• On the bench for home games
**PRECEPTOR: Aaron Weidman**

**Job Description**

- Assist in preparing athletes for practices and games, including taping, treatments, injury evaluations, and rehabilitation.
- Evaluate injured athletes and suggest treatment as well as contribute to necessary referrals to medical professionals.
- Document valuations, treatments, or rehabilitation.
- Observe practices, games, and any hosted events – hours vary but begin at 2pm.
  - A day without events usually lasts between 2pm and 5pm
  - Events can last until 10pm at times. Bring snacks or money for food when necessary
- Prepare supplies for the day – stock medical kits, fill water bottles and ice chest.
- Assist with basic maintenance of the athletic training room – clean tables, floors, stock drawers, etc.
- If there are multiple students, they will alternate days at the discretion of the preceptor.
- Travel will be to varsity football games and any tournaments.
- Schedule of sports (underlined sports are the events we cover):
  - Fall – football, boys soccer, volleyball, cross country, girls swimming and diving, tennis
  - Winter – boys and girls basketball, wrestling, boys swimming and diving
  - Spring – baseball, softball, girls soccer, track and field, tennis

**Expectations**

- Be available for home contests and practices or hosted events (and away contests during football season). Be available by 2pm each day.
- Students must have initiative and look for opportunities to learn, help out, and better themselves. Apply what you know and use it. If there is an evaluation, taping, or treatment going on you should be paying attention.
- Work with other students at your site and help teach those who are at a lower level than you.
- Studying while on assignment: it is acceptable to study when there is nothing to do, practice, or watch. However, keep in mind that this is a great time for application of skills and learning from your preceptor’s.
- Clothing and appearance: while on assignment you should look professional. Wear athletic training shirts, polo’s, or any school provided apparel. With shorts, use the fingertip rule. If you are questioning your outfit you probably shouldn’t wear it to the high school. On treatment days, when we will not be covering any events, black athletic pants or shorts are acceptable. Polo’s are preferable at football games. Always dress for the weather!
- Cell phones: don’t let cell phones interfere with your assignment. An occasional phone call or text is fine but incessant texting should not occur.
- Email, call, or text me with scheduling issues (occasional problems that may arise).
- Treat all athletes and sports equally and with respect.
- Be able to take corrective criticism.
- If you have any questions, concerns, or comments don’t hesitate to come to your preceptor’s for help. They want to provide you with the best learning experience.

**Perks**

- You get to experience multiple sports.
Hands on application of what you learn in the classroom. The high school is a relaxed atmosphere that allows you to learn stress-free.

You get many opportunities for evaluations.
1. **Job description (including times, travel, etc.)**
   Athletic trainers are responsible for 4 varsity sports (Men’s and women’s soccer, baseball and softball). In-season sports take athletic training coverage and service on a priority basis. Athletic trainers’ primary responsibilities at Heartland Community College include, but not limited, injury evaluation, rehabilitation of injuries, documentation, medical referral, medical supply order, communication with coaches and school staff, practice and game coverage, maintaining athletic training room and other duties to be assigned.

   - **Practice and Game Locations**
     a. **Fall (Men’s and Women’s Soccer In-season)**
        - Men’s soccer: CornCrib/Practice Field
        - Women’s soccer: CornCrib/Practice Field
        - Baseball: CornCrib/Fitness and Recreation Center (FRC)
        - Softball: CornCrib/Champion Field/Practice Field/FRC
     b. **Spring (Baseball and Softball In-season)**
        - Baseball: CornCrib/FRC
        - Softball: CornCrib/FRC
        - Men’s soccer: FRC
        - Women’s soccer: FRC

   - **Hours**
     a. **Non-game days**
        - Fall Practice: 1230-700pm (Changes depending on weather)
        - Spring Practice: 1230-500pm / 700-900pm (Changes depending on weather)
        - FRC ATR open: 1200pm
        - FRC ATR close: NA
        - Treatment/Rehab: During and after practice or by appointment
     b. **Game days**
        - Game schedule: [http://www.heartland.edu/athletics/](http://www.heartland.edu/athletics/)

   - **Travel**
     - Athletic trainers do not travel.

   - **Home game duties**
     - Pregame treatment
     - Host visiting team
     - Supply water

2. **Expectations (include both fall and spring semester if different)**
   a. Students’ responsibilities include injury evaluation, rehabilitation, documentation, daily treatment, and practice/game coverage.
   b. Students are expected to perform hands-on rehabilitation and treatment techniques under preceptor’s supervision.
   c. Students are expected to evaluate injuries, create own rehab and treatment plan for minor injuries, and make decisions to progress rehabilitation under preceptor’s supervision.
   d. Students may be asked to accompany to doctor’s office as needed.

3. **Perks (why should students want to get experience at your site?)**
   a. 4 different competitive Junior College sports experience including nationally ranked softball and baseball program.
b. Relatively more opportunities to perform hands-on techniques and evaluations due to the number of athletes per athletic trainer.

c. Preceptor is assigned from Orthopedic and Sports Enhancement Center. Students will work closely with Dr. Seidl, Dr. Dustman, Dr. Duhig, Dr. Wingate, and Dr. Paul.

d. New facilities (the CornCrib and Fitness and Recreation Center)
Illinois State Athletics

ISU Baseball

PRECEPTOR: Eric Post

Job Description:

- **Fall** – No commitment required before the first day of school
  - **Practices**: M-F about 12-6pm (individual work outs), weekends during September and part of October only
    - No practice the week of Thanksgiving
  - **Games**: Fall games and scrimmages as needed

- **Spring** – Practice usually begins a week before classes start (expected to attend)
  - **Practice**: 2-a-days before school starts, January: 5-6 days a week, February: OFF Wed-Sun, March-May: Practice M-F
    - Practice the week of Spring Break (not required to attend, but help is always appreciated if you’re in town)
  - **Games**: Most commonly Saturday and Sunday in March, April, and May along with a few mid-week games
    - Traveling opportunities may be available in the spring to day trips.
  - **Practice times are subject to change day-to-day, flexibility is key!**
  - **Both fall and spring, the ATR opens 1.5 hours before practice and a half hour after practice**

- **Duties**
  - **Attend practice and games**
  - **Pre-activity**: Taping, rehab, setting up for practice/games
  - **Post-activity**: Stretching, icing, evals, cleaning duties in ATR
  - **Other duties**: Writing SOAP notes, injury reports, and treatment plans
  - **Upper-level students**: Mentor lower level students, attend doctor’s appointments

Expectations:

- **Required to attend all practices and games unless scheduling conflicts arise**
  - **Must be on time. If something comes up, communicate. If it becomes a trend, action will be taken.**
- **Class comes first, your clinical rotation comes second, jobs and other activities come third.**
- **Taking initiative. Always be on your toes. This is your time to practices hands on skills, don’t just observe or wait for something to come to you.**
- **This is not your time to study. Occasionally looking over notes is okay, but your main focus/attention needs to be on the athletes. Practicing hands on skills is encouraged and enforced during down time.**
- **Remaining professional at all times – appropriate conversations with athletes, no hanging out with athletes, professional demeanor at practice, games, and in the ATR.**
- **Participating in practice is not required but is encouraged. This could include keeping score, helping feed or pick up balls, or other non-athletic training duties. Medical needs always come first.**
- **Cell phones: An occasional text or call is okay but must be taken outside of practice facility. If it becomes an issue, no cell phones will be allowed.**
- **Appearance: Khaki shorts or pants – must be appropriate length. Athletic pants or shorts are allowed once a week but must be red, black, or gray. Jeans and yoga pants are not allowed. ISU Athletic Training shirts are encouraged, but any ISU shirt is allowed as long as it is red, black, gray or white and has suitable content. Shirts must be tucked in. Tennis shoes are required. If it is questionable, ask, but often it is not allowed.**
- **Must be flexible. Practices times get changed or decided at the drop of a dime, so be flexible.**
• Be ready to work and participate. The athletes have a great sense of who to trust and who to work with, so work hard to earn their trust and you will have a great clinical experience.

Perks:
• Traveling experience (depending on fall/spring).
• Fall: Most weekends off. Spring: Most of February off.
• Possible clothing – if you travel.
• Respectful athletes that are greatly appreciative of your work.
**ISU Men’s Basketball**

**PRECEPTOR: John Munn, Head Athletic Trainer**

**Job Description:**

- **Hours/Days:**
  - Fall Semester - 2-3 days/wk until Oct 15
    - Oct 15 until Winter break = every day. One day off per week which varies weekly. Attendance at all home games.
  - Winter break – Attendance not mandated but I STRONGLY SUGGEST you attend home games.
  - Spring Semester - Same as fall semester until team is eliminated. After that 2x/wk until end of classes.

- **Competition schedule:**
  - Games begin early Nov and continue potentially thru end of March.

- **Responsibilities:**
  - Level 4/5 students:  - Eval all athletes in ATRoom
    - Pre and post prac tx/rehab plans
  - Level 2/3 students:  - Assist in eval with Level 4/5
    - Assist in pre and post prac tx/rehab plans

**Expectations:**

- Be on time for all assignments
- Maintain strict confidentiality of all you see, hear, and do.
- Take initiative in daily tasks incidental to AT Room operation
- Establish working relationship with S-A’s.

**Perks:**

- During vacation periods – you will receive a player’s per diem to cover food expenses
- Limited travel to away contests (space permitting) – varies annually.

**Experiences/exposure unique to men’s basketball:**

- Highest priority sport at ISU
ISU Women’s Basketball

PRECEPTOR: Lindsey Schroeder

JOB DESCRIPTION:

- **Hours/Days:**
  - Pre-Season: begins the first week of September; practices 3-4xweek (weekends off)
  - In-Season: begins October 1st; practices 6-7xweek with typically Mondays as the off day
  - Post-Season: begins in the middle of March (determined by post-season play); ~ 2 weeks off and then individuals begin; practices 4-5xweek (weekends off) and finish the week prior to finals
  - We will accommodate your schedule, but you should try to avoid scheduling classes after 1 p.m., or before 7 p.m. if at all possible.

- **Competition Schedule:**
  - Fall Semester:
    - Games typically start in the second week of November with 1-2 games/week
    - *Because of the long season, practice and game commitments may conflict with University holidays and breaks (this includes portions of thanksgiving and winter break)*
  - Spring Semester:
    - Start conference play at the end of December/beginning of January
    - Conference tournament is the second weekend in March (will not travel)

- **Responsibilities:**
  - Level 4/5 – mentor level 2/3 as well as interact with rotational level 0s
  - Practice and Game preparation: set up carts and sidelines; visitor locker rooms; clean up
  - Stock and maintain kit and Athletic Training Room (Redbird Arena and Horton)
  - Monitor practices and games for injuries
  - Ensure athletes are staying hydrated; Fill water bottles during practices and games
  - Observe and perform evaluations and formulate treatment programs under preceptor supervision
  - Tape and provide treatment for athletes
  - Develop rehabilitation plans under preceptor supervision
  - Manage records and assemble carts
  - Maintain check-offs required in Athletic Training Education Program

EXPECTATIONS:

- **Learn athletes names and previous pertinent medical history**
- **AT students should have things prepared for practice early so they can assist/observe by the time athletes arrive**
- **Keep lines of communication open: AT students are expected to be punctual for their scheduled time frame. If sick or knowingly going to be late, please notify preceptor at least 1 hour prior (if possible)**
- **Studying is ok as long as all the athletes needs have been met**
- **AT students dress more formally for competition (business casual). For men, this means shirt and tie. For women, nice slacks and blouse (no skirts, dresses or open toed shoes). Remember we have to be functional!**

PERKS:

- **Get to work with one of the most successful teams on campus that is rich in WBB history**
- **Since you are with the athletes for a yearlong assignment, you get to know the athletes personally and build a level of trust**
- **Opportunities to travel with the team**
- **Get hands-on experience with rehabilitation, modalities, and various treatments**
- **Potential opportunities to be on television 😊**
ISU Football

Fall Semester

PRECEPTORS: Joe Whitson, Jordan Anderson, Dane Langellier

Job Description:
- Assist and observe preceptor with prevention, evaluation, rehab, documentation, modality use, and administration of injuries and illnesses while in compliance with CAATE
- Attend all practices and games (see below for travel determination)
  - Practice responsibilities include coverage of assigned position group (O-line, D-line, etc.)
  - Setup and teardown of fields
- Completion of Daily and Weekly Athletic Training Room Upkeep Duty List
  - Medical Filing
  - Practice setup and teardown
  - Facility cleaning and upkeep
  - Observation of Heat and other weather conditions
- SOAP note documentation
- Organization and packing of medical supplies and trunks for all away games
- Clinical Practice of completed competencies from didactics
- Communication of injuries and athlete needs to preceptor in the athletic training room and on the field during practice and games
- Application of taping and bandaging techniques as deemed appropriate
- Occasional escort for student athlete at MD appointments

Expectations:
- Report 1 day prior to start of training camp (two-a-days), this is typically the last week of July or first week of August. For 2012, students will be expected to report on August 3rd, 2012.
- Hours
  - Camp-hours will vary and be Monday thru Sunday until start of school
  - AM treatment M-F during school 6am-9 am or first class
    - Morning shift has rest of day off
  - PM Practice
    - Report at 1 pm and we are usually down around 7 PM
    - Monday-Thursday and Sundays
  - 1 Day off a week during regular season (once school starts)
  - Games-Game coverage is usually for a total 7 hours not counting travel time
- Travel
  - 6 Student will be taken for each away game,
    - Travel will be determined by work ethic, days present for camp, and needs for certain trips determined by preceptor
- Actively Participate and take ownership and independence in the rotation

Tangible Perks:
- Nike Gear (t-shirt, game polo, pullover, travel warm-up, sweats)
- Cramer Fanny Pack or sling kit
- All meals provided during camp
- Housing provided during camp if needed
- Travel
  - Includes overnight stay in hotel and all meals while traveling
    - 2 flight trips per year typically

Clinical Perks:
- Freedom to practice and develop proficiencies in a busy athletic setting
Injury Evaluations
Rehab Design
Administration
Prevention of injuries
Acute Care

• Exposure to collision sport with wide variety of injuries
• Opportunity for future professional recommendation
• Football opportunity
• Exposure weekly to Orthopedic Surgeon and Sports Medicine Fellow in athletic training room and during games
• Exposure to a wide variety of general medical conditions
• Opportunity to be exposed to other ISU physicians while at appointments with athletes

Spring football is much less time intensive than fall football. The hours are similar in the AM as in the fall. The afternoon will begin as 1-4 time slots. Once spring practice begins, leading up to the spring game, the afternoon time will increase. However spring practices do not occur every day as they do in the fall. Practices will run similar as they do in the fall. The same

Spring Semester

PRECEPTORS: Joe Whitson, Jordan Anderson, Dane Langellier

Job Description:
• Assist and observe preceptor with prevention, evaluation, rehab, documentation, modality use, and administration of injuries and illnesses while in compliance with CAATE
• Attend all practices, am workouts and games
  o Practice responsibilities include coverage of assigned position group (O-line, D-line, etc.)
  o Setup and teardown of fields
• Completion of Daily and Weekly Athletic Training Room Upkeep Duty List
  o Medical Filling
  o Practice setup and teardown
  o Facility cleaning and upkeep
  o Observation of Heat and other weather conditions
• SOAP note documentation
• Clinical Practice of completed competencies from didactics
• Communication of injuries and athlete needs to preceptor in the athletic training room and on the field during practice and workouts
• Application of taping and bandaging techniques as deemed appropriate
• Occasional escort for student athlete at MD appointments

Expectations:
• Hours
  o AM Workouts
    ▪ Divided into two groups, one day per week (Tuesday or Thursday)
    ▪ 515 am-730 am
    ▪ Rest of day off
  o AM County Fair
    ▪ Every morning week before and after spring break M-F
    ▪ 515am-730 am
AM treatment M-F during school 6am-9 am or first class (once spring ball starts)

PM treatment M-F during school 1pm-4 pm or first class (until spring ball and on no practice days in spring ball)

Sunday Treatment (usually 2-3 Sundays during spring practice for 1 hour)

PM Practice (usually starts after spring break)
  - 15 total days of practice
  - Report at 1 pm and we are usually down around 7 PM
  - Two-three weekdays and Saturday (Saturday’s start at 7 am and end at 1 pm)

1 Day off a week

Actively Participate and take ownership and independence in the rotation

Clinical Perks:

- Freedom to practice and develop proficiencies in a busy athletic setting
  - Injury Evaluations
  - Rehab Design
  - Administration
  - Prevention of injuries
  - Acute Care

- Exposure to collision sport with wide variety of injuries
- Opportunity for future professional recommendation
- Football opportunity
- Exposure weekly to Orthopedic Surgeon and Sports Medicine Fellow in athletic training room and during games
- Exposure to a wide variety of general medical conditions
- Opportunity to be exposed to other ISU physicians while at appointments with athletes
Job Description:
- Provide pre and post-practice treatments, cover practices and meets.
- Our season runs early December to mid-April but we practice ALL year round. This means in the Spring, you’ll typically get more days off (due to the team being at away meets). However, in the Spring you’ll be here more weekends to cover home meets. Whereas in the Fall, you will get Saturdays off. Also, in the Fall, I work really hard to make sure you get at least one weekday off and we rotate coverage for Sunday practices.
- Senior level students – responsible for writing weekly injury reports that are sent to Coaching staff.
- Pre-practice and meet set up – water bottles, ice chest, rehab equipment, etc. Prep and move to gym every day prior to practice.
- Update daily notes of all chronic/acute injuries. Write SOAP notes for all evaluations.
- Taping – especially lower extremity (ankle, Achilles, arch, etc.).

Expectations:
- Practice 3-6 M, T, U, F and 1-4 Sun. plus pre and post-treatments (a typical day is 2-6:30 M, T, U, F or 12:30-4:30 Sun). Wed. is rehab day (no practice) – typically 2-5.
- Very little “down time” – e.g. no extra study time. We’re typically moving around, working with athletes/responding to athlete issues the whole time we’re at practice. Don’t plan on having time to review notes, read textbooks, etc. while at clinicals. Also, we cover a pretty “high risk” sport and it’s important that we’re watching practice as much as possible.
- Only 1-week off for Christmas break (we practice Dec. 26) and we practice during Spring Break. I’m pretty flexible and will try to decrease your hours during these times but expect to have some coverage responsibilities over these breaks.
- Strong lower extremity taping skills.
- Spring semester – travel for away meet coverage if day trip (usually mid-late March).

Perks:
- If you’re looking for a rotation where you’ll get to do frequent evaluations and see athletes with lots of injuries, this is it!
- 1-2 travel experiences likely (Spring semester only).
- Lots of rehab experience – the team has 1 day a week devoted entirely to rehab (Wed) and almost all athletes are on a chronic injury rehab program of some sort.
- A very unique sport that’s fun and exciting to watch. There’s always something going on at practice!
- A great coaching staff that will listen to you and works to include you as a member of the team. I will try to give you opportunities to present injuries and daily status reports to Coaches so you get some coach interaction experience.
- Typically no morning hours.
Job Description:
- Assist in preparing athletes for practices and games, including taping, treatments, injury evaluations, and rehab
- Prepare supplies for the day – stock med kit, ensure that water coolers and bottles have been filled, and bring other emergency equipment to field
- Attend practices/home games
- Assist with documentation (SOAP notes, injury reports, rehab sheets)
- Assist with basic maintenance of the training room – cleaning tables, floors, stocking drawers, etc.

Expectations:
- Typically there is AT LEAST one day a week off for AT students (usually more days whether we are traveling-which you will not, or it’s the spring where we only practice a few days a week)
- I am pretty easy to schedule with (regarding evening classes and work schedules) but please know that I expect you to try and be here every day that you can (unless we have a day off), with the possibility of extended hours on game days. If you need a day off or have an event you have planned, please let me know AHEAD OF TIME and I usually have no problem giving you that if I can get by without you.
- Coverage for practices and home games
- Seek opportunities to learn and leave mundane tasks for later if those opportunities become available
- Homework allowed during practice as long as it doesn’t require your entire attention (you should still be able to keep an eye on the athletes…)

Fall Semester:
- We are in season in the fall, therefore we practice or do treatment everyday (except travel days which are pretty often)
- We start the first week of August, and as soon as you can get there for school to help during preseason is greatly appreciated
- When we travel for the weekend, you will have the entire weekend off (usually Thurs-Sun)
- Mondays are typically their off day, which means we will just have treatment (subject to change)
- Practices are usually Tues-Thurs (unless we leave on Thurs)
  - Times are roughly 1:30-6:30pm (treatments before practice)
- Games are often on Fridays and Sundays
- Season will be over either early or mid-November (treatments for remaining injuries will be treated after that point during treatment hours)

Spring Semester:
- From the time we get back from Christmas break until about the start of March we will be inside and practice twice a week in the mornings
  - Times are roughly 5:20-7:15am for practice, treatments daily for an hour or so
- After the beginning of March/spring break, we will go outside and practice about 4 days a week (times the same as Fall)
- There will be about 2-3 home games on Saturdays during the late spring

Perks of being with ISU soccer:
- We have a lot of fun, and have a great learning environment where everyone should feel open and comfortable asking questions and learning new things
• Great athletes and coaches!
• We get to see a variety of injuries, focusing on the lower extremity, and a ton of hands on application of what you learn in the classroom!
• Have many off-days during travel weeks, or early spring for students to get other work done, or relax (Us? yeah right!)
PRECEPTOR: Stephanie Rendall

Job Description:
- **Fall** – No commitment required before the first day of school
  - **Practices**: M-F about 12-6pm (individual work outs), weekends during September and part of October only
    - No practice the week of Thanksgiving
  - **Games**: We host a tournament at the end of September (everyone must work) and have a few mid-week games
- **Spring** – Practice usually begins a week before classes start (expected to attend)
  - **Practice**: 2-a-days before school starts, January: 5-6 days a week, February: OFF Wed-Sun, March-May: Practice M-F
    - Practice the week of Spring Break (not required to attend, but help is always appreciated if you’re in town)
  - **Games**: Most commonly Saturday and Sunday in March, April, and May along with a few mid-week games
    - Traveling opportunities may be available in the spring to day trips and possibly one training trip to FL or AZ.
  - Practice times are subject to change day-to-day, flexibility is key!
  - Both fall and spring, the ATR opens 1.5 hours before practice and a half hour after practice
- **Duties**
  - Attend practice and games
  - Pre-activity: Taping, rehab, setting up for practice/games
  - Post-activity: Stretching, icing, evals, cleaning duties in ATR
  - Other duties: Writing SOAP notes, injury reports, and treatment plans
  - Upper-level students: Mentor lower level students, attend doctor’s appointments

Expectations:
- Required to attend all practices and games unless scheduling conflicts arise
  - Must be on time. If something comes up, communicate. If it becomes a trend, action will be taken.
- Class comes first, your clinical rotation comes second, jobs and other activities come third.
- Taking initiative. Always be on your toes. This is your time to practices hands on skills, don’t just observe or wait for something to come to you.
- This is not your time to study. Occasionally looking over notes is okay, but your main focus/attention needs to be on the athletes. Practicing hands on skills is encouraged and enforced during down time.
- Remaining professional at all times – appropriate conversations with athletes, no hanging out with athletes, professional demeanor at practice, games, and in the ATR.
- Participating in practice is not required but is encouraged. This could include keeping score, helping feed or pick up balls, or other non-athletic training duties. Medical needs always come first.
- Cell phones: An occasional text or call is okay but must be taken outside of practice facility. If it becomes an issue, no cell phones will be allowed.
- Appearance: Khaki shorts or pants – must be appropriate length. Athletic pants or shorts are allowed once a week but must be red, black, or gray. Jeans and yoga pants are not allowed. ISU Athletic Training shirts are encouraged, but any ISU shirt is allowed as long as it is red, black, gray or white and has suitable content. Shirts must be tucked in. Tennis shoes are required. If it is questionable, ask, but often it is not allowed.
- Must be flexible. Practices times get changed or decided at the drop of a dime, so be flexible.
• Be ready to work and participate. The athletes have a great sense of who to trust and who to work with, so work hard to earn their trust and you will have a great clinical experience.

Perks:
• Traveling experience (depending on fall/spring).
• Fall: Most weekends off. Spring: Most of February off.
• Possible clothing – if you travel.
• Respectful athletes that are greatly appreciative of your work.
• Getting to drive the gator!
**ISU Swimming and Diving**

**PRECEPTOR:** Melissa Wenig

**Job Description:**
- **Fall** – No commitment required before the first day of school
  - **Practices:** MWF about 1-6, TTR about 12-5, Saturday practices TBD
    - No practice the week of Thanksgiving
  - **Meets:** We will host 2-3 meets in the fall semester. Meets are typically held on Saturdays.
- **Spring** – Practice usually begins 1-2 weeks before classes start (students not expected to attend, but are welcome)
  - **Practice:** January-February practice times are the same as the fall semester. February-May: MW about 2-5, TTR about 11-3, F about 6-9 AM
    - No practice the week of Spring Break, no weekend practices after February.
  - **Meets:** May host 1-2 meets in January. Meets are typically held on Saturday.
  - Practice times are pretty set in stone during the week, but weekend times are sometimes not determined until a day or two before; flexibility is key!
  - Traveling opportunities may be available to day trips, but are not guaranteed.
- **Duties**
  - Attend practice and games
  - Pre-activity: Taping, rehab, setting up for practice/games
  - Post-activity: Stretching, icing, evals, cleaning duties in ATR
  - Other duties: Writing SOAP notes, injury reports, and treatment plans
  - Upper-level students: Mentor lower level students, attend doctor’s appointments

**Expectations:**
- Required to attend all practices and games unless scheduling conflicts arise
  - Must be on time. If something comes up, communicate. If it becomes a trend, action will be taken.
  - Weekend practices may be optional, depending on amount of injuries
- Class comes first, your clinical rotation comes second, jobs and other activities come third.
- Taking initiative. Always be on your toes. This is your time to practices hands on skills, don’t just observe or wait for something to come to you.
- Swimming practice is very low-risk, so homework and studying is allowed at practice. If an injury arises students are expected to stop doing homework and attend to the situation.
- Remaining professional at all times – appropriate conversations with athletes, professional demeanor at practice, games, and in the ATR.
- Cell phones: An occasional text or call is okay with permission from preceptor but must be taken outside of practice facility. If it becomes an issue, no cell phones will be allowed. Athletic training students are also expected to discourage athlete use of cell phones during treatments.
- Appearance: Khaki shorts or pants – must be appropriate length. Athletic pants or shorts are allowed (no more than twice a week) but **must be** red, black, or gray. Jeans and yoga pants are not allowed. ISU Athletic Training shirts are encouraged, but any ISU shirt is allowed as long as it is red, black, gray or white and has suitable content. Shirts must be tucked in. Tennis shoes are required. If it is questionable, ask, but often it is not allowed. Khakis are required if attending a doctor appointment with a patient.
- Be ready to work and participate. The athletes have a great sense of who to trust and who to work with, so work hard to earn their trust and you will have a great clinical experience.

**Perks:**
- Fall: Some weekends off. Spring: Most weekends off. After February, usually done before 5.
- Respectful athletes that are greatly appreciative of your work and will work hard to get better.
- Lots of opportunities to work on Ther Ex skills
- Lots of individual attention.
ISU Track and Cross Country

PRECEPTORS: Corey Lanois, Sara Breslin

Job Description:
- This assignment is specifically designed to give athletic training students experience working with track and field and cross-country athletes.
- Assignment schedules are usually Monday through Friday 2pm-6pm.
- Additionally, we hold treatment times in 2 hour blocks in the mornings from Monday-Friday. Students can expect to work one day during morning treatments each week.
- We currently host one home cross-country race and an indoor track meet in the fall semester. We also host one outdoor track meet in the spring.
- There is very limited opportunity to travel. Day trips only and not mandatory.
- Fall semester works primarily with cross country; however, track and field does not hold official conditioning practice until October.
- In the spring Indoor Track starts the first week of January and goes into the month of March at which time outdoor track begins and continues into May or June depending on the championship scheduling.

Expectations:
- Cross country teams report in the middle of August. While clinical students are invited to report earlier, they are only expected to report the first day of classes in the fall semester.
- Students are expected to assist with field set-up and breakdown for practice, as well as help with the upkeep of the Horton Athletic Training Room.
- Students are expected to take the initiative in evaluating injuries and implementing rehabilitation programs commensurate with their level of education and with appropriate approval from preceptor.
- Students are expected to aid the ACIs in keeping up-to-date on medical documentation for the student-athletes, including injury reports, progress notes, and rehabilitation notes.
- Students are required to be present for all home meets while assigned with cross country/track and field.

Perks:
- Ample opportunity to develop, implement, and progress rehabilitation programs.
- Ability to work one-on-one with preceptor during downtime to improve technical skills or discuss current cases.
- Work with a variety of athletes with specific demands for each event (distance runners, jumpers, sprinters, and throwers).
- For the most part, few weekend hours.
**ISU Volleyball**

**PRECEPTOR:** Kelly Haley

**Job Description:**
- Students will be responsible for paperwork ... enter information on athletes, fill out soap notes, treatment logs, etc. ...
- Open athletic training room (get it ready for athletes to come in)
- Close athletic training room (clean up from the day’s activities)
- Attend practice and games (home and away)
- Perform athletic training room treatments before and/or after practice or games.
- Prepare supplies for the day – stock med kits, ensure that water and bottles have been filled.
- Create treatment and rehab programs as needed as well as administer.
- Evaluate injuries as able.

**Expectations:**
- Pre-season availability in Fall desired
- Be available for home and away contests
- Be available by 2PM each day
- End of day time will vary from day to day (no definite stop time)
- Dress appropriately: shirt tucked in, khakis shorts/pants majority of time.
- Call or text me with scheduling issues (occasional problems that may arise)
- When here, pay attention to what is going on here...avoid social texting & cell phone use.
- Studying while on assignment: I prefer that you not study while at your assignment. I will try very hard not to waste your time and ask that when you are at clinical, that you not use that time for studying. If there is down time, I feel that we can better use it by working on the goals that you have set for yourself and practicing AT skills.
- Time off: If a student needs time off from their assignment, they must talk to me in advance.
- Clinical should be treated as professional preparation. Behavior should reflect that.
- ATS should be motivated, have initiative, be mentally engaged at all times, and be prepared to learn.

**Fall Semester:**
- Be back for two-a-days (fall)
- Be available for weekend games
- AT students dress more formally for competition. For men, this means polo or button down shirt. For women, nice slacks and blouse.
- Expect to work more hours during home game weekends and less when they are traveling.
- May have opportunity to travel with team.

**Spring Semester:**
- Expect to work lighter hours early in spring with hours being more focused on rehab and treatments
- From spring break on, spring season is in session. May have weekend responsibilities and possibility for travel.

**Perks of Clinical Rotation with ISU VB:**
Unique injuries as well as varied types; lots of exposure to low back disorders.
Great way to learn how to think critically and how to be independent.
Opportunity to exercise decision-making and test true knowledge as future ATC
Typically have 1 day off mid-week and possibly weekends when traveling
Individual attention from preceptor
Preceptor that's motivated to improve your skills and work on making you a strong clinician
Exciting sport to watch
Many opportunities to work one-on-one with athletes
Illinois Wesleyan University

Location: Shirk Center  
302 E. Emerson St.  
Bloomington, IL 61702-2900

Phone: 309-556-3601

PRECEPTORS:  
Head Athletic Trainer: Bill Kauth  
Assistant Athletic Trainer: Emily Miller  
2nd Year GA Athletic Trainers: Peter Benjamin, Becky Mihalovits  
1st Year GA Athletic Trainers: Adam Kelly, Kathryn Deterding

Job Description:
- Students may be responsible for paperwork. Examples are entering information on athlete’s files, filling out soap notes, treatment logs, daily injury reports, etc.
- Assist in preparing athletes for practices and games, including taping, treatments, injury evaluations, and rehab.
- Close athletic training room (clean up from the day’s activities...tables, take laundry down, pick up used tape and put away, empty unused ice bags, turn of modalities, drain whirlpools)
- Attend practice and games (home)
- Perform treatments/rehab before and or after practice or games

Expectations:
- Be back for two-a-days (fall).
- Be ready to come in first day of semester (January).
- Stay to the end of your semester.
- Be available for home contests.
- Come in an hour before your practice (more if determined by your preceptor)
- End of day time will vary from day to day depending on when your practice starts.
- Dress appropriately. Khaki pants or shorts, athletic pants or shorts, IWU shirt, closed toe shoes. For outdoors dress in whatever will keep you warm and dry. Hats are permissible outside only.
- Call, text, or email with scheduling issues (occasional problems that may arise). It appreciated the more advance the better.
- When here, pay attention to what is going on here...avoid social texting and cell phone use
- Bring your favorite textbook to refer to when injuries arise.
- Treat all athletes and sports equally.
- Be proactive. Don’t wait to be asked to do something.
- No socializing outside of IWU with your team while you are working with them.

Fall semester: Sports include Football, Men’s Soccer, Women’s Soccer, Cross Country, Volleyball and Women’s Tennis. All ISU students need to be available from 3 p.m. to 7 p.m. during the fall semester. Practice time for most sports is 4:00 – 6:00 p.m. during the week but occasionally this will vary. Practice begins the first part of August with 2-a-day practices, and the competitive season runs from the end of August through the first part of December. Students can travel (not required) to in-state games and matches but will not travel out of state. Any time the team is away on a road trip (usually alternate weeks), the students will have days off. Students will be expected to help provide coverage for home matches during the week and on weekends. Duties are the usual: taping, treatment, rehabilitation, getting water and ice ready for practice and
assist with clean up after practice. Expectations: Students must be able to come for the start of 2-a-days and be available for all home contests (unless there are class conflicts). Students will go to practice and assist with duties as needed at practice.

**Winter:** Sports include Men’s Basketball, Women’s Basketball Indoor Track and Swimming. All ISU students need to be available from 3 p.m. to 7 p.m. during the winter season. Practice time for these sports is 4:00 – 6:00 p.m. or 6:00 – 8:00 p.m. during the week but occasionally this will vary. Practice begins the first part of October and the competitive season runs from the beginning of November to March. Students can travel (not required) to in-state games and matches but will not travel out of state. Any time the team is away on a road trip (usually alternate weeks), the students will have days off. Students will be expected to help provide coverage for home games during the week and on weekends. Duties are the usual: taping, treatment, rehabilitation, getting water and ice ready for practice and assist with clean up after practice.

**Spring Semester:** Sports include Baseball, Softball, Men’s Tennis, and Outdoor Track. All ISU students need to be available from 3:00 to 7:00 p.m. during the spring semester. Practice time for these sports is 4:00 – 6:00 p.m. or 6:00 – 8:00 p.m. during the week but occasionally this will vary. Practices begin in January and usually finish by the end of May. The spring season sports are not as hectic and students can have days off as needed. Students can be as involved as they want with practices and game coverage. The duties are similar to Fall sports but they may be asked to help with off-season football, soccer or volleyball as needed.
Neuro Ortho Rehab Center (NORC)

**PRECEPTORS:** Joe Kingdon, Kyle Nolan, Tim Boerger

Central Illinois Orthopedic Surgery is committed to excellence by pledging to provide the highest quality of orthopedic care possible. Some of our specialties include Total Hip Replacement, Total Knee Replacement, Shoulder Joint Replacement, Anterior Cruciate Ligament (ACL) Injury, Stress Fractures, Sciatica, Bursitis and Arthritis. Along with the treatment of immediate or chronic problems, we strive to integrate the doctrine of prevention in all our treatment plans as a way to alleviate possible future difficulties.

Dr. Lawrence Nord and Dr. Brett Keller

Neuro Ortho Rehab Center (NORC)
808 S Eldorado Rd # 2W Bloomington, IL 61704 (309) 661-0232

Central Illinois Orthopedic Surgery (CIOS)
1505 Eastland Dr # 220
Bloomington, Il 61704 (309) 662-2278
Dr. Nord and Dr. Keller

M/W/F – NORC: we are open from 7am to 6pm.
T/TH – CIOS: Dr. Nord’s morning clinic runs from 7am to around 10:30am
Dr. Keller’s afternoon clinic starts at 12pm and lasts until about 4:30-5pm. (Basically, we leave when all of the patients are discharged, restocking is complete and rooms are cleaned)

1. **Job description:**

**NORC** – Clinicians are responsible for taking a patient (pre/post-op or non-surgical) through their specifically designed physical therapy routine. Each patient has an hour time slot allotted to them, to which they can perform rehabilitative exercises fitting their individual needs. The physical therapist sets the initial PT routine, but it is up to the clinician to progress the patient thereafter, using acquired knowledge of anatomy and physiology, biomechanics, therapeutic exercise and therapeutic modalities.

**CIOS** - Clinicians hold the responsibility of rooming the patients at the hospital clinic when they arrive for their visit. Extensive medical history must be obtained while rooming the patients. Clinicians follow any and all orders placed upon them by the doctors, while preparing injections, ordering x-rays, fitting orthotics, applying casts, removing sutures and practicing sterile wound care. Computer skills are required for this position, as the company just transitioned to electronic medical records (EMR).

**Outreach** – LeRoy High School, University High School, ISU Club Hockey
Dr. Keller is the team physician for these three schools, even though ISU provides Graduate Students to U-High. Outreach is sporadic, but we provide coverage when necessary. We also act as a liaison between these three schools and Dr. Keller.

2. **Expectations:**

All students are responsible for being on time to clinicals, with proper and clean attire to be worn everyday. Please, do not wear jeans or open-toed shoes. When dealing with patients, a professional attitude and demeanor must be exemplified at all times because you are a DIRECT reflection of the ENTIRE COMPANY, doctors, physical therapist, clinicians, and staff.
Schedules can be erratic at times, as well as patients. Remember, this is an orthopedic setting, tempers can flare and people are in pain. It is absolutely necessary to be firm, understanding and compliant with patients, especially if we are running behind schedule at the hospital clinic. Composure is key during stressful situations, and without doubt, at some point you will be placed in highly intense, demanding situation.

3. Perks:

More commonly, you will see ATs working in orthopedic and clinical settings. We have the opportunity to give you all aspects of athletic training: physical therapy, wound care, emergency aspects/on the field training, and clinical evaluation. Often, physicians choose to bring athletic trainers on board because we provide our knowledge of orthopedic injuries and clinical abilities such as history taking and our instructions on injury prevention and rehabilitation to the general patient.

Guaranteed, you will expand your athletic training knowledge while working at this clinic. You will deal with injuries and rehabilitative programs that go beyond the typical AT injuries. As a student, you will have responsibilities that you will feel good about completing. And working alongside two Orthopedic Surgeons is a great addition to any résumé.

This is a fantastic setting to hone your anatomy and evaluation skills. In future situations you will be able to quickly recall your experiences here, and apply pertinent information to provide the best possible treatment to your patients/athletes.
PRECEPTORS: Jackie Lampert, Lydia Morgan, Yuya Mukaihara

Job Description:

Assist in preparing athletes for practices and games, including taping, treatments, injury evaluations, and rehabilitation.

Prepare supplies for the day – stock med kits & taping tables, ensure that water coolers and water bottles have been filled.

Attend practices and all home games.

Assist with basic maintenance of the training room – cleaning tables, floors, stocking drawers, etc.

Expectations:

Fall Semester – Football, Boys’ Soccer, Cross Country, Volleyball

If available to help with 2-a-days, please contact preceptors about specific times.

Arrive promptly at 2:00 p.m. every practice day to assist in setting up for practice (filling the water hogs, coolers, water bottles, athletic training kits, etc.) prior to athletes getting done with school.

Practice typically finishes by 6:15 p.m. and you will be allowed to leave once everything has been put away for the day and athletes treated.

Competition days are different depending on the sport, so please discuss this with your preceptors once you arrive to figure out which games you will be attending to get a rounded experience.

Higher level athletic training students may have the opportunity to travel to away football games.

You will be expected to work on Saturdays if there are home competitions; however, days off will be allowed and discussed once you arrive.

* Sports transition in November to boys and girls basketball and wrestling.

Winter (Spring) Semester- Boys’ Basketball, Girls’ Basketball, Boy’s Wrestling

Arrive promptly at 2:30 p.m. for practice every day to assist in preparing athletes for practice.

Practice typically finishes by 5:30 p.m. and you will be allowed to leave once athletic training room is cleaned and prepared for the next day.

Wrestling – you will assist in hydration and body fat testing if necessary.

Competition days are different depending on the sport, so please discuss this you’re your preceptors once you arrive to figure out which games you will be attending to get a rounded experience.

No traveling is required for winter sports.

You will be expected to work on Saturdays if there are home competitions; however, days off will be allowed and discussed once you arrive.

* Sports transition in March to girls’ soccer, boy’s baseball, girls’ softball, boy’s tennis and track and field.

Spring Semester – Baseball, Softball, Girls’ Soccer, Track & Field

Arrive promptly at 2:15 p.m. every practice day to assist in setting up for practice (filling the water coolers, water bottles, athletic training kits, etc.) prior to athletes getting done with school.

Practice typically finishes by 5:30 p.m. and you will be allowed to leave once everything has been put away for the day and athletes treated.

Competition days are different depending on the sport, so please discuss this with your preceptors once you arrive to figure out which games you will be attending to get a rounded experience.

No traveling is required for spring sports.
You will be expected to work on Saturdays if there are home competitions; however, days off will be allowed and discussed once you arrive.

**Perks of working at NCHS:**

- We have a variety of competitive teams that are enjoyable to watch.
- There are many opportunities for you to be creative with assisting with rehabilitation and treatment protocols.
- The more relaxed environment allows for you to interact with high school athletes, practice your newly acquired clinical skills, and learn more about athletic training!
- There are never practices or home competitions on Sundays.
Normal Community West High School

**PRECEPTORS:** Kayla Baker, Jessica Wooldridge

### Job description
- Attend all practices and both home and away games (we only travel away with football)
  - Fall Sports: Football, Men’s Soccer, Cross Country, Women’s Volleyball,
  - Winter Sports: Wrestling, Women’s Basketball, Men’s Basketball,
  - Spring Sports: Women’s Soccer, Track, Baseball, Softball
- Evaluation, treatment, and rehabilitation of injuries
- Cleaning, organizing, and restocking the ATR
- Documentation of injuries

### Expectations
- Be available for home and away games
- Be able to come in at 2:30 every day and stay until the end of practice (around 6:00 pm but varies from day to day)
- Saturdays are expected, Sundays are always off
- You get one day off a week
- Dress appropriately
- Contact your preceptor with scheduling conflicts/emergencies
- Have your cell phone on silent and put away, no texting/calls/games
- Pay attention to what is going on, do what you can, and ask questions.
- May bring homework to do during down time but you still must pay attention to practice.

### Perks
- We have limited resources so we are always thinking out of the box and finding new ways to treat and rehabilitate injuries. It is a new and different thought process.
- High school sports have a different atmosphere; no two days are the same. It is a fun work environment that keeps you on your toes.
- You get to see a wide range of injuries by covering multiple sports at one time.
SMART Clinic

PRECEPTORS: Justin Stanek, Ashley Keck

Job Description

Hours:

Fall
- Monday—Friday from 2:00pm – 6:00pm
- Weekend appointments will be made on an individual basis.

Spring
- Monday and Wednesday from 2:30pm – 6:00pm
- Tuesday, Thursday, & Friday from 2:00pm – 6:00pm
- Weekend appointments will be made on an individual basis.

Duties:
Attend during all assigned hours.
Assist will all aspects of clinic operations, including, but not limited to:
- Scheduling patients
- Patient check-in and payment
- Documentation and maintaining patient records
- Injury assessment
- Patient education
- Treatment, rehabilitation, and reconditioning
- Maintaining inventory
- Clinic upkeep including restocking supplies and cleaning
- Maintaining communication with Student Health Services

Expectations:
- Communication with preceptors is essential. You are expected to be at the clinic during your assigned hours. If a conflict arises, communicate this to your preceptors so we know not to expect you.
- Take initiative! Help out to your knowledge and skill level. Don’t be afraid to ask questions if you are unsure.
- Remain professional at all times. This is a health care facility and we rely on word of mouth for advertising. We strive to provide optimal rehabilitation services and education to restore the patient to normal function. Your interactions with patients will affect the experience of the patient so it is paramount that the patient has an outstanding experience.
- Cell phones: Students are expected to remain off their cell phone during clinic hours. If you must make or receive a call, go to the office (254A).
- Be an advocate for our services. Help spread the word to the student body about the services we provide.
- Naturally, there will be some downtime during clinic hours. Use this time to help with documentation, cleaning, and any other tasks that need to be completed. If these tasks are finished, use the time to practice skills or study for your AT classes. Use the resources/preceptors around you!!!

Appearance
Athletic training students are expected to dress appropriately while in the SMART clinic. Remember, this is a health care facility so students are expected to look professional. “Business casual” should be the standard dress code for the facility. This includes khaki or similar styled pants and a polo shirt. Shirts must be tucked in for
males. Females wearing women’s cut shirts may leave their shirt untucked, but skin should not be exposed while bending down or lifting arms. Students are encouraged to wear their ISU athletic training gear but may also wear any polo or dress shirt of choice. Athletic or dress shoes (closed toe) must be worn. When in doubt about a clothing choice, ask the preceptor to avoid being sent home to change.
PRECEPTORS: Shannen Falconer, Britany Schulz

Job description
- Attend all practices and both home and away games (we only travel away with football)
  - Fall Sports: Football, Men’s Soccer, Cross Country, Women’s Volleyball,
  - Winter Sports: Wrestling, Women’s Basketball, Men’s Basketball,
  - Spring Sports: Women’s Soccer, Track, Baseball, Softball
- Immediate care, evaluation, treatment, and rehabilitation of injuries
- Cleaning, organizing, and restocking the ATR
- Documentation of injuries

Expectations
- Be available for home and away games
- Be able to come in at 2:30 every day and stay until the end of practice (around 6:00pm but varies from day to day)
- Saturdays are expected, Sundays are always off
- You get one day off per week
- Dress appropriately
- Contact your preceptor with scheduling conflicts/emergencies
- Have your cell phone on silent and put away, no texting/calls/games
- Pay attention to what is going on, do what you can, and ask questions.
- May bring homework to do during down time, but you still must pay attention to practice.

Perks
- We have limited resources so we are always thinking out of the box and finding new ways to treat and rehabilitate injuries. It is a new and different thought process.
- High school sports have a different atmosphere; no two days are the same. It is a fun work environment that keeps you on your toes.
- You get to see a wide range of injuries by covering multiple sports at one time.
Appendix F

Clinical Site Emergency Action Plans

Accelerated Rehab and Sports Medicine

Accelerated Rehab and Sports Medicine Emergency Action Plan

1715 Bradford St. Suite 140
Normal, IL 61761

Emergency Communication
A fixed telephone line is located at the front desk. The phone number is: (309) 888-4828

Emergency Phone Numbers
Ambulance/Police/Fire 911

Emergency Personnel
Josh Smith, Physical Therapist Cell: (309) 706-8761
Michelle Novak, Athletic Trainer Cell: (309) 212-9741

Emergency Equipment
Ambu-Bag located in the top left cabinet. Fire extinguishers are located at both the front and back door. A sprinkler system, fire alarm, and emergency lights are all in place as well.

Emergency Procedure
If a patient complains of crushing chest pain, shortness of breath, profuse sweating, and may or may not have pain radiating to jaw or arms discontinue exercise and call 911. In the case that a patient loses consciousness, call for help and initiate CPR.

Venue Directions
From North Main, turn right on Raab Road, Left on Bradford.
From Veterans Parkway, head north on College Road, turn right on north Main, right on Raab Road, and left on Bradford.

Natural or Man-Made Disasters
Fire: In case of a fire, exit the closest door either in the front or the back of the clinic.

Tornado/Earthquake: In the event of a tornado or earthquake enter the treatment room, close the door, and crouch down on the floor.

Training
At the beginning of every semester, an individual associated with Accelerated Rehab will review the EAP for this facility. It is the students responsibility to read and understand the procedures of the EAP prior to orientation at this clinic.
Bloomington Blaze Hockey

Bloomington Blaze
EMERGENCY ACTION PLAN SUMMARY
US Cellular Coliseum

1) CHAIN OF COMMAND
   a) Team Physician
   b) Home Certified Athletic Trainer (ATC)
   c) Visiting Certified Athletic Trainer (ATC)
   d) Coaching/Equipment Staff (E.M.)

   ➢ If Team Physician or Home ATC is ON SITE, he/she will take command.
   ➢ If Team Physician or Home ATC is NOT ON SITE, the next person in the chain of command is in charge.

2) EMERGENCY PERSONNEL
   ➢ Per Central Hockey League Protocol, these individuals WILL be ON SITE during ALL CHL GAMES held at US Cellular Coliseum:
      a) Team Physician
      b) Home Certified Athletic Trainer
      c) Visiting Certified Athletic Trainer
      d) EMS Personnel

   ➢ Per Central Hockey League Protocol, these individuals WILL be ON SITE during ALL CHL PRACTICEs held at US Cellular Coliseum:
      a) Home Certified Athletic Trainer
      b) Visiting Certified Athletic Trainer

3) EMERGENCY COMMUNICATION
   ➢ IN-GAME emergency communication via RADIO by Home ATC to bench security when injury is on the ice.
   ➢ PRACTICE emergency communication via:
      a) Home ATC Cell Phone
      b) Visiting ATC Cell Phone
      c) Home Athletic Training Room Phone

4) AED
   ➢ Available in athletic trainers office, at Nurses Station behind Section 110, & in Main Coliseum Office behind Club

5) EMERGENCY EQUIPMENT
   ➢ Available in athletic trainers office & at Nurses Station behind Section 110

6) ACCESS TO VENUE
US Cellular Coliseum
101 South Madison St.
Bloomington, IL 61701
   Emergency access via VIP Entrance on south side of building in the cul de sac near the parking garage.
   Continue south on Madison Street and turn left (east) on Olive Street. Take first left after the parking garage into cul de sac.

ON ICE INJURY PROTOCOL

   ➢ In the event of an ON-ICE INJURY during a game, these steps will be followed:
   1) ATC of injured player will respond, ON-ICE, to the injured player.
   2) If that ATC is unavailable, the opposing team ATC will respond to injured player.
   3) ATC will determine severity of the injury, if needed he/she will activate the EAP.
   4) In the event a physician is needed, the ATC will signal the Overseeing Team Physician using a CLOSED FIST. Initially, the Overseeing Team Physician will be the ONLY Medical Staff allowed on the ice. Other Medical Staff should be available and ready, and will be summoned as needed.
   5) In the event of a life threatening injury, the ATC will contact the emergency response team.
6) Designated ON-ICE EMS Team will enter the rink thru the VIP Entrance w/ kit, Spine board & Stretcher.
7) Designated ON-ICE EMS Team will be summoned by either the Captain or Alternate and respond through the home bench.
8) If spineboard or stretcher is warranted, EMS team and injured player will be escorted through player entrance doors near the Pepsi ice box area.
9) Bloomington FD will notify External Ambulance Transportation Service if additional service is needed.
10) A representative of the Injured Player will travel with the Injured Player to OSF St. Joe Medical Center Emergency Room.

Medical Emergencies During Practice

In the event of a medical emergency during practice, the athletic trainer will follow the following steps to initiate EAP:

Dial 911
- Request EMS crew to US Cellular Coliseum
- Instruct EMS to arrive at loading dock entrance
- Inform them someone will be waiting at loading dock for arrival

Address:
US Cellular Coliseum
101 South Madison St.
Bloomington, IL 61701

- Instruct Coach, Player or other arena staff member to wait at the loading dock for EMS crew to arrive, grant them access into building and guide them to the scene of the emergency

A representative of the Injured Player will travel with the Injured Player to OSF St. Joe Medical Center Emergency Room.

Once emergency calls have been made, Athletic Trainer or Equipment Manager will advise Head Coach and/or General Manager of situation at the soonest appropriate time.
Bloomington High School

Emergency Personnel:
Certified athletic trainer will be on site for practices; ATC and EMS will be on site for all competitions
Athletic director will be on site for competition
Physician on-site when needed for practice and competition

Compliances:
All ATCs, coaches, and assistants must be certified in CPR, must have a copy of the EAP, know how to properly activate the EAP
The ATC should go over the EAP with the Athletic Director, Principal, Coaches, and EMS
Insurance information and other medical forms should be kept on site

Emergency Communication:
Personnel, Cellular Phone

Emergency Equipment:
Athletic Training Kit: first aid supplies, gloves, CPR mask, tape supplies, blood pressure cuff, stethoscope, towels, biohazard supplies; emergency equipment: AED, spine board, splint; additional supplies can be found in the athletic training room located inside the Robert Frank Sports Complex using the Northwest entrance

Roles of First Responders:
Certified Athletic Trainer: will play the role of first responder and take over immediate care, activate the emergency action plan by signaling to the rest of the personnel, perform first aid and CPR, attend hospital with athlete, complete an incident report
Graduate Assistant/Athletic Training Students- assist the ATC as directed, emergency equipment retrieval
Athletic Director - contact 911/EMS, open all gates
Coaches - crowd control, keep other athletes away from the injury, assist with any further needs by the ATC

Activation of EMS:
Call 911- Identify your name with title, where you are calling from, the location of the telephone being used, type of emergency situation, present condition of the athlete, current assistance being given, exact location of the emergency, how to enter the facility, do not hang up until dispatch tells you to

Football field directions:
Facility is located south of the high school, with EMS entrance at the southwest gate of the football field located on Clinton Street

Staff and Phone Numbers:
Aaron Weidman, ATC (815) 712 - 1849 (mobile)
John Szabo, Athletic Director (309) 830 - 5220 (mobile)
EMERGENCY INFORMATION

Emergency Action Plan

Corn Crib / Practice Field

1. An athletic trainer or student trainer will performed the primary and secondary surveys during athletic event.
2. If an athletic trainer is not present, a coach or team staff will call athletic trainer. If an athletic trainer is not available, a coach will call 911.
3. The athletic trainer in charge will designate an individual to call for an EMS unit.
4. The athletic trainer in charge will designate an individual to wait for the EMS unit at the center field gate.
5. The individual who calls the EMS unit will provide the following information:
   a. Primary survey status
   b. Detailed information of emergency
   c. Exact location
   d. Exact location of where EMS should arrive
   e. Call back telephone number where this person may be reached
6. The parents of the injured/ill student-athlete will be called and notified of the injury/illness

Venue Directions

Corn Crib Stadium:
From Main Street, take Raab rd to west and drive ½ mile, the Stadium is on right. Turn the first road into parking lot and access to the field through the center field gate.

Practice Field:
Practice field is located north to the stadium.

Emergency Phone
There is no emergency phone available in the Corn Crib or on the practice field. An athletic trainer (a coach if an athletic trainer is not present) must have his/her own cell phone for emergency call.

Emergency Equipments

An AED, Vacuum Splints, cervical collar and CPR mask will be available in the home dugout/bench for game events. For practice events, an AED is available in the west side locker room in the 2nd floor of the clubhouse. No Spine board is available. Removal from the field for suspected spinal injury must be operated by EMS.

Emergency Room

BroMenn Medical Center
1304 Franklin Avenue
Normal, IL 61761-3558
(309) 454-1400

Emergency Phone Numbers

Ambulance/Police/Fire 911
Tosh Kajiyama, Athletic Trainer (617) 935-1929 (Cell)
(309) 268-8767 (Fitness and Rec Center)
Matt While, Athletic Trainer (309) 531-7566 (Cell)

Nate Metzger, Athletic Director (309) 268-8418 (Office)
(309) 261-6170 (Cell)
ILLINOIS STATE UNIVERSITY ATHLETIC TRAINING
EMERGENCY PLAN

The following is a list of emergency hand signals, which will be used during practice/competitions to get emergency equipment to an injured individual. Additionally a list of emergency phone numbers for specific staff members as well as AED locations are also included on this page. Specific emergency plans for each practice/competition site are outlined on separate pages.

**EMERGENCY COMMUNICATION HAND SIGNALS:**
- "Tap top of head with right hand" — Need team physician
- "Circle overhead with index finger" — EMS needed
- "Safe sign in baseball/softball" — Spine Board
- "Blowing into closed fist" — Vacuum Splints
- "Turning a steering wheel" — Need Gator/Golf Cart
- "Thumping on chest over heart" — Need the AED

**AED LOCATIONS**
- NW Corner of Horton Fieldhouse by glass elevator
- Between men’s/women’s restroom at baseball facility
- East wall of Horton pool
- Inside west facing doors of Weibring Golf Clubhouse

**EMERGENCY EQUIPMENT LOCATIONS IN ATHLETIC TRAINING ROOMS**
- **Kaufman Football Athletic Training Room** - Spine board against windows of hydrotherapy area; vacuum splints and cervical collar under treatment table. CPR mask on the wall next to the sink. Crutches in the storeroom.
- **Horton Fieldhouse Athletic Training Room** - Spine Board, vacuum splints and cervical collar in small storeroom. CPR mask on the wall under wall cabinets. Crutches on wall in physician’s area.
- **Redbird Arena Athletic Training Room** - Spine Board, vacuum splints, cervical collar and crutches in storeroom. CPR mask on the wall under the wall cabinets.
- **AEDs** - Golf Course Clubhouse, Northwest Wall of Horton (beside glass elevator), and on wall at South-West Loading dock (By elevator) in Redbird Arena

**EMERGENCY PHONE NUMBERS**

<table>
<thead>
<tr>
<th>Service</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>911</td>
<td></td>
</tr>
<tr>
<td>Ambulance/Police/Fire</td>
<td></td>
</tr>
<tr>
<td>Illinois State Health Services</td>
<td>(309) 438-8655</td>
</tr>
<tr>
<td>Illinois State Campus Police</td>
<td>(309) 438-8631</td>
</tr>
<tr>
<td>John Munn, Head Athletic Trainer</td>
<td>(309) 824-1692</td>
</tr>
<tr>
<td>Arena Athletic Training Room</td>
<td>(309) 438-7328</td>
</tr>
<tr>
<td>Horton Athletic Training Room</td>
<td>(309) 438-3110</td>
</tr>
<tr>
<td></td>
<td>(309) 888-9017</td>
</tr>
<tr>
<td>Joe Whitson, Associate Athletic Trainer</td>
<td>(309) 824-0109</td>
</tr>
<tr>
<td>Kaufman Football Bldg Ath. Training Room</td>
<td>(309) 438-3282</td>
</tr>
<tr>
<td>Horton Fieldhouse Athletic Training Room</td>
<td>(309) 438-7246</td>
</tr>
<tr>
<td></td>
<td>(309) 359-5064</td>
</tr>
<tr>
<td>Kristen Brummett, Assistant Athletic Trainer</td>
<td>(785) 564-7410</td>
</tr>
<tr>
<td>Horton Fieldhouse Athletic Training Room</td>
<td>(309) 438-3340</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Kelly Haley, Assistant Athletic Trainer</td>
<td>(407) 506-8376</td>
</tr>
<tr>
<td>Redbird Arena Athletic Training Room</td>
<td>(309) 438-2398</td>
</tr>
</tbody>
</table>
Lindsey Schroeder, Assistant Athletic Trainer  
(248) 330-5394 Cell  
Redbird Arena Athletic Training Room  
(309) 438-2398 Office  

Graduate Assistant Athletic Trainers – Horton GA Office (309) 438-3340; Kaufman GA Office (309) 438-3111  
<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Jordan Anderson</td>
<td>(815) 670-4187</td>
<td>Cell</td>
</tr>
<tr>
<td>Corey Lanois</td>
<td>(401) 651-1737</td>
<td>Cell</td>
</tr>
<tr>
<td>Rob Lynall</td>
<td>(309) 339-2261</td>
<td>Cell</td>
</tr>
<tr>
<td>Kele Mangus</td>
<td>(571) 334-2380</td>
<td>Cell</td>
</tr>
<tr>
<td>Stephanie Rendall</td>
<td>(847) 946-0392</td>
<td>Cell</td>
</tr>
<tr>
<td>Katie Rogers</td>
<td>(815) 260-1323</td>
<td>Cell</td>
</tr>
<tr>
<td>Scott Waehler</td>
<td>(715) 892-5220</td>
<td>Cell</td>
</tr>
<tr>
<td>Melissa Wenig</td>
<td>(920) 420-6560</td>
<td>Cell</td>
</tr>
</tbody>
</table>
HORTON FIELDHOUSE - NORTH GYM
Emergency Plan
Emergency Map Location: C

Emergency Personnel:

1. An athletic training staff member or student will perform primary and secondary surveys during practices/events. They will evaluate and stabilize the athlete.
2. If an athletic trainer is not present, a coach or manager will call the athletic training room or send a designated individual into the athletic training room to get an athletic trainer. A walkie-talkie can be utilized if available to call for an athletic trainer. If an athletic trainer is not available, a coach will call 911.
3. The athletic trainer in charge will designate an individual to call for an EMS unit.
4. The athletic trainer in charge will designate an individual to wait for the EMS unit at doors at the end of the “driveway” entrance to Horton in front of the K & R Equipment room.
5. Bromenn Hospital is the preferred medical facility for Illinois State University student-athletes

Emergency Communication:

1. A staff or student athletic trainer will designate an individual to call EMS from the phone in the athletic training room in one of the offices or call the athletic training room on the walkie-talkie and they will call for EMS.
2. If an athlete is injured during a non-traditional season workout, the coach should send someone into the athletic training room or call the athletic training room. If an athletic trainer is not available, the coach should call EMS at 911.
3. In the absence of an athletic trainer, a coach will make the 911 EMS call.
   a) Primary survey status
   b) Detailed information of emergency
   c) EXACT location of injured
   d) EXACT location of where EMS should arrive
4. The individual who calls the EMS unit will provide the following information:
5. The staff or student athletic trainer or coach will designate an individual to wait for the EMS unit at the doors at the end of the “driveway” entrance to Horton in front of the K & R Equipment room.
6. The staff athletic trainer overseeing the sport should be called immediately if not present.
7. A staff athletic trainer will call the team physician and notify him or her of the injury/illness.

Emergency Equipment

1. Vacuum splints, cervical collar, and spinal board are located in the athletic training room in the small storeroom.
2. A CPR mask is located in the sport athletic training bags and on the wall in the athletic training room under the wall cabinets.
3. An EMS unit will be called if needed according to the plan under Emergency Communication.
4. An AED is available on the Northwest wall of the fieldhouse in Horton next to the glass elevator.

Venue Directions: From Adelaide Street turn between the Softball field and Wright Hall dormitory. As the road bends right past Wright Hall turn into the parking lot south of the track and go east. The “driveway entrance” for Horton Fieldhouse is right before the hill on the right (the hill leads up to the football field). To enter North Gym, go thru glass doors at the end of the “driveway entrance” turn right. The North Gym is on your right.
**Emergency Personnel:**

1. An athletic training staff member or student will perform primary and secondary surveys during practices/events. They will evaluate and stabilize the athlete.
2. If an athletic trainer is not present, a coach or manager will call the athletic training room or send a designated individual into the athletic training room to get an athletic trainer. A walkie-talkie can be utilized if available to call for an athletic trainer.
   If an athletic trainer is not available, a coach will call 911.
3. The athletic trainer in charge will designate an individual to call for an EMS unit.
4. The athletic trainer in charge will designate an individual to wait for the EMS unit at the top of the hill on the north end of Horton Fieldhouse. They will direct the EMS unit to the SE gate of the grass practice field.
5. Bromenn Hospital is the preferred medical facility for Illinois State University student-athletes

**Emergency Communication:**

1. The certified graduate assistant athletic trainer or the designated athletic training student will call EMS on the head athletic trainers cell phone at 911 and direct the ambulance to the proper location. The telephone in the athletic training room in the Kaufman Football Complex or on the wall inside the back door to Kaufman will be used if there is no cell phone available and the number to dial is 9-911.
2. An athletic training student will go to the South entrance of the grass practice field or to the Northwest entrance to Hancock Stadium to wait for and direct the EMS unit to the injured athlete.
3. A team physician will be present at all home games and will be signaled for by the head athletic trainer or certified graduate assistant by tapping the top of the head repeatedly.
4. The individual who calls the EMS unit during practices will provide the following information:
   a) Primary survey status
   b) Detailed information of emergency
   c) EXACT location of injured
   d) EXACT location of where EMS should arrive
5. A staff athletic trainer should be called immediately and notified of the injury, if not present.
6. A staff athletic trainer will call the team physician and notify him or her of the injury/illness.

**Emergency Equipment**

1. A spine board with cervical collar, vacuum splints, airways, and CPR mask will be on site at every practice/game and will be located on the Northwest side of the stadium and on the East side of the grass practice field.
2. An EMS unit will be on site during all games and will be located at the Northwest entrance. The EMS unit will be summoned by a designated athletic training student during games with a description of the injury
3. A designated student athletic trainer will wait for an EMS unit if an injury occurs during a practice. They will be at the Northwest gate to the stadium or the Southeast entrance to the practice field.
4. An AED is located on the Northwest wall of Horton Fieldhouse next to the glass elevator.

**Venue Directions:** From Adelaide Street turn between the Softball field and Wright Hall dormitory. As the road bends right past Wright Hall turn into the parking lot south of the track and go east. Continue up the hill to the end of the parking lot. The practice field entrance is on your left (North) immediately past the maintenance shed.
**Emergency Personnel:**

1. An athletic training staff member or student will perform primary and secondary surveys during practices/events. They will evaluate and stabilize the athlete.
2. If an athletic trainer is not present, a coach or manager will call the athletic training room or send a designated individual into the athletic training room to get an athletic trainer. A walkie-talkie can be utilized if available to call for an athletic trainer.
   - If an athletic trainer is not available, a coach will call 911.
3. The athletic trainer in charge will designate an individual to call for an EMS unit.
4. The athletic trainer in charge will designate an individual to wait for the EMS unit at the top of the hill on the north end of Horton Fieldhouse. They will direct the EMS unit to the NW Gate of Hancock Stadium.
5. Bromenn Hospital is the preferred medical facility for Illinois State University student-athletes.

**Emergency Communication:**

1. The certified graduate assistant athletic trainer or the designated athletic training student will call EMS on the head athletic trainer’s cell phone at 911 and direct the ambulance to the proper location. The telephone in the athletic training room in the Kaufman Football Complex or on the wall inside the back door to Kaufman will be used if there is no cell phone available and the number to dial is 9-911.
2. An athletic training student will go to the top of the hill on the north end of Horton Fieldhouse. They will direct the EMS unit to the NW Gate of Hancock Stadium.
3. A team physician will be present at all home games and will be signaled for by the head athletic trainer or certified graduate assistant by tapping the top of the head repeatedly.
4. The individual who calls the EMS unit during practices will provide the following information:
   - Primary survey status
   - Detailed information of emergency
   - EXACT location of injured
   - EXACT location of where EMS should arrive
5. A staff athletic trainer should be called immediately and notified of the injury, if not present.
6. A staff athletic trainer will call the team physician and notify him or her of the injury/illness.
7. The parents of the injured/ill student-athlete will be called and notified of the injury/illness.

**Emergency Equipment**

1. A spine board with cervical collar, vacuum splints, airways, and CPR mask will be on site at every practice/game and will be located on the Northwest side of the stadium and on the East side of the grass practice field.
2. An EMS unit will be on site during all games and will be located at the Northwest entrance. The EMS unit will be summoned by a designated athletic training student during games with a description of the injury.
3. A designated student athletic trainer will wait for an EMS unit if an injury occurs during a practice. They will await the EMS unit at the top of the hill on the north end of Horton Fieldhouse. They will direct the EMS unit to the NW Gate of Hancock Stadium.
4. An AED is located on the Northwest wall of Horton Fieldhouse next to the glass elevator.
Venue Directions: From Adelaide Street turn between the Softball field and Wright Hall dormitory. As the road bends right past Wright Hall turn into the parking lot south of the track and go east. Continue up the hill to the end of the parking lot. The Hancock Stadium entrance is immediately in front of you (west facing gates) at the end of the parking lot. Go down directly onto the asphalt portion of the field.

ILINOIS STATE UNIVERSITY
REDBIRD ARENA
Emergency Plan
Emergency Map Location: A

Emergency Personnel:

1. A staff athletic trainer or athletic training student will perform the primary and secondary surveys during practices and games. The will evaluate an injury and stabilize the athlete.
2. If an athletic trainer is not present, a coach or manager will call the athletic training room by phone or walkie-talkie or send a designated individual into the athletic training room to get an athletic trainer. If an athletic trainer is not available, a coach will call 911.
3. A team physician will be present for most games and will be summoned to the floor if needed by using the signal of tapping on the head with the hand repetitively.
4. An EMS unit will not be on site for games and must be summoned. The staff athletic trainer for each respective sport will signal for an EMS unit by twirling his or her finger in the air. The event manager will call for an EMS unit on the walkie-talkie. The athletic trainer in charge will tell the event manager what to say to the EMS dispatcher.
5. The staff athletic trainer or student will designate an athletic trainer or designated individual to call for an EMS unit during a practice and wait for that unit at the Southwest loading ramp off of College Avenue.
6. The individual who calls the EMS unit during practices will provide the following information:
   a. Primary survey status
   b. Detailed information of emergency
   c. EXACT location of injured
   d. EXACT location of where EMS should arrive
   e. Call back telephone number where this person may be reached
7. Lifeline will be activated if the situation requires ALS.
8. Normal Fire and Rescue shall be activated ONLY if transportation is needed to the local hospital. Bromenn Hospital should be used, as it is closer to campus.

Emergency Communication:

1. The staff or student athletic trainer will call for the EMS on a cell phone, if available or designate a student athletic trainer or other individual to call the EMS unit during practices using the telephone in the athletic training room and dialing 9-911. If a walkie-talkie is available, a call could be made to the athletic training room to call for an EMS unit.
2. If an athlete is injured during a non-traditional season workout, the coach should send someone into the athletic training room or call the athletic training room. If an athletic trainer is not available, the coach should call EMS at 911.
3. The event manager will call for the EMS unit on the walkie-talkie during a game.
4. The event manager will designate an individual during a game to wait in the Southwest loading ramp for the EMS unit.
5. The staff or head student athletic trainer will designate a student athletic trainer or other individual during practices to call for the EMS unit using the telephone in the athletic training room and dialing 9-911 and waiting in the Southwest loading ramp.
6. A staff athletic trainer overseeing the sport should be called immediately if not present.
7. A staff athletic trainer will call the team physician and notify him or her of the injury/illness.
8. The parents of the injured/ill student-athlete will be called and notified of the injury/illness.

Emergency Equipment

1. A spine board with cervical collar, vacuum splints and CPR mask will be on site at every practice/game and will be located under the bleachers behind the team bench in the Southwest loading ramp.
2. An EMS unit will be called if needed according to the plan under Emergency Communication.
3. An AED is available under the bleachers at the Southwest-loading ramp in Redbird Arena.

**Venue Directions:** Enter “garage door” of Redbird Arena from College Avenue

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**ILLINOIS STATE UNIVERSITY**

**DUFFY BASS BASEBALL STADIUM**

**Emergency Plan**

**Emergency Map Location:** K

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**Emergency Personnel:**

1. A staff athletic trainer or student will perform the primary and secondary surveys during practices/games. They will evaluate and stabilize the athlete. They will summon a full-time staff athletic trainer or a certified graduate assistant for assistance if not already present. When a certified athletic trainer is present; they will assume the primary care of the athlete.
2. If an athletic trainer is not present, a coach or manager will call the athletic training room or send a designated individual into the athletic training room to get an athletic trainer. If an athletic trainer is not available, a coach will call 911.
3. The athletic trainer in charge will designate an individual to call the athletic training room on the walkie-talkie and they will call for an EMS unit. This will be another athletic training student, coach or manager. A coach will open the press box prior to activity and the call should be made by dialing 9-911 if a walkie-talkie is not available.
4. The athletic trainer in charge will designate an individual to wait for the EMS unit at the Right field gate.
5. Lifeline will be activated if the situation requires ALS.
6. Normal Fire and Rescue shall be activated ONLY if transportation is needed to the local hospital. Bromenn Hospital should be used, as it is closer to campus.

**Emergency Communication:**

1. A staff athletic trainer or student will designate an individual to call the athletic training room on the walkie-talkie and they will call for EMS. If a walkie-talkie is not available, a call can be made from the press box for EMS. A coach will unlock the press box. A student athletic trainer, coach or manager should make the call by dialing 9-911.
2. If an athlete is injured during a non-traditional season workout, the coach should send someone into the athletic training room or call the athletic training room. If an athletic trainer is not available, the coach should call 911.
3. The event manager will call for the EMS unit from a walkie-talkie during a game. The athletic trainer in charge will tell the event manager what to say to the EMS dispatcher.
4. The event manager will designate an individual to wait by the Right field gate for the EMS unit during a game.
5. The individual who calls the EMS unit will provide the following information:
   a) Primary survey status
   b) Detailed information of emergency
   c) EXACT location of injured
   d) EXACT location of where EMS should arrive
   e) Call back telephone number where this person may be reached
6. The athletic trainer overseeing the sport should be called immediately if not present.
7. A staff athletic trainer will call the team physician and notify him or her of the injury.
8. The parents of the injured/ill student-athlete will be called and notified of the injury/illness.

**Emergency Equipment:**

1. Vacuum Splints, cervical collar and CPR mask will be on site for all practice/games.
2. A spine board is located in the Horton Fieldhouse athletic training room.
3. An EMS unit will be called if needed according to the plan under Emergency Communication.
4. An AED is available on the Northwest wall of Horton Fieldhouse.
**Venue Directions:** From Adelaide St turn into parking lot between the soccer field and softball field. Enter baseball field past the restroom facility to your left (north). Turn into the right field access of the outfield fence.

**ILLINOIS STATE UNIVERSITY**
**MARIAN KNEER SOFTBALL STADIUM**
**Emergency Plan**
**Emergency Map Location: N**

**Emergency Personnel:**

1. A staff athletic trainer or student will perform the primary and secondary surveys during practices/games. They will evaluate and stabilize the athlete and summon a full-time staff athletic trainer or a certified graduate assistant for assistance if one is not already present. When a certified athletic trainer is present; they will assume the primary care of the athlete.

2. If an athletic trainer is not present, a coach or manager will call the athletic training room or send a designated individual into the athletic training room to get an athletic trainer. If an athletic trainer is not available, a coach will call 911 using the press box telephone.

3. The athletic trainer in charge will designate an individual to call the athletic training room on the walkie-talkie and they will call for an EMS unit. This will be an athletic training student, coach or manager. If a walkie-talkie is not available, a call can be made from the press box by dialing 911. A coach will open the press box prior to activity. The athletic trainer in charge will designate an individual to wait for the EMS unit at the Left field gate.

4. Lifeline will be activated if the situation requires ALS.

5. Normal Fire and Rescue shall be activated ONLY if transportation is needed to the local hospital. Bromenn Hospital should be used, as it is closer to campus.

**Emergency Communication:**

1. The athletic trainer in charge will designate an individual to call the athletic training room on the walkie-talkie and they will call for an EMS unit. If a walkie-talkie is not available, an athletic training student, coach or manager should make the call by dialing 911 on the press box phone.

2. If an athlete is injured during a non-traditional season workout, the coach should send someone into the athletic training room or call the athletic training room. If an athletic trainer is not available, the coach should call 911.

3. The event manager will call for the EMS unit from a walkie-talkie during a game. The athletic trainer in charge will tell the event manager what to say to the EMS dispatcher.

4. The event manager will designate an individual to wait by the Left field gate for the EMS unit during a game.

5. The individual who calls the EMS unit will provide the following information:
   a) Primary survey status
   b) Detailed information of emergency
   c) **EXACT** location of injured
   d) **EXACT** location of where EMS should arrive
   e) Call back telephone number where this person may be reached

6. The staff athletic trainer overseeing the sport should be called immediately if not present.

7. A staff athletic trainer will call the team physician and notify him or her of the injury.

8. The parents of the injured/ill student-athlete will be called and notified of the injury/illness.

**Emergency Equipment:**

1. Vacuum Splints, cervical collar and CPR mask will be on site for all practice/games.

2. A spine board is located in the Horton Fieldhouse athletic training room.

3. An EMS unit will be called if needed according to the plan under Emergency Communication.

4. An AED is located on the Northwest wall of Horton Fieldhouse.

**Venue Directions:** From Adelaide St turn into parking lot between the soccer field and softball field. Immediately past softball field turn right. Enter softball field in the left field corner (northeast side). Turn into the left field access gate in the outfield.
ILLINOIS STATE UNIVERSITY
SOCCER STADIUM
Emergency Plan
Emergency Map Location: L or P

Emergency Personnel:

1. A staff athletic trainer or student will perform the primary and secondary surveys during practices/games. They will evaluate and stabilize the athlete. In the absence of a certified athletic trainer, an athletic training student will provide the primary care and call for a certified athletic trainer for assistance.

2. If an athletic trainer is not present, a coach or manager will call the athletic training room or send a designated individual into the athletic training room to get an athletic trainer. A walkie-talkie can be utilized to call the athletic training room. If an athletic trainer is not available, a coach will call 911.

3. The athletic trainer in charge will designate an individual to call an EMS unit.

4. The athletic trainer in charge will designate an individual to wait for the EMS unit at the East gate between the soccer stadium and the baseball stadium.

5. Lifeline will be activated if the situation requires ALS.

6. Normal Fire and Rescue shall be activated ONLY if transportation is needed to the local hospital. Bromenn Hospital should be used, as it is closer to campus.

Emergency Communication:

1. A staff athletic trainer or student will designate an individual to call EMS from the press box during practices or utilize a walkie-talkie to call the athletic training room. A coach will unlock the press box. An athletic training student, coach or manager should make the call by dialing 9-911.

2. If an athlete is injured during a non-traditional season workout, the coach should send someone into the athletic training room or call the athletic training room. If an athletic trainer is not available, the coach should call 911.

3. The event manager will call for the EMS unit from a walkie-talkie during a game. The athletic trainer in charge will tell the event manager what to say to the EMS dispatcher.

4. The event manager will designate an individual to wait by the East gate for the EMS unit during a game.

5. The individual who calls the EMS unit will provide the following information:
   a) Primary survey status
   b) Detailed information of emergency
   c) EXACT location of injured
   d) EXACT location of where EMS should arrive
   e) Call back telephone number where this person may be reached

6. The athletic trainer overseeing the sport should be called immediately and notified of the injury if not present.

7. A staff athletic trainer will call the team physician and notify him or her of the injury.

8. If the head coach is not present, a staff athletic trainer or student will notify him/her immediately.

9. The parents of the injured/ill student-athlete will be called and notified of the injury/illness.

Emergency Equipment:

1. Vacuum Splints, cervical collar and CPR mask will be on site for all practice/games.

2. A spine board is located in the Horton Fieldhouse athletic training room.

3. An EMS unit will be called if needed according to the plan under Emergency Communication.

4. An AED is located on the Northwest wall of Horton Fieldhouse.

Venue Directions:

1. From Adelaide St turn into parking lot between the soccer field and softball field. Immediately past the soccer field turn left (north) and go through the gate into driveway on east side of soccer field.

2. Alternate entrance: From Adelaide St turn into parking lot between the soccer field and softball field. Access soccer field through gate in the south end of the fence (below protective netting).
ILLINOIS STATE UNIVERSITY
HORTON FIELDHOUSE SOUTH GYM
Emergency Plan
Emergency Map Location: T

Emergency Personnel:

1. An athletic training staff member or student will perform the primary and secondary surveys during practices/games. They will evaluate and stabilize the athlete.
2. If an athletic trainer is not present, a coach or manager will call the athletic training room or send a designated individual into the athletic training room to get an athletic trainer. A walkie-talkie can be utilized if available to call the athletic training room. If an athletic trainer is not available, a coach will call 911. There is a phone on the North wall of the gymnasium.
3. The athletic trainer in charge will designate an individual to call an EMS unit.
4. The athletic trainer in charge will designate an individual to wait for the EMS unit at the West door of the South Gym.
5. Lifeline will be activated if the situation requires ALS.
6. Normal Fire and Rescue shall be activated ONLY if transportation is needed to the local hospital. Bromenn Hospital should be used, as it is closer to campus.

Emergency Communication:

1. A staff athletic trainer or student will designate an individual to call EMS from the phone on the North wall of the South Gym during practices or the phone in the athletic training room or Fieldhouse worker’s lounge in the garage on the West side of the fieldhouse, during meets.
2. If an athlete is injured during a non-traditional season workout, the coach should send someone into the athletic training room or call the athletic training room. A walkie-talkie can be utilized if available to call the athletic training room. If an athletic trainer is not available, the coach should call 911.
3. The event manager will call for the EMS unit from a walkie-talkie during meets. The athletic trainer in charge will tell the event manager what to say to the EMS dispatcher.
4. The event manager or athletic trainer in charge will designate an individual to wait by the West door to the South Gym if injury occurs during a practice or by the Northwest door to Horton Fieldhouse if injury occurs during a meet.
5. The individual who calls the EMS unit will provide the following information:
   a. Primary survey status
   b. Detailed information of emergency
   c. EXACT location of injured
   d. EXACT location of where EMS should arrive
   e. Call back telephone number where this person may be reached
6. The staff athletic trainer overseeing the sport should be called immediately and notified of the injury if not present.
7. If the head coach is not present, a staff athletic trainer or student will notify him/her immediately.
8. A staff athletic trainer will call the team physician and notify him or her of the injury.
9. The parents of the injured/ill student-athlete will be called and notified of the injury/illness.

Emergency Equipment:

1. Vacuum splints, cervical collar, spine board and CPR mask is located in the Horton Fieldhouse athletic training room. This equipment will be brought up to the floor for meets.
2. An EMS unit will be called if needed according to the plan under Emergency Communication.
3. An AED is located on the Northwest wall of Horton Fieldhouse.

Venue Directions: From Adelaide Street turn between the Softball field and Wright Hall dormitory. Once past Haynie Hall turn into the circle drive in front of Redbird Arena. Enter South Gym through the east facing doors that are south of the pool entrance (behind the pine trees)
Emergency Personnel:

1. A staff athletic trainer or student will perform primary and secondary surveys during practices/games. They will evaluate and stabilize the athlete.
2. If an athletic trainer is not present, a coach or manager will call the athletic training room or send a designated individual into the athletic training room to get an athletic trainer. A walkie-talkie can be utilized if available to call the athletic training room. If an athletic trainer is not available, a coach will call 911.
3. The athletic trainer in charge will designate an individual to call for an EMS unit.
4. The athletic trainer in charge will designate an individual to wait for the EMS unit at the Northwest door to Horton Fieldhouse.
5. Normal Fire and Rescue shall be activated ONLY if transportation is needed to the local hospital. Bromenn Hospital should be used, as it is closer to campus.

Emergency Communication:

1. A staff athletic trainer or student will designate an individual to call EMS from the phone in the Fieldhouse worker’s lounge area or the Horton Fieldhouse athletic training room during practices.
2. If an athlete is injured during a non-traditional season workout, the coach should send someone into the athletic training room or call the athletic training room. If an athletic trainer is not available, the coach should call EMS at 911.
3. The event manager will call for the EMS unit from a walkie-talkie during meets. The athletic trainer in charge will tell the event manager what to say to the EMS dispatcher.
4. The event manager or athletic trainer in charge will designate an individual to wait by the Northwest door of the Fieldhouse for the EMS unit.
5. The individual who calls the EMS unit will provide the following information:
   a. Primary survey status
   b. Detailed information of emergency
   c. EXACT location of injured
   d. EXACT location of where EMS should arrive
6. The staff athletic trainer overseeing the sport should be called immediately and notified of the injury if not present.
7. A staff athletic trainer will call the team physician and notify the physician of the injury.
8. If the head coach is not present, a staff or student athletic trainer will notify him or her immediately.
9. The parents of the injured/ill student-athlete will be called and notified of the injury.

Emergency Equipment:

1. Vacuum splints, cervical collar, spine board and CPR mask will be located in the Horton Fieldhouse training room downstairs from the track. This equipment will be brought up to the track for meets.
2. An EMS unit will be called if needed according to the plan under Emergency Communication.
3. An AED is located on the Northwest wall of Horton Fieldhouse.

Venue Directions: From Adelaide Street turn between the Softball field and Wright Hall dormitory. As the road bends right past Wright Hall turn into the parking lot south of the track and go east. Continue up the hill to the end of the parking lot. “Garage door” is to your right (south).
Emergency Personnel:

1. A staff athletic trainer or student will perform primary and secondary surveys during practices/meets. They will evaluate and stabilize the athlete.
2. If an athletic trainer is not present, a coach or manager will call the athletic training room or send a designated individual into the athletic training room to get an athletic trainer. A walkie-talkie can be utilized if available to call the athletic training room. If an athletic trainer is not available, a coach will call 911.
3. The athletic trainer in charge will designate an individual to call for an EMS unit.
4. The athletic trainer in charge will designate an individual to wait for the EMS unit at the West entrance to the swimming pool.
5. Lifeline will be activated if the situation requires ALS.
6. Normal Fire and Rescue shall be activated ONLY if transportation is needed to the local hospital. Bromenn Hospital should be used, as it is closer to campus.

Emergency Communication:

1. A staff athletic trainer or student will designate an individual to call EMS from the phone in the swimming pool office or on the East wall of the swimming pool.
2. If an athlete is injured during a non-traditional season workout, the coach should send someone into the athletic training room or call the athletic training room. A walkie-talkie can be utilized if available to call the athletic training room. If an athletic trainer is not available, the coach should call EMS at 911.
3. The individual who calls the EMS unit will provide the following information:
   a. Primary survey status
   b. Detailed information of emergency
   c. EXACT location of injured
   d. EXACT location of where EMS should arrive
4. The staff athletic trainer or student will designate an individual to wait for the EMS unit at the West entrance swimming pool.
5. The staff athletic trainer overseeing the sport should be called immediately if not present.
6. A staff athletic trainer will call the team physician and notify the physician of the injury.
7. The parents of the injured/ill student-athlete will be called and notified of the injury/illness.

Emergency Equipment:

1. Vacuum splints, cervical collar, and spine board are located in the athletic training room in the small storeroom. There is also a spine board on the East side of the pool deck.
2. A CPR mask is located in the swimming athletic training kit and on the wall in the Horton athletic training room.
3. An EMS unit will be called if needed according to the plan under Emergency Communication.
4. An AED is available on the Northwest wall of Horton Fieldhouse.

Venue Directions: From Adelaide Street turn between the Softball field and Wright Hall dormitory. The Pool entrance are the east facing doors immediately across the street from Haynie Hall’s main entrance.

 Illinois State University
 Evergreen Racquet Club
 Emergency Plan

Emergency Personnel:

1. A staff athletic trainer or student will perform primary and secondary surveys during practices/matches. They will evaluate and stabilize the athlete.
2. If an athletic trainer is not present a coach should call 911.
3. The athletic trainer in charge will designate an individual to call for an EMS unit.
4. The athletic trainer in charge, or a coach, will designate an individual to wait for the EMS unit at the West entrance to the club, which is the main entrance.
5. Lifeline will be activated if the situation requires ALS.
6. Normal Fire and Rescue shall be activated ONLY if transportation is needed to the local hospital. Bromenn Hospital should be used, as it is closer to campus.

**Emergency Communication:**

1. The staff athletic trainer or student will designate an individual to call EMS from the phone at the front desk of the club. In the absence of an athletic trainer, a coach will make the call.
2. If an athlete is injured during a non-traditional season workout, the coach should call 911 if an athletic trainer is not available.
3. The athletic trainer in charge, or a coach if an athletic trainer is not present, will designate an individual to wait for the EMS unit at the front door of the club which is on the West side of the building.
4. The individual who calls the EMS unit will provide the following information:
   a. Primary survey status
   b. Detailed information of emergency
   c. EXACT location of injured
   d. EXACT location of where EMS should arrive
5. The staff athletic trainer overseeing the sport should be called immediately if not present.
6. A staff athletic trainer will call the team physician and notify the physician of the injury.
7. The parents of the injured/ill student-athlete will be called and notified of the injury.
8. A student athletic trainer, coach or manager should go with the athlete to the hospital. Once a physician has seen the athlete, that individual will call back to the athletic training room and report on the athlete.

**Emergency Equipment:**

1. Vacuum splints, cervical collar and CPR mask will be on site for practice/matches when an athletic trainer is present. If an athletic trainer is not present, a coach will activate the EMS system and call a staff athletic trainer immediately.
2. An EMS unit will be called if needed according to the plan under Emergency Communication.

**Venue Directions:** Evergreen Racquet Club is located at the East end of Washington Street in Bloomington. Go all the way to the end of Washington Street and the Club sits right there. Go in the main entrance, which faces West.

**ILLINOIS STATE UNIVERSITY**

**OWEN STRENGTH AND CONDITIONING CENTER - REDBIRD ARENA**

Emergency Plan

**Emergency Map Location:** B

**Emergency Personnel:**

1. A strength coach or coach will call the athletic training room to get an athletic trainer. They can utilize the telephone or the walkie-talkie.
2. If an athletic trainer is not available, the strength coach or coach will call the EMS at 911.
3. If an athletic trainer is available, he or she will perform the primary and secondary surveys, stabilize the athlete and send an individual to call for an EMS at 911.
4. The athletic trainer, strength coach or coach will designate an individual to wait for the EMS unit at the Southwest loading ramp of Redbird Arena.
5. Lifeline will be activated if the situation requires ALS.
6. Normal Fire and Rescue shall be activated ONLY if transportation is needed to the local hospital. Bromenn Hospital should be used, as it is closer.

**Emergency Communication:**

1. A staff athletic trainer or student, strength coach or coach will designate an individual to call EMS
from the phone in the weight room.
2. The individual who calls the EMS unit will provide the following information:
   a. Primary survey status
   b. Detailed information of emergency
   c. EXACT location of injured
   d. EXACT location of where EMS should arrive
3. The athletic trainer, strength coach or coach should designate an individual to wait for the EMS unit at the Southwest loading ramp to the Arena.
4. A staff athletic trainer will call the team physician and notify the physician of the injury.
5. The parents of the injured/ill student-athlete will be called and notified of the injury/illness.

Emergency Equipment:

1. Vacuum splints, cervical collar, and spine board are located in the athletic training room in the storeroom.
2. A CPR mask is located on the wall in the athletic training room.
3. An EMS unit will be called if needed according to the plan under Emergency Communication.
4. An AED is located under the bleachers at the Southwest loading dock in Redbird Arena.

Venue Direction: Enter parking lot between Redbird Arena and Turner Hall from College Avenue. Head to the Northwest corner of parking lot. Go down ramp to lower level of Redbird Arena. Once inside take the hallway to the left of the ramp leading to the main arena floor. The weight room is on the left side of the hallway.

Emergency Personnel:

1. A staff athletic trainer or student will perform the primary and secondary surveys during practices/game. They will evaluate and stabilize the athlete.
2. If an athletic trainer is not present, a coach or manager should call 911.
3. The athletic trainer in charge will designate an individual to call for an EMS unit.
4. The athletic trainer in charge will designate an individual to wait for the EMS unit at the main entrance to Soccer City indoor facility.
5. In the absence of an athletic trainer, a coach or manager can call for the EMS unit.
6. Lifeline will be activated if the situation requires ALS.
7. Normal Fire and Rescue shall be activated ONLY if transportation is needed to the local hospital. Bromenn Hospital should be used, as it is closer to campus.

Emergency Communication:

1. The staff athletic trainer or student, or a member of the coaching staff in the absence of an athletic trainer will designate an individual to call EMS from the phone at the main entrance of Soccer City indoor facility.
2. If an athlete is injured during a non-traditional season workout, the coach should call the athletic training room. If an athletic trainer is not available, a coach should call EMS at 911.
3. The individual who calls the EMS unit will provide the following information:
   a. Primary survey status
   b. Detailed information of emergency
   c. EXACT location of injured athlete
   d. EXACT location of where EMS should arrive
4. The staff or student athletic trainer, or a member of the coaching staff will designate an individual to wait for the EMS unit at the main entrance to Soccer City indoor facility.
5. The staff athletic trainer who oversees the sport should be called immediately if not present.
6. A staff athletic trainer will call the team physician and notify him or her of the injury.
7. The parents of the injured/ill student-athlete will be called and notified of the injury/illness.

**Emergency Equipment:**

1. Vacuum splints, cervical collar and CPR mask will be on site for all practices.
2. An EMS unit will be called if needed according to the plan under Emergency Communication.

**Venue Directions:** Soccer City indoor soccer facility is located at 404 Olympia Drive in Bloomington. The phone number is 662-9520. Go east on Empire Street and turn right on Towanda Barnes Road. At the “S” curve in the road turn right and the facility is before the Palace Theaters.

**ILLINOIS STATE UNIVERSITY**
**GREGORY STREET TENNIS COURTS**
**Emergency Plan**

**Emergency Map Location:** NOT AVAILABLE

**Emergency Personnel:**

1. A staff athletic trainer or student will perform the primary and secondary surveys during practices/matches. They will evaluate and stabilize the athlete.
2. If an athletic trainer is not present, a coach or manager will call the athletic training room. If an athletic trainer is not available, the coach should call 911.
3. The athletic trainer in charge will designate an individual to call for an EMS unit.
4. The athletic trainer in charge will designate an individual to wait for the EMS unit at North entrance to the tennis courts.
5. Lifeline will be activated if the situation requires ALS.
6. Normal Fire and Rescue shall be activated ONLY if transportation is needed to the local hospital. Bromenn Hospital should be used, as it is closer to campus.

**Emergency Communication:**

1. The staff athletic trainer or student, coach or manager will designate an individual to call EMS from the phone in the equipment shed or the payphone outside the shed. A walkie-talkie could be utilized if available to call the athletic training room.
2. If an athlete is injured during a non-traditional season workout, the coach should send someone into the athletic training room or call the athletic training room. If an athletic trainer is not available, the coach should call EMS at 911.
3. The individual who calls the EMS unit will provide the following information:
   a. Primary survey status
   b. Detailed information of emergency
   c. EXACT location of injured
   d. EXACT location of where EMS should arrive
4. The staff or student athletic trainer will designate an individual to wait for the EMS unit at the North entrance to the tennis courts.
5. The staff athletic trainer overseeing the sport should be called immediately if not present.
6. A staff athletic trainer will call the team physician and notify the physician of the injury.
7. The parents of the injured/ill student-athlete will be called and notified of the injury/illness.
**Emergency Equipment**

1. If an athletic trainer is present, vacuum splints will be on site. If an athletic trainer is not present, the coach will call the athletic training room.
2. An EMS unit will be called if needed according to the plan under Emergency Communication.
3. An AED will be located on the Northwest wall of Horton Fieldhouse.

**Venue Directions:** The Outdoor Tennis courts are located on Gregory Street west of Weibring Golf Club. Enter the parking lot immediately west of the ISU motorcycle safety lot and immediately across from Cottage Avenue. Access to the courts can be gained via the sidewalk beginning in the northeast corner of the parking lot.

**ILLINOIS STATE UNIVERSITY**
**WEIBRING GOLF CLUB**
**Emergency Plan**

**Emergency Map Location:** NOT AVAILABLE

**Emergency Personnel:**

1. A coach or another designated individual will call the athletic training room on a cell phone or the clubhouse phone in the event of an emergency.
2. If an athletic trainer is present, he or she will call 911 for an EMS unit.
3. If an athletic trainer is not available, the coach or designated individual will call 911.
4. An athletic trainer or the coach will designate an individual to wait for the EMS unit outside the clubhouse and direct them to the injured athlete.
5. Lifeline will be activated if the situation requires ALS.
6. Normal Fire and Rescue shall be activated ONLY if transportation is needed to the local hospital.

**Emergency Communication:**

1. A staff athletic trainer or student if present will designate an individual to call EMS from a cell phone or the clubhouse phone. If an athletic trainer is not present, a coach or other designated individual will call for an EMS unit.
2. If an athlete is injured during a non-traditional season workout, the coach should call the athletic training room or designate someone to call.
3. The coach or athletic trainer will designate someone to wait for the EMS unit outside the clubhouse.
4. The individual who calls the EMS unit will provide the following information:
   a. Primary survey status
   b. Detailed information of emergency
   c. EXACT location of injured
   d. EXACT location of where EMS should arrive
   e. Call back telephone number where this person may be reached
5. The staff athletic training overseeing the sport should be called immediately and notified of the injury if not present.
6. If the head coach is not present, a staff athletic trainer or student will notify him or her immediately.
7. A staff athletic trainer will call the team physician and notify him or her of the injury.
8. The parents of the injured/ill student-athlete will be called and notified of the injury/illness.
Emergency Equipment:

1. Vacuum splints, cervical collar, spine board and CPR mask is located in the Horton Fieldhouse Athletic training room.
2. An EMS unit will be called according to the plan under Emergency Communication.
3. An AED is located in the clubhouse.

Venue Directions: The Weibring Golf Club is located on Gregory Street. The clubhouse parking lot is on the north side of Gregory Street between Adelaide St and Grove St. Access to entire golf course property begins at the clubhouse.
# Emergency Action Plan

## Contacts

<table>
<thead>
<tr>
<th>Emergency Contacts</th>
<th>Phone Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bloomington Emergency</td>
<td>911</td>
</tr>
<tr>
<td>IWU University Police</td>
<td>309-556-1111</td>
</tr>
<tr>
<td>Bloomington City Police</td>
<td>309-434-2509</td>
</tr>
<tr>
<td>Bloomington-Normal County Sheriff</td>
<td>217-935-6718</td>
</tr>
<tr>
<td>Illinois State Patrol</td>
<td>217-782-7263</td>
</tr>
<tr>
<td>Poison Control Center</td>
<td>1-800-222-1222</td>
</tr>
<tr>
<td>IWU Athletic Training Room</td>
<td>309-556-3601</td>
</tr>
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## Athletic Training Staff

<table>
<thead>
<tr>
<th>Athletic Training Staff</th>
<th>Office</th>
<th>Home</th>
<th>Cellular</th>
</tr>
</thead>
<tbody>
<tr>
<td>William A. Kauth Ed.D., ATC, CSCS Head Athletic Trainer</td>
<td>556-3601</td>
<td>823-9189</td>
<td>824-6181</td>
</tr>
<tr>
<td>Sport(s): Football, JVMBK, Baseball</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emily Miller MS, ATC, CSCS Assistant Athletic Trainer</td>
<td>556-1289</td>
<td></td>
<td>815-501-7707</td>
</tr>
<tr>
<td>Sport(s): WSC, JVWBK, Softball</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>William O. Kauth Ph.D., ATC</td>
<td>556-3601</td>
<td></td>
<td>452-6486</td>
</tr>
<tr>
<td>Assistant Athletic Trainer</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Sport(s): Football, JV Baseball</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Justin Stanek Ed.D., ATC</td>
<td>556-3601</td>
<td></td>
<td>269-8422</td>
</tr>
<tr>
<td>Assistant Athletic Trainer</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sport(s): MBK, XC, WTN, WGO</td>
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</tr>
<tr>
<td>Bobby Delmore, ATC</td>
<td>556-3601</td>
<td></td>
<td>815-258-1424</td>
</tr>
<tr>
<td>Graduate Assistant Athletic Trainer</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sport(s): MSC, Track/XC</td>
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<tr>
<td>Peter Benjamin, ATC</td>
<td>556-3601</td>
<td></td>
<td>734-649-2853</td>
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<tr>
<td>Graduate Assistant Athletic Trainer</td>
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<tr>
<td>Sport(s): JV Football, WBK</td>
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<tr>
<td>Becky Mihalovits, ATC</td>
<td>556-3601</td>
<td></td>
<td>901-237-1349</td>
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<tr>
<td>Graduate Assistant Athletic Trainer</td>
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<tr>
<td>Sport(s): VB, Track/XC</td>
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EMERGENCY CARE AND COVERAGE

A.) Introduction:
An Emergency Action Plan (EAP) has been indicated as necessary by the NCAA (Fall, 1998) in order to prepare in advance for emergency situations. Emergency situations include athletic injuries, medical situations, fan protection and treatment, mass injuries, and weather events. This EAP is inclusive of day-to-day practices, skill sessions, training and conditioning sessions, and all contests on and off the campus at facilities and playing areas.

Emergency situations may arise at anytime during the above mentioned athletic events. Expedient action must be taken in order to provide the best possible care to the athletes when emergency and/or life threatening conditions occur. The development and implementation of an emergency plan will help ensure that timely and proper care will be provided.

The sports medicine team must be prepared. This preparation involves an understanding of the emergency action plan (EAP), proper coverage at events, the presence of emergency equipment and supplies, utilization of and access to appropriate emergency medical personnel, and continuing education in the area of emergency protocol. Hopefully, through careful pre-participation physical screenings, proper conditioning, adequate medical coverage, proper training techniques and other safety concerns such as environmental and facility factors, potential emergencies may be averted. However, accidents and injuries are inherent with sports participation, thus the inclusion of our EAP will enable each emergency situation to be managed appropriately by the coach, first responder, or sports medicine team.

Each scheduled practice or contest of an institution sponsored intercollegiate athletics event, as well as out-of-season practices and skills sessions should include the following:

1.) The presence of a person qualified to render emergency care will be available at all practices, events, and training sessions.
2.) This will include the Head Athletic Trainer, Assistant Athletic Trainer(s), Athletic Training Student(s) Coach or First Responder.
3.) Coaches, Athletic Training Students and First Responders will be First Aid, CPR and AED certified.

C.) The Presence or Access to a Physician.
1.) A physician will be at all football and basketball games (Physicians Contract)
2.) Communication with a physician will be determined by the Head Athletic Trainer
3.) At times when the Head Athletic Trainer is not available or accessible, the coach may contact the physician when necessary.

D.) Planned Access to a Medical Facility
1.) The BroMenn Emergency Room will be used for all medical emergencies due to close proximity and transportation issues.
2.) If possible, all serious musculoskeletal injuries will be referred to the team physicians for orthopedic evaluation and treatment.
3.) If possible, all serious illnesses will be referred to the team physician for general medicine.

A.) Transportation between Venue and Medical Facility
1.) Emergency room visits will be made via ambulance, golf cart, car, van or personal vehicle when appropriate.
2.) Physician visits will be made by car or by school van if another vehicle is not available.
3.) An ambulance will be called when it is deemed necessary by the coach, first responder, or sports medicine staff.

B.) Access to a working telephone or communication device
1.) Phones will be networked to as many outdoor athletic facilities as possible
2.) Athletic Training Students will always have a radio for communication purposes
3.) Coaches and/or Head Athletic Trainer will have cell phones for communication
4.) All indoor facilities will have either radio or telephone communication devices within close proximity for quick
C.) All necessary emergency equipment should be on-site or readily accessible.
1.) Emergency equipment will be on site at all football and soccer practices.
2.) Emergency equipment will be on site at all events within a two minute response.
3.) Emergency equipment will be available from the training room for all other practice and training sessions.

D.) Personnel must be trained in advance to use equipment properly.
1.) The Athletic Training Staff should be qualified to use all emergency equipment.
2.) Athletic Training Students will be trained to use and maintain emergency equipment as necessary for the sport in which they are covering.
3.) Coaches will be trained in CPR and to use basic emergency equipment (i.e. splints).

E.) Emergency information regarding student athletes must be on hand.
1.) The Head Athletic Trainer is responsible for maintaining records of all emergency information for every student-athlete.
2.) The sports medicine bag for each sport will have a copy of all emergency information of each student-athlete on the team. This is in case the information is needed during a road trip (away game) in case a severe injury does occur which needs prompt medical attention, and for prevention of medical emergencies/illness.

F.) The Emergency Action Plan (EAP)
1.) Emergency procedures should be explained to all Athletic Department Staff members responsible in the health care of athletes at IWU, and they should be familiar with this IWU Sports Medicine Policies and Procedures Manual.
2.) Every Athletic Training Student and/or first responder will read this “IWU Sports Medicine Policies and Procedures Manual” before they are assigned to a sport at IWU.

K.) Certification in CPR, First Aid, and should be required by all athletics personnel associated with practices and skills or training sessions.
1.) All practices, games, skill sessions and workouts will be covered by a coach, Athletic Training Students, first responder (student worker), the assistant athletic trainer, and or the head athletic trainer who has been trained in First Aid, CPR, and AED use.
2.) All personnel should be knowledgeable of blood-borne pathogens.

L.) Available Emergency Services
1.) EMS is available by dialing 911.
2.) Access to medical personnel (refer to Sports Medicine Staff, Directory for telephone numbers) and facilities.
3.) Security (556-1111)
4.) Health Service (556-3107)

M.) Special Emergency Situations
1.) Adverse Weather or Environmental Conditions: Threatening weather may necessitate the removal of a team or individuals from an athletics event (see pg. 13 of this manual). The coach will usually monitor these situations and make the decision regarding whether to play a game or to practice, and where practices will be held. The decision should include consultation with the athletic director, head athletic trainer and physician if necessary. The head athletic trainer, in consultation with the team physician or athletic director will have final authority to cancel/delay/change a game or a practice according to NCAA recommendations. Consultation with the coach regarding recommendations and observations should occur before any decision is made. The coach will handle any severe injuries until further medical help arrives if a Certified Athletic Trainer or Athletic Training Students is not present.
2.) Communication: with the Emergency Medical System and other personnel should occur immediately and provide direction of EMS to the scene if necessary.
3.) Care of the Athlete: should be appropriate and immediate to stabilize the injury. Players, coaches and non-medical personnel should not touch, move, roll or assist an injured player, nor interrupt the medical services being performed.
4.) Emergency Equipment: should be retrieved and used appropriately as needed.

**N. Emergency Action Plan for Each Athletic Facility**

1.) **Shirk Center (Arena, Activity Center, and Fitness Room):**
   a.) **Emergency Personnel:** A Certified Athletic Trainer will be in the Shirk Center for all competitions that include IWU student-athletes. A Athletic Training Students or first responder will be on site for all practices and training sessions, whenever possible, with a certified athletic trainer within a two minute response time (i.e. training room).
   b.) **Emergency Communication:** fixed telephone line at the control desk will be used to call EMS or other emergency personnel.
   c.) **Emergency Equipment:** supplies (trauma kit, splints, spine board) will be maintained in the training room. The AED will be kept at the control desk for immediate use of any cardiac pathology.
   d.) **EMS Entrance:** should be through the northwest doors of the Shirk Center to the Arena to omit the use of stairs.
   e.) **Designated Individuals:** should direct the EMS through the doors to the arena.
   f.) **Coaches:** should control the scene, remove bystanders from the area, and assist wherever possible.
   g.) **Venue Directions:** The Shirk Center is located on the corner of Emerson Street and Franklin Street.

7.) **Fort Natatorium (Pool)**
   a.) **Emergency Personnel:** An athletic training student will be at pool-side for all competitions and an ATC will be within two minutes of the pool. Practices will be covered by a athletic trainer student or coach and the ATC will be within two minutes of the pool. Communication (telephone) will enhance the availability of the ATC when a serious injury occurs. Coaches will always be available who are trained in CPR, First Aid, and Lifeguard Training.
   b.) **Emergency Communication:** There is a telephone available at pool-side in case of an emergency to call either EMS or the athletic trainer.
   c.) **Emergency Equipment:** supplies (trauma kit, splints, spine board) will be in the training room if necessary. The AED will be kept at the control desk for immediate use of any cardiac pathology. A spine-board, collars, and CPR masks are available at pool-side for lifeguard use.
   d.) **EMS Entrance:** An ambulance will have to enter the Shirk Center by the south end of the Fort Natatorium (off of Emerson Street) and then enter the pool area through the front doors.
   e.) **Designated Individuals:** should direct the EMS to the south end of the Fort Natatorium and then on to the pool.
   f.) **Coaches:** should control the scene and remove athletes from the area.

VI. **MEDICAL ISSUES**

A.) **Medical Disqualification of the Student-Athlete:** (2a of NCAA Handbook): *The team physician (internist or orthopedic) has the final responsibility to determine when a student-athlete is removed or withheld from participation due to an injury, an illness or pregnancy. The coach and athletic trainer should respect the authority and medical decision of the physician and comply with all directions that it entails.

B.) **Skin Infections:** (2b of NCAA Handbook)
   1.) Illinois Wesleyan University Athletic Training Department MRSA Prevention

A.) **Prevention of Heat Illness:** (2c of NCAA Handbook)
   1.) **Heat Cramps, Heat Exhaustion and Heat Stroke:** are very serious illnesses and should be prevented before serious complications arise. The decision to stop or reschedule practices out of concern for the heat should follow the chain of command as directed in M1. This decision should take into consideration the temperature, humidity, and the relevant environmental factors. Removal of a participant should be left to the discretion of the sports medicine staff.

   2.) **Treatment of Heat Illness:** should include hydration with water only along with cooling the athlete (cool air, fan, wet towels etc.). The core body temperature should be measured to assess the severity of the illness. An athlete with a core body temperature of over 104 degrees or chills should be seen by a physician or have EMS called. Symptoms such as skin color, lack of sweating, response of the athlete, and other vital signs should be assessed as well.
Signs and Symptoms to Evaluate Chest Pain

1) Crushing Chest Pain
2) Shortness of Breath
3) Profuse Sweating
4) May or May Not have Pain Radiating to Jaw or Arms

Chest Pain Algorithm

1) Stop Exercise Activity
2) Lie Patient on Floor – Call for help
3) If Victim Becomes Nauseated Roll onto Side
4) If ANY Complaints of Chest Pain
   a) Call 911 Immediately
   b) Help will get AED located at Four Seasons Next Door. CPR Mask Located Behind Front Desk
   c) Obtain History about
      i. Prior Chest Pain or Discomfort
      ii. Medicines (NTG)
      iii. Allergies
5) If Victim Loses Consciousness - Initiate CPR
Emergency Action Plan
For
Normal Community High School
Outside Sports

School Information:

Address: 3900 E. Raab Rd.
Normal, IL 61761

Phone: (309)728-5000
Main Office: (309)728-5000
Fax: (309)728-5050
Attendance: (309)728-5010
Athletics: (309)728-5012

Websites:
NCHS
www.unit5.org/nchs
Unit 5 School District
www.unit5.org

Driving Directions to School Building
From the South or West
I-74 to I-55 North
I-55 North to exit 167 (Veterans Parkway-south)
Go to second stoplight - Fort Jesse Rd - and turn left
Travel to Airport Road and turn left
Travel to Raab Rd. (1700N) and turn right.
High School will be on your left.

From the East
I-74 East to exit 142 at Downs
At the end of the ramp turn right
Follow road to a "T" and turn left (Hwy 150)
Go to the stoplights and turn right on Towanda-Barnes Rd. (There is a Freedom gas station)
Follow Towanda-Barnes Road North to Raab Rd (1900N) and turn left. (There is a flashing yellow light and an Apostolic Christian Church on the corner.)
The high school will be on your right.
From the North on I-55
I-55 South to exit 171 (Towanda)
Turn left at the end of the ramp towards Towanda.
Go straight at the four-way stop. (There is a Fast Stop on the corner)
At the 2nd stop sign there is a "T" - turn right on Towanda-Barnes Rd. (1900N)
Go 2 miles and turn right on Raab Rd (1700N). (There is an Apostolic Christian Church
on the corner.)
High school will be on your right.

From the North on I-39
Traveling south on I-39
Take I-55 North to exit 167 (Veterans Parkway-south)
Go to second stoplight - Fort Jesse Rd - and turn left
Travel to Airport Road and turn left
Travel to Raab Rd. (1700N) and turn right.
High School will be on your left.

Emergency Personnel Contact Information:

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Andrew Turner</td>
<td>Athletic Director</td>
<td>(309) 726-5012</td>
</tr>
<tr>
<td>Jackie Lampert</td>
<td>Athletic Trainer</td>
<td>(309) 261-4254</td>
</tr>
<tr>
<td>Jen Shultz</td>
<td>Athletic Trainer</td>
<td>(217) 454-7617</td>
</tr>
<tr>
<td>Chris Walters</td>
<td>Athletic Trainer</td>
<td>(309) 532-3823</td>
</tr>
</tbody>
</table>

Emergency Phone Numbers:
Ambulance/Fire/Police.................911
Poison Control..........................1-800-222-1222

Telephone Location:
All certified athletic trainers and coaches on scene should have a working cell phone.
**Emergency Equipment:**

AED-Located in the left hand cabinets, 2nd drawer on the bottom left.  
Splints-Located on the top of the right hand cabinets  
Crutches-Located against the wall behind the exercise bikes  
CPR Mask-Located in the medical kit

**Football Practice Fields:**

**Emergency Personal**
1. An athletic trainer or athletic training student will perform an initial and secondary survey, evaluate, and stabilize the athlete.  
2. If there is no athletic trainer or athletic training student present a coach can call the athletic trainer or send someone to get them. If there is no athletic trainer available the coach may call 911.  
3. The head athletic trainer will assign someone to call EMS.  
4. The head athletic trainer will assign someone to wait for EMS in either the east or west parking lot.  
5. If another person is available they will wait by the sidewalk entrance to show EMS where to pull in.

**Emergency Communication**
1. The head athletic trainer will assign someone to call EMS from the most available cell phone.  
2. If there is no athletic trainer present the coach will call EMS from the most available cell phone.  
3. The person calling EMS should include: type of emergency, suspected injury, athletes current condition, current assessment being given, where you are calling from, the exact location of the injured athlete, and how to get to the location.  
4. The athlete’s parents should be notified.

**Emergency Equipment**
1. Medical Kit will be on the golf cart or with the athletic trainer. (this contains the CPR mask)  
2. The AED will be on the golf cart.  
3. Crutches will be in the athletic training room on the wall behind the exercise bikes.  
4. The splints will be on top of the right hand cabinets in the athletic training room.

**Venue Directions:**
From Raab Rd. turn into either the west lot or the east lot and follow the drive behind the school. There will be a large sidewalk with access to the street and the fields are located to the right.

**Football Game Field:**

**Emergency Personnel**
1. An athletic trainer or athletic training student will perform an initial and secondary assessment, evaluate, and stabilize the athlete.
2. The head athletic trainer will assign someone to call EMS.
3. The head athletic trainer will assign someone to direct EMS from either the west or east lots.
4. The head athletic trainer will assign someone to direct EMS from the sidewalk to the field entrance gate.
5. The athletic director will be responsible for assigning roles for crowd control.

**Emergency Communication**
1. The head athletic trainer will assign someone to call EMS.
2. The person calling EMS should include: type of emergency, suspected injury, athlete's current condition, current assessment being given, where you are calling from, the exact location of the injured athlete, and how to get to the location.
3. If the parent of the athlete is not at the event then they should be notified.

**Emergency Equipment**
1. Medical Kit will be on the bench of the home team. (contains the CPR mask)
2. The AED will be on the bench of the home team.
3. The crutches will be on under the bench of the home team.
4. The splints will be on under the bench of the home team.

**Venue Directions**
From Raab Rd. turn into either the west or east parking lot and follow the drive around to the back of the school. Turn onto the large sidewalk access and drive under the awning between locker rooms to the field access gate.

**Soccer Practice and Game Field:**

**Emergency Personnel**
1. An athletic trainer or athletic training students should make an initial and secondary assessment, evaluate, and stabilize the athlete.
2. During practice days if an athletic trainer or athletic training student in not on the field a coach can call them or send someone to get them.
3. The head athletic trainer should assign someone to call EMS.
4. If the athletic trainer is not available the coach should call EMS.
5. The head athletic trainer should assign someone to direct EMS from the east or west parking lot.
6. The head athletic trainer should assign someone to meet EMS at the large sidewalk access.
7. If during a game the athletic director will assign roles for crowd control.

**Emergency Communication**
1. The head athletic trainer should assign someone to call EMS.
2. If the athletic trainer is not present the coach will call EMS.
3. The person calling EMS should include: type of emergency, suspected injury, athletes current condition, current assessment being given, where you are calling from, the exact location of the injured athlete, and how to get to the location.
4. If the athlete is not present they should be notified of the injury.
5. If the parent of the athlete is not at the game or the injury occurs during a practice they should be contacted.

**Emergency Equipment**
1. The medical kit will be on the home bench. (containing the CPR mask)
2. The AED will be at the baseball field.
3. The crutches will be in the training room on the wall behind the exercise bikes.
4. The splints will be on top of the right hand cabinets of the athletic training room.

**Venue Directions**
From Raab Rd. turn into either the east or west lot and follow the drive behind the school. Turn onto the large sidewalk access and follow it under the awning between the locker rooms all the way down to the last two access gates. The soccer gate will be on the left.

**Baseball and Softball Game and Practice Fields:**

**Emergency Personnel**
1. An athletic trainer or athletic training student will perform an initial and secondary assessment, evaluate, and stabilize the athlete.
2. If there is no athletic trainer around a coach should call or send someone to go get one.
3. The head athletic trainer should assign someone to call EMS.
4. If there is no athletic trainer available then the coach should call EMS.
5. The head athletic trainer should assign someone to direct EMS from either the east or west parking lot.
6. The head athletic trainer should assign someone to direct EMS from the large sidewalk access.
7. If during a game the athletic director should assign roles for crowd control.
Emergency Communication
1. The head athletic trainer should assign someone to call EMS.
2. If the athletic trainer is not present the coach will call EMS.
3. The EMS call should include: type of emergency, suspected injury, athletes current condition, current assessment being given, where you are calling from, the exact location of the injured athlete, and how to get to the location.
4. If the athletic trainer is not present they should be notified of the injury.
5. The athlete's parent should be notified if they are not at the game or if it is during a practice.

Emergency Equipment
1. The medical kit will be on the golf cart near the press box during practice days and in the home dugout during game days. (containing the CPR mask)
2. The AED will be on the golf cart near the press box during practice days and in the home dugout during game days.
3. The crutches will be in the training room on the wall behind the exercise bikes.
4. The splint bag will be on top of the right hand cabinets in the training room.

Venue Directions
From Raab Rd. turn into either the east or west lot and follow the drive behind the school. Turn onto the large sidewalk access and follow it under the awning between the locker rooms all the way to the last two access gates. The right gate will give you access to the baseball and softball fields.

Tennis Court Match and Practice

Emergency Personnel
1. An athletic trainer or athletic training student should perform an initial and secondary assessment, evaluation, and stabilize the athlete.
2. If an athletic trainer is not present a coach should call them or send someone to go get one.
3. The head athletic trainer should assign someone to call EMS.
4. If the trainer is not available the coach should call EMS.
5. The head athletic trainer should assign someone to direct EMS from either the east or west lot.
6. If an injury occurs during a match then the athletic director should control the crowd.

Emergency Communication
1. The head athletic trainer should assign someone to call EMS.
2. If the athletic trainer is not present the coach will call EMS.
3. The EMS call should include: type of emergency, suspected injury, athletes current condition, current assessment being given, where you are calling from, the exact location of the injured athlete, and how to get to the location.
4. If the athletic trainer is not present they should be notified of the injury.
5. The athlete’s parents should be notified if they are not present.

**Emergency Equipment**
1. The medical kit will be in the athletic training room.
2. The AED will be in the athletic training room.
3. The crutches will be in the athletic training room on the wall behind the exercise bikes.
4. The splint bag will be in the training room on top of the cabinets on the right side.

**Venue Directions**
From Raab Rd. turn into either the east or west parking lot and follow the drive around to the back of the school. The tennis courts are directly to the left of the large sidewalk access.

**Venue Map:**
NCWHS Emergency Action Plan

If an athletic trainer is available, the trainer will handle the injured participant. If an athletic trainer is not available, the coach will:

- Determine the severity of the injury (be familiar with the basic first aid procedures).
- Call an ambulance if necessary.
- Notify the parents of the injury by telephone (parent telephone numbers should be readily available on your copies of the Athletic Permission forms given to you at the beginning of the season).
- Determine the hospital to which the injured athlete is to be taken.
- Contact the home or hospital after the contest or practice to check on the condition of the injured student.
- Notify the Principal or Athletic Director if the injury is of a serious nature.
- Fill out an accident report form in main office of the high school as soon as possible.
- Assist, as necessary, with the implementation of any rehabilitation program prescribed by the attending physician.
SMART Clinic

SMART Clinic Emergency Action Plan

Illinois State University
254 McCormick Hall
Normal, IL 61790-5120

Emergency Communication

A fixed telephone line is located in the clinic office: 254A. Telephone number: (309) 438-1892.

Emergency Phone Numbers

<table>
<thead>
<tr>
<th>Service</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulance/Police/Fire</td>
<td>911</td>
</tr>
<tr>
<td>Illinois State Health Services</td>
<td>(309) 438-8655</td>
</tr>
<tr>
<td>Illinois State Campus Police</td>
<td>(309) 438-8631</td>
</tr>
<tr>
<td>Justin Stanek, Clinic Director</td>
<td>(319) 269-8422 (cell)</td>
</tr>
<tr>
<td></td>
<td>(309) 438-5862 (office)</td>
</tr>
<tr>
<td></td>
<td>(309) 438-1892 (clinic)</td>
</tr>
<tr>
<td>Ashely Keck, Graduate Assistant</td>
<td>(574) 361-9008 (cell)</td>
</tr>
</tbody>
</table>

Emergency Equipment Locations

Spine board, vacuum splints, CPR masks, and crutches stored in the storage room (Room 254B). A fire extinguisher is located next to the main entrance to the clinic in the southeast corner.

AED Locations

The AED is located just outside the SMART clinic’s main entrance on the West wall.

Emergency Personnel

1. The clinic director, graduate student, or athletic training student will perform the primary and secondary assessment. He/she will evaluate and stabilize the patient while notifying others in the room to activate the Emergency Action Plan.
2. The athletic trainer in charge will designate an individual to call EMS.
3. The athletic trainer in charge will designate an individual to retrieve any needed emergency equipment.
4. The athletic trainer in charge will designate an individual to go to the 1st floor west doors of McCormick and wait for EMS to arrive.

Venue Directions

From the North
From Main St (US 51), turn east on College Ave, then south on University Ave. Proceed through 2 stop signs until your reach the elevated walkway that crosses University Ave. Park on the east side of the street in front of the west doors of McCormick Hall.

From the South
From Main St (US 51), turn east on Beaufort St, then north on University Ave. Proceed through 1 stop sign until you reach the elevated walkway that crosses University Ave. Park on the east side of the street in front of the west doors of McCormick Hall.

Natural or Man-Made Disasters

Fire: In the event of a fire, the athletic trainer in charge will escort patients and staff to the nearest exit that avoids the fire. If the fire originates in the clinic, the athletic trainer in charge will designate an individual to pull the fire alarm along the north wall next to the main stairwell. If the fire can be contained, the athletic trainer in charge will retrieve or send someone to retrieve the fire extinguisher. To the west, individuals will exit through 254C, then through the north stairwell exit. To the south, individuals will exit through the main clinic entrance, then through either the main stairwell and out the east doors or through the south stairwell and out the south exit.

Tornado/Earthquake: In the event of a tornado or earthquake, the athletic trainer in charge will escort patients and staff to an interior room on the 1st floor of the building.

Training

All individuals associated with the SMART clinic will review and/or practice the EAP at the beginning of each semester. Student rotating through the clinic will be expected to read and understand the procedures of the EAP during the orientation session.
Emergency Personnel:
1. An athletic training staff member or student will perform primary and secondary surveys during practices/events. They will evaluate and stabilize the athlete.
2. If an athletic trainer is not present, a coach or manager will call the athletic training room or send a designated individual into the athletic training room to get an athletic trainer. A walkie-talkie can be utilized if available to call for an athletic trainer. If an athletic trainer is not available, a coach will call 911.
3. The athletic trainer in charge will designate an individual to call for an EMS unit.
4. The athletic trainer in charge will designate an individual to wait for the EMS unit at doors at the end of the “driveway” entrance to Horton in front of the K & R Equipment room.
5. Bromenn Hospital is the preferred medical facility for Illinois State University student-athletes.

Emergency Communication:
1. A staff or student athletic trainer will designate an individual to call EMS from the phone in the athletic training room in one of the offices or call the athletic training room on the walkie-talkie and they will call for EMS.
2. If an athlete is injured during a non-traditional season workout, the coach should send someone into the athletic training room or call the athletic training room. If an athletic trainer is not available, the coach should call EMS at 911.
3. In the absence of an athletic trainer, a coach will make the 911 EMS call. a) Primary survey status
b) Detailed information of emergency
c) EXACT location of injured
d) EXACT location of where EMS should arrive
4. The individual who calls the EMS unit will provide the following information:
5. The staff or student athletic trainer or coach will designate an individual to wait for the EMS unit at the doors at the end of the “driveway” entrance to Horton in front of the K & R Equipment room.
6. The staff athletic trainer overseeing the sport should be called immediately if not present.
7. A staff athletic trainer will call the team physician and notify him or her of the injury/illness.

Emergency Equipment
1. A CPR mask is located in the sport athletic training bag.
2. An EMS unit will be called if needed according to the plan under Emergency Communication.
3. An AED is available on the Southwest wall of the cafeteria in University High School next to the lounge.

Venue Directions: From Adelaide Street turn left into the staff parking lot and enter through the west doors by the tennis courts. To enter the main gym, go thru the doors on the right side of the hallway that are labeled “113”.
University High School
Illinois State University
Large Gym
Emergency Plan

**Serious Injury/Death**

If incident occurred in school:
- Call 911 from a campus phone.
- Notify CPR/first aid certified persons in school building of medical emergencies. Names of CPR/first aid certified persons are listed in Crisis Team Members section.
- If possible, isolate affected student/staff member.
- Notify Principal, or his/her designee, who will notify the Superintendent.
- Activate School Crisis Team. Designate staff person to accompany injured/ill person to hospital, if necessary.
- Principal, or his/her designee, notifies parent(s) or guardian(s) of affected student.
- Direct witness(es) to school psychologist/counselor. Contact parents if students are sent to psychologist/counselor.
- Determine method of notifying students, staff and parents.
- Follow procedures for Media Relations.

If incident occurred outside of school:
- Activate School Crisis Team.
- Notify staff before normal operating hours.
- Determine method of notifying students and parents. Announce availability of counseling services for those who need assistance.
- Follow procedures for Media Relations.

Post-crisis intervention:
- Meet with school counseling staff and other available mental health personnel to determine level of intervention for staff and students.
- Designate rooms as private counseling areas.
- Escort affected students, siblings, close friends, and other “highly stressed” students to counselors.
- Debrief all students and staff.
- Assess stress level of all students and staff.
- Recommend counseling to overly stressed students and staff.
- Follow-up with students and staff who received counseling.
- Designate staff person(s) to attend funeral.
- Allow for changes in normal routines or test schedules to address injury or death.
ILLINOIS STATE UNIVERSITY
HORTON FIELDHOUSE POOL: Swimming/Diving
Emergency Plan

Emergency Personnel:
1. A staff athletic trainer or student will perform primary and secondary surveys during practices/meets. They will evaluate and stabilize the athlete.
2. If an athletic trainer is not present, a coach or manager will call the athletic training room or send a designated individual into the athletic training room to get an athletic trainer. A walkie-talkie can be utilized if available to call the athletic training room. If an athletic trainer is not available, a coach will call 911.
3. The athletic trainer in charge will designate an individual to call for an EMS unit.
4. The athletic trainer in charge will designate an individual to wait for the EMS unit at the West entrance to the swimming pool.
5. Lifeline will be activated if the situation requires ALS.
6. Normal Fire and Rescue shall be activated ONLY if transportation is needed to the local hospital. Bronnen Hospital should be used, as it is closer to campus.

Emergency Communication:
1. A staff athletic trainer or student will designate an individual to call EMS from the phone in the swimming pool office or on the East wall of the swimming pool.
2. If an athlete is injured during a non-traditional season workout, the coach should send someone into the athletic training room or call the athletic training room. A walkie-talkie can be utilized if ISU ATEP P & P 38 available to call the athletic training room. If an athletic trainer is not available, the coach should call EMS at 911.
3. The individual who calls the EMS unit will provide the following information:
   a. Primary survey status
   b. Detailed information of emergency
   c. EXACT location of injured
   d. EXACT location of where EMS should arrive
4. The staff athletic trainer or student will designate an individual to wait for the EMS unit at the West entrance swimming pool.
5. The staff athletic trainer overseeing the sport should be called immediately if not present.
6. A staff athletic trainer will call the team physician and notify the physician of the injury.
7. The parents of the injured/ill student-athlete will be called and notified of the injury/illness.

Emergency Equipment:
1. Vacuum splints, cervical collar, and spine board are located in the athletic training room in the small storeroom. There is also a spine board on the East side of the pool deck.
2. A CPR mask is located in the swimming athletic training kit and on the wall in the Horton athletic training room.
3. An EMS unit will be called if needed according to the plan under Emergency Communication.
4. An AED is available on the Northwest wall of Horton Fieldhouse.

Venue Directions: The swimming pool is located in Horton Fieldhouse on the West side of the building directly across the street from Haynie Hall dormitory. It is near the intersection of Delaine and Adelaide. Come South on Adelaide and turn into driveway in front of Wright Hall dormitory and pull into the parking lot right across the street from Haynie Hall dormitory.
EMERGENCY ACTION PLANS

HORTON FIELDHOUSE NORTH GYM:
Volleyball, Basketball, Softball, Soccer, Cheerleading
Emergency Plan

Emergency Personnel:
1. An athletic training staff member or student will perform primary and secondary surveys during practices/events. They will evaluate and stabilize the athlete.
2. If an athletic trainer is not present, a coach or manager will call the athletic training room or send a designated individual into the athletic training room to get an athletic trainer. A walkie-talkie can be utilized if available to call for an athletic trainer. If an athletic trainer is not available, a coach will call 911.
3. The athletic trainer in charge will designate an individual to call for an EMS unit.
4. The athletic trainer in charge will designate an individual to wait for the EMS unit at south lower door entrance to the North gym in the driveway.
5. Lifeline will be activated if the situation requires ALS.
6. Normal Fire and Rescue shall be activated ONLY if transportation is needed to the local hospital. Bronnen Hospital should be used, as it is closer to campus.

Emergency Communication:
1. A staff or athletic training student will designate an individual to call EMS from the phone in the athletic training room in one of the offices or call the athletic training room on the walkie-talkie and they will call for EMS.
2. If an athlete is injured during a non-traditional season workout, the coach should send someone into the athletic training room or call the athletic training room. If an athletic trainer is not available, the coach should call EMS at 911.
3. In the absence of an athletic trainer, a coach will make the 911 EMS call.
   a) Primary survey status
   b) Detailed information of emergency
   c) EXACT location of injured
   d) EXACT location of where EMS should arrive
4. The individual who calls the EMS unit will provide the following information:
5. The staff or athletic training student or coach will designate an individual to wait for the EMS unit at the East lower door entrance to the North Gym in the driveway.
6. The staff athletic trainer overseeing the sport should be called immediately if not present.
7. A staff athletic trainer will call the team physician and notify him or her of the injury/illness.
8. The parents of the injured/ill student-athlete will be called and notified of the injury/illness.

Emergency Equipment
1. Vacuum splints, cervical collar, and spinal board are located in the athletic training room in the small storeroom.
2. A CPR mask is located in the sport athletic training bags and on the wall in the athletic training room under the wall cabinets.
ISU ATEP P & P 30
3. An EMS unit will be called if needed according to the plan under Emergency Communication.
4. An AED is available on the Northwest wall of the fieldhouse in Horton.
Venue Directions: The North Gym is located on the north end of Horton Fieldhouse just south of the outdoor track. Pull down into the wide driveway west of the main fieldhouse and enter through the double door. The North Gym is just to the right as you go through the double doors.
ILLINOIS STATE UNIVERSITY
FOOTBALL STADIUM/GRASS PRACTICE FIELD
Emergency Plan

Emergency Personnel:
1. A staff athletic trainer or student will perform primary and secondary surveys during practices/games. They will evaluate and stabilize the athlete.
2. The team physician will be present for all home games as well as Lifeline Ambulance. The ambulance is located at the North-West Gate and will be summoned by a designated athletic training student during games.
3. The athletic trainer in charge will designate an individual to call for an EMS unit on a cell phone.
4. The athletic trainer in charge will designate an individual to wait for the EMS unit during practices at the Northwest gate of the stadium or the South gate of the practice field.
5. If an athletic trainer is not present, a coach or manager will call the athletic training room or send a designated individual into the athletic training room to get an athletic trainer. If an athletic trainer is not available, a coach will call 911.
6. Lifeline will be activated if the situation requires ALS except for games and they will be utilized for all transports.
7. Normal Fire and Rescue shall be activated ONLY if transportation is needed to the local hospital. Bromenn Hospital should be used, as it is closer to campus.

Emergency Communication:
1. The certified graduate assistant athletic trainer or the designated athletic training student will call EMS on the head athletic trainers cell phone at 911 and direct the ambulance to the proper location. The telephone in the athletic training room in the Kaufman Football Complex or on the wall inside the back door to Kaufman will be used if there is no cell phone available and the number to dial is 9-911.
2. An athletic training student will go to the South entrance of the grass practice field or to the Northwest entrance to Hancock Stadium to wait for and direct the EMS unit to the injured athlete.
3. A team physician will be present at all home games and will be signaled for by the head athletic trainer or certified graduate assistant by tapping the top of the head repeatedly.
4. The individual who calls the EMS unit during practices will provide the following information:
   a) Primary survey status
   b) Detailed information of emergency
   c) EXACT location of injured
   d) EXACT location of where EMS should arrive
5. A staff athletic trainer should be called immediately and notified of the injury, if not present.
6. A staff athletic trainer will call the team physician and notify him or her of the injury/illness.
7. The parents of the injured/ill student-athlete will be called and notified of the injury/illness.

Emergency Equipment
1. A spine board with cervical collar, vacuum splints, airways, and CPR mask will be on site at every practice/game and will be located on the Northwest side of the stadium and on the East side of the grass practice field.
2. An EMS unit will be on site during all games and will be located at the Northwest entrance. The EMS unit will be summoned by a designated athletic training student during games with a description of the injury.
3. A designated athletic training student will wait for an EMS unit if an injury occurs during a practice. They will be at the Northwest gate to the stadium or the Southeast entrance to the practice field.
4. An AED is located on the Northwest wall of Horton Fieldhouse.
   Venue Directions: Football stadium is located on the corner of College Avenue and Main Street adjacent to the Ropp Building. It is accessible through the Northwest gate on the west side of the stadium. Turn onto Delaine Drive going North off of College Avenue and turn into access drive behind Horton Fieldhouse and come up the drive to the North side of Horton Fieldhouse.
ILLINOIS STATE UNIVERSITY
HORTON FIELDHOUSE:
Indoor Track and Field/Winter Football Workouts
Indoor Softball/Indoor Baseball/Gymnastics/Swimming/Cheerleading
Emergency Plan

Emergency Personnel:
1. A staff athletic trainer or student will perform primary and secondary surveys during practices/games. They will evaluate and stabilize the athlete.
2. If an athletic trainer is not present, a coach or manager will call the athletic training room or send a designated individual into the athletic training room to get an athletic trainer. A walkie-talkie can be utilized if available to call the athletic training room. If an athletic trainer is not available, a coach will call 911.
3. The athletic trainer in charge will designate an individual to call for an EMS unit.
4. The athletic trainer in charge will designate an individual to wait for the EMS unit at the Northwest door to Horton Fieldhouse.
5. Normal Fire and Rescue shall be activated ONLY if transportation is needed to the local hospital. Bromenn Hospital should be used, as it is closer to campus.

Emergency Communication:
1. A staff athletic trainer or student will designate an individual to call EMS from the phone in the Fieldhouse worker’s lounge area or the Horton Fieldhouse athletic training room during practices.
2. If an athlete is injured during a non-traditional season workout, the coach should send someone into the athletic training room or call the athletic training room. If an athletic trainer is not available, the coach should call EMS at 911.
3. The event manager will call for the EMS unit from a walkie-talkie during meets. The athletic trainer in charge will tell the event manager what to say to the EMS dispatcher.
4. The event manager or athletic trainer in charge will designate an individual to wait by the Northwest door of the Fieldhouse for the EMS unit.
5. The individual who calls the EMS unit will provide the following information:
   a. Primary survey status
   b. Detailed information of emergency
   c. EXACT location of injured
   d. EXACT location of where EMS should arrive
6. The staff athletic trainer overseeing the sport should be called immediately and notified of the injury if not present.
7. A staff athletic trainer will call the team physician and notify the physician of the injury.
8. If the head coach is not present, a staff or athletic training student will notify him or her immediately.
9. The parents of the injured/ill student-athlete will be called and notified of the injury.

Emergency Equipment:
1. Vacuum splints, cervical collar, spine board and CPR mask will be located in the Horton Fieldhouse training room downstairs from the track. This equipment will be brought up to the track for meets.
2. An EMS unit will be called if needed according to the plan under Emergency Communication.
3. An AED is located on the Northwest wall of Horton Fieldhouse.

Venue Directions: The track and field indoor facility is located in Horton Fieldhouse which is off of Adelaide and Delaine. Go down Adelaide Street and turn onto the access road, which goes in front of Wright Hall. Turn into the parking lot just in front of the outdoor track and pull up to the Northwest door or north garage door of the Fieldhouse at the corner of the building.