I. Course Description:
ATTR 5551.01: Athletic Training Clinical IV (5 credits) is a practicum course that has two sections and is taken in the second year. The course has five credit hours and five contact hours. The instructor spends two contact hours with students in the classroom and three clinical contact hours at clinical sites on a weekly basis. The course meets face-to-face weekly for one hour and 50 minutes for 15 weeks. Instruction/review is a comprehensive approach to cover all content that students have learned over the previous academic year. Course requirements include oral proficiencies, clinical experience deliverables- clinical hour log, evaluation forms (clinical site, preceptor, and student), and journal reflection questions. Students are also required to present a detailed workbook of their season clinical rotation and a case study of an injury that occurred in the eight-week sport clinical rotation. A professional dissemination is also required, where a student must participate in a professional development project/presentation related to a topic in athletic training. A minimum of 90 hours of outside of class preparation for the semester is required for this course.

Prerequisites: Admittance to Athletic Training Major. Successful completion of ATTR 5241.

James I. Perkins College of Education Diversity Statement is found at the following link: http://coe.sfasu.edu/about-us/

II. Intended Learning Outcomes/Goals/Objectives (Program/Student Learning Outcomes):

This academic program, along with its courses, is in compliance and supports the vision, mission, goals and core values of the College of Education and Stephen F. Austin State University. It is this philosophy and vision that helps to distinguish our graduates from those of other institutions.

PROGRAM LEARNING OBJECTIVES: The following are addressed within this course:

*1. Demonstrate a sound understanding of evidence-based practice concepts and their application by using a systematic approach to ask and answer clinically relevant questions that affect patient care.

*2. Demonstrate an ability to develop and implement strategies and programs to prevent the incidence and/or severity of injuries and illnesses and optimize their clients' patients' overall health and quality of life while incorporating the importance of nutrition and physical activity in maintaining a healthy lifestyle and in preventing chronic disease (e.g., diabetes, obesity, cardiovascular disease).

*3. Demonstrate the ability to perform clinical examination skills in order to accurately diagnosis and effectively treat their patients while applying clinical-reasoning skills throughout the physical examination process. The development of these skills requires a thorough understanding of anatomy, physiology, and biomechanics in order to assimilate data, select the appropriate assessment tests, and formulate a differential diagnosis.

*4. Demonstrate a sound understanding and application of the knowledge, planning, and skills in the evaluation and immediate management of the acute care of injuries and illnesses.

*5. Demonstrate proficiency in the understanding and application of therapeutic interventions that include therapeutic modalities, therapeutic rehabilitation, and therapeutic medicines designed to maximize the patient's participation and health-related quality of life.

*6. Demonstrate the ability to recognize the role of mental health in injury and illnesses using interventions to optimize the restoration of participation and to refer these individuals as necessary.

*7. Demonstrate an understanding of risk management, healthcare delivery mechanisms, insurance, reimbursement, documentation, patient privacy, and facility management.

*8. Assess the development of a desire for professional development, ethical behaviors and responsibilities through a progression of clinical rotations, participation with professional organizations, and understanding of effective supervision and management in the athletic training clinic.

*9. Complete the Board of Certification (BOC) requirements for eligibility of the national board examination through the completion of the competencies and proficiencies as set forth and endorsed by the NATA-EC, BOC, and the CAATE.

COMPETENCY / STUDENT LEARNING OBJECTIVES: - Upon completion of this course the student should be able to:

2020 Course Competencies

Standard 56: Advocate for the health needs of clients, patients, communities, and populations.

Standard 58: Incorporate patient education and self-care programs to engage patients and their families and friends to participate in their care and recovery.

Standard 60: Use the International Classification of Functioning, Disability, and Health (ICF) as a framework for delivery of patient care and communication about patient care.
Standard 61: Practice in collaboration with other health care and wellness professionals.

Standard 62: Provide athletic training services in a manner that uses evidence to inform practice.

Standard 63: Use systems of quality assurance and quality improvement to enhance client/patient care.

Standard 64: Apply contemporary principles and practices of health informatics to the administration and delivery of patient care, including (but not limited to) the ability to do the following:
- Use data to drive informed decisions
- Search, retrieve, and use information derived from online databases and internal databases for clinical decision support
- Maintain data privacy, protection, and data security
- Use medical classification systems (including International Classification of Disease codes) and Terminology (including Current Procedural Terminology)
- Use an electronic health record to document, communicate, and manage health-related information; mitigate error; and support decision making.

Standard 68: Advocate for the profession.

Standard 69: Develop a care plan for each patient. The care plan includes (but is not limited to) the following:
- Assessment of the patient on an ongoing basis and adjustment of care accordingly
- Collection, analysis, and use of patient-reported and clinician-rated outcome measures to improve patient care
- Consideration of the patient’s goals and level of function in treatment decisions
- Discharge of the patient when goals are met or the patient is no longer making progress
- Referral when warranted

Standard 72: Perform or obtain the necessary and appropriate diagnostic or laboratory tests—including (but not limited to) imaging, blood work, urinalysis, and electrocardiogram—to facilitate diagnosis, referral, and treatment planning.

Standard 73: Select and incorporate interventions (for pre-op patients, post-op patients, and patients with nonsurgical conditions) that align with the care plan. Interventions include (but are not limited to) the following:
- Therapeutic and corrective exercise
- Joint mobilization and manipulation
- Soft tissue techniques
- Movement training (including gait training)
- Motor control / proprioceptive activities
- Task-specific functional training
- Therapeutic modalities
- Home care management
- Cardiovascular training

Standard 77: Identify, refer, and give support to patients with behavioral health conditions. Work with other health care professionals to monitor these patients’ treatment, compliance, progress, and readiness to participate.

Standard 80: Develop, implement, and assess the effectiveness of programs to reduce injury risk.

Standard 82: Develop, implement, and supervise comprehensive programs to maximize sport performance that are safe and specific to the client’s activity.

Standard 88: Perform administrative duties related to the management of physical, human, and financial resources in the delivery of health care services. These include (but are not limited to) the following duties:
- Strategic planning and assessment
- Managing a physical facility that is compliant with current standards and regulations
- Managing budgetary and fiscal processes
- Identifying and mitigating sources of risk to the individual, the organization, and the community
- Navigating multipayer insurance systems and classifications
- Implementing a model of delivery (for example, value-based care model)

Standard 89: Use a comprehensive patient-file management system (including diagnostic and procedural codes) for documentation of patient care and health insurance management.

Standard 91: Develop, implement, and revise policies and procedures to guide the daily operation of athletic training services.
Standard 92: Develop, implement, and revise policies that pertain to prevention, preparedness, and response to medical emergencies and other critical incidents.

Standard 93: Develop and implement specific policies and procedures for individuals who have sustained concussions or other brain injuries, including the following:
- Education of all stakeholders
- Recognition, appraisal, and mitigation of risk factors
- Selection and interpretation of baseline testing
- Agreement on protocols to be followed, including immediate management, referral, and progressive return to activities of daily living, including school, sport, occupation, and recreation

Standard 94: Develop and implement specific policies and procedures for the purposes of identifying patients with behavioral health problems and referring patients in crisis to qualified providers.

III. Course Assignments, Activities, Instructional Strategies, use of Technology:

Assignments:
A.) Clinical Hours - 15% of total grade:
- Rules and regulations during clinical experiences will adhere to the Graduate Athletic Training Policy and Procedures Manual.
- The athletic training student will have either an eight week or a sixteen week (full season) clinical experience during the course.
- Clinical hours should not fall below 160 hours (eight-week experience) and 340 hours (full season experience). The athletic training student (ATS) should aim to complete on average 30 clinical hours per week and greater during the immersive period, but also could be less dependent on the clinical site.
- The ATS will have an immersive clinical experience during the first 8-weeks of the course. During the immersive clinical experience, the ATS will attend face to face classes for clinical courses only, ATTR 5551.001 on Mondays. Mondays will also be deemed the ATS designated day off from their clinical experience. For the remainder of the week, the ATS is expected to mirror the daily clinical hours of their preceptor, as set forth by their preceptor (e.g. 8:00am-5:00pm).
- Hours NOT obtained under a certified athletic trainer, or Texas state credentialed athletic trainer WILL NOT count towards the minimum hours set by the curriculum.
- Absences, tardiness, or laziness will not be tolerated.

The instructor will provide didactic instruction to the student during the two-hour class time. The instructor will provide organized, planned visits of supervision to students while at designated clinical sites.

Grading Scale for Clinical Hours

<table>
<thead>
<tr>
<th>Season Sport / Full Semester</th>
<th>8 week</th>
</tr>
</thead>
<tbody>
<tr>
<td>400-500 clinical hours = 81-100pts</td>
<td>&gt;300 clinical hours = 100 points</td>
</tr>
<tr>
<td>300-399 clinical hours = 61-80 pts</td>
<td>&lt; 300 clinical hours = 80 points</td>
</tr>
<tr>
<td>&lt; 300 clinical hours = 60 pts</td>
<td></td>
</tr>
</tbody>
</table>

B.) Assignments - 15% of total grade:

1.) Quizzes
- Quizzes will occur daily and may be delivered in a variety of ways- orally, hands -on application, paper, etc.
- Any of the material covered from the previous class days could be on the quiz
- Come to class prepared!

2.) Journal Reflections
- Students will answer journal reflections periodically throughout the semester.
- Journal reflections are worth 10 points.

3.) Season Workbook
- If you are in your Season Sport / Full semester, your assignment will be: Workbook - 20% of total grade (20 points each submission = 80 total points)
- Diary of monthly fieldwork experience. To be submitted on the last day of the ending of a 4th week period = totaling 4 submissions / semester, no matter the clinical experience.
  - Diary should include but not limited to topics such as time spent at clinical site, work performed, conditions treated and treatments administered.
    - SOAP Documentation and Clinical Reasoning forms should be competed for each independent evaluation you performed.
  - Progression of skills, interaction and involvement with the athletes / team and management should be evident in the diary.
  - Compile self-reflective notes on the nature and extent of the learning opportunities.
  - Prepare and present a power point presentation of your experience.
OR

8-Week Case Study
If you are in the 8-week rotation, your assignment will be: Case Study presentation – 20% of total grade
• Present a case study – injury, treatment technique

*Those in a basketball (split AY rotation) will do the Case Study during the fall semester and the Workbook during the spring semester. Everyone will end up doing both, as to when it is completed will be dependent on your clinical assignments. These assignments will carry over into KIN 551:02.

Workbook Presentation Rubric

<table>
<thead>
<tr>
<th>Category</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organization</td>
<td></td>
</tr>
<tr>
<td>PowerPoint information</td>
<td>10</td>
</tr>
<tr>
<td>extremely logical content delivery. Lasted 8’ – 7:30”.</td>
<td>8</td>
</tr>
<tr>
<td>good logical content delivery. Lasted 7:30’ - 7”.</td>
<td>5</td>
</tr>
<tr>
<td>average logical content delivery. Lasted 7” – 6:30”.</td>
<td>3</td>
</tr>
<tr>
<td>minimal logical content delivery. Lasted 6:30” – 6”.</td>
<td>1</td>
</tr>
<tr>
<td>PowerPoint information</td>
<td>10</td>
</tr>
<tr>
<td>has extremely logical content delivery. Lasted 8’ – 7:30”.</td>
<td>8</td>
</tr>
<tr>
<td>has good logical content delivery. Lasted 7:30’ - 7”.</td>
<td>5</td>
</tr>
<tr>
<td>has average logical content delivery. Lasted 7” – 6:30”.</td>
<td>3</td>
</tr>
<tr>
<td>has minimal logical content delivery. Lasted 6:30” – 6”.</td>
<td>1</td>
</tr>
<tr>
<td>Quality of Information</td>
<td></td>
</tr>
<tr>
<td>Provided exceptional insight to clinical experiences by citing several supporting details and/or examples. Provided enriching clinical descriptions / applications.</td>
<td>10</td>
</tr>
<tr>
<td>Provided good insight to clinical experiences by citing many supporting details and/or examples. Provided good clinical descriptions / applications.</td>
<td>8</td>
</tr>
<tr>
<td>Provided average incite to clinical experiences by citing some supporting details and/or examples. Provided average clinical descriptions / applications.</td>
<td>5</td>
</tr>
<tr>
<td>Provided minimal insight to clinical experiences by citing minimal supporting details and/or examples. Provided minimal clinical descriptions / applications.</td>
<td>3</td>
</tr>
<tr>
<td>No insight to clinical experiences was provided. Content did provide any understanding of clinical learning / exposure.</td>
<td>1</td>
</tr>
<tr>
<td>Quality of Self-Reflection</td>
<td></td>
</tr>
<tr>
<td>Provided an exceptional perspective and reflection of clinical experiences</td>
<td>10</td>
</tr>
<tr>
<td>Provided a good perspective and reflection of clinical experiences</td>
<td>8</td>
</tr>
<tr>
<td>Provided an average perspective and reflection of clinical experiences</td>
<td>5</td>
</tr>
<tr>
<td>Provided minimal perspective and reflection of clinical experiences</td>
<td>3</td>
</tr>
<tr>
<td>No perspective and reflection of clinical experiences was provided.</td>
<td>1</td>
</tr>
<tr>
<td>Mechanics</td>
<td></td>
</tr>
<tr>
<td>No grammatical, spelling or punctuation errors, followed APA format; exceptional speaking voice, flow</td>
<td>10</td>
</tr>
<tr>
<td>Couple of grammatical, spelling, or punctuation errors, 1-2 APA mistakes; good speaking voice, flow</td>
<td>8</td>
</tr>
<tr>
<td>Few grammatical, spelling, or punctuation errors, 3-4 APA mistakes; average speaking voice, flow</td>
<td>5</td>
</tr>
<tr>
<td>Many grammatical, spelling, or punctuation errors, APA mistakes; below average speaking voice, flow</td>
<td>3</td>
</tr>
<tr>
<td>Way too many for a graduate student, did not follow APA format; low quality speaking voice, flow</td>
<td>1</td>
</tr>
</tbody>
</table>

Total points = ________/ 40 x 2= 80 points possible
### Clinical Case Study Presentation Rubric

<table>
<thead>
<tr>
<th>Category</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>10</td>
</tr>
<tr>
<td><strong>Organization</strong></td>
<td>Information has extremely logical content delivery. Lasted 8” – 7:30”.</td>
</tr>
<tr>
<td><strong>Quality of Information</strong></td>
<td>Provided exceptional insight to case study by citing several supporting details and/or examples. Provided enriching content applicable to topic.</td>
</tr>
<tr>
<td><strong>Quality of Lit Review</strong></td>
<td>Provided an exceptional literature / EBR to support case study through correct citations. Provided enriching content to discuss the topic.</td>
</tr>
<tr>
<td><strong>Mechanics</strong></td>
<td>No grammatical, spelling or punctuation errors; followed APA format; exceptional speaking voice, flow.</td>
</tr>
</tbody>
</table>

Total points = ________/ 40 x 2= 80 points possible

4.) **Community Involvement – PASS / FAIL**

- Every ATS must participate in at least one professional development or responsibility project/ presentation during the AY.
- Suggestions include but are not limited to—
  - Develop and present material (oral, pamphlet/handout, written article, or other media type) for an athletic training related topic to a School / Community / Professional workshop group.
  - Volunteer as an ATS at a community event and write a reflection paper to outline your role and its importance to the overall event.
- If a student fails to participate in a project / presentation, a FAIL will be recorded and 10 total points will deducted from the proficiency weighted grade section of KIN551.002.

5.) **Health Informatics EBP Clinical Case Study** *(Completed during full season immersive clinical experience; ATTR 5551.01 or 5551.02)*

The ATS will select a long-term rehab (minimum 4 weeks) patient from their immersive experience where they have provided care from initial injury to RTP. The ATS will utilize the patient’s data in Typhon to report patient-based outcomes and create a treatment plan. The ATS will print the patient record, present the patient case, and treatment plan via recorded presentation (Due to COVID-19).

6.) **Patient Case Log** *(Completed during full season immersive clinical experience; ATTR 5551.01 or 5551.02)*

The ATS will provide a printed patient case log with a written report of a patient encounter.

The printed case log must include the following:

- Diagnostic codes
- Procedural codes
- Patient evaluation documentation
- Patient treatment documentation
- Patient rehabilitation documentation
### 7.) Ask Your Preceptor Projects

These projects will utilize the athletic training student’s assigned preceptor to encourage discussion of topics to complete each project.

**a.) Ask Your Preceptor – Injury Risk**

Injury data from a patient group will be given to the ATS. The ATS will review and evaluate the data, looking for ways to enhance care of the patient group. Quality assurance and quality improvement to improve patient care will be introduced in class and a guest speaker will present how they used the process. The ATS will develop their own strategies to enhance patient care from the data and then discuss with their preceptor to answer the following questions:

- How have they used patient data in the past to improve patient care?
- Explain what was done and the developmental process they used to change/create what was done
- Did what they created/changed result in a reduction of injuries or a change in RTP, etc? If so explain how.

The ATS will then review the injury data from their 16-week immersive or eight-week clinical experience and develop an injury protocol to reduce injury. Their assigned preceptor will review the created protocol and video the ATS implementing the protocol with a patient(s).

The following items are required to complete the project:

- Patient care enhancement or Injury Reduction strategies from given patient data
- Answers from questions discussed with assigned preceptor
- Newly created injury protocol from 16-week immersive or eight-week clinical experience. The protocol was created from reviewing injury data at clinical site.
- Video of the ATS implementing newly created protocol at assigned clinical site.
- **A short letter with signature is required by the preceptors verifying evidence of the discussion.**

**b.) Ask Your Preceptor – Administrative Concepts**

The ATS will submit a typed summary of the discussion with the preceptor for each of the following topics:

- Facility compliance (ADA, HIPAA)
- Budget process (PO, Accounts payable)
- Policy regarding Student/ Patient Health Insurance

A reflection is also required on how the process helped you to further understand the administrative concepts with an Athletic Trainer.

**A short letter with signature is required by the preceptors verifying evidence of the discussion.**

**c.) Ask Your Preceptor – Policy & Procedures** *(Completed during full season immersive clinical experience; ATTR 5551.01 or 5551.02)*

The ATS will utilize the policy and procedure manual created during ATTR 5334 to complete this project. The ATS will review their clinical site’s policy and procedures for the following:

<table>
<thead>
<tr>
<th>Category</th>
<th>Outstanding (10)</th>
<th>On Target (8)</th>
<th>Needs improvement (6)</th>
<th>Did not follow all instructions (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organization</td>
<td>Submission is free of typographical and grammatical errors, clearly written and</td>
<td>Submission contains 3-5 typographical or grammatical errors, lacks consistency</td>
<td>Submission contains &gt;5 typographical or grammatical errors, is poorly formatted or lacks</td>
<td>Submission contains &gt;5 typographical or grammatical errors, lacks flow, and would be unrealistic or unreasonable documentation in an athletic training setting.</td>
</tr>
<tr>
<td></td>
<td>formatted, and exhibits realistic documentation of that in an athletic training setting.</td>
<td>or flow.</td>
<td>flow, and would be unrealistic or unreasonable documentation in an athletic training setting.</td>
<td></td>
</tr>
<tr>
<td>Patient Encounter</td>
<td>Patient encounter report is well-written, describes areas for quality improvement,</td>
<td>Patient encounter report is clearly written, describes areas for quality improvement, is mostly supported by data, and includes somewhat relevant/feasible solutions. Includes diagnostic and procedural codes, evaluation, treatment, and rehabilitation.</td>
<td>Patient encounter report needs improvement in clarity, organization, and/or content. Some areas for quality improvement are describe, with some supporting data. Solutions may be farfetched or irrelevant. Does not include all diagnostic codes, evaluation, treatment, and rehabilitation documentation.</td>
<td>Patient encounter report is lacking content or poorly written. Few data were described to support suggestions for quality improvement or solutions. Is missing most of the required portions of the patient encounter.</td>
</tr>
</tbody>
</table>

Total points: _______/ 25
Professionalism

Mechanics / Organization

Information

Quality of Interaction

Preceptor

Narrative

Category

Points

Outstanding (5)

The narrative is original, substantive, and offers a clear, insightful, in-depth response to the assignment directions and questions.

On Target (4)

The narrative is right on target, clear, reasonable, well-developed to the assignment directions and questions.

Under Developed (3)

The narrative is brief and/or too general, and/or vaguely aligns to assignment directions and questions.

Novice (2)

The narrative is minimal and/or vague in its content, and/or does not align to assignment directions and questions.

Preceptor Interaction

Extensive evidence is provided that discussion occurred with assigned preceptor(s).

Adequate evidence is provided that discussion occurred with assigned preceptor(s).

Inadequate evidence is provided that discussion occurred with assigned preceptor(s).

No evidence that discussion occurred with assigned preceptor(s).

Quality of Information

Provided exceptional insight to project by citing several supporting details and/or examples. Provided enriching content applicable to topic.

Provided adequate insight to project by citing many supporting details and/or examples. Provided average content applicable to topic.

Provided inadequate insight to project by citing some supporting details and/or examples. Provided minimal content applicable to topic.

Provided poor insight to project by citing minimal supporting details and/or examples. Provided poor content applicable to topic.

Organization

Information has extremely logical content delivery.

Information has logical content delivery.

Information has minimally logical content delivery.

Information has poor content delivery.

Mechanics / Professionalism

No grammatical, spelling or punctuation errors were noted, followed APA format.

A couple of grammatical, spelling, or punctuation errors and/or 1-2 APA mistakes were noted.

Few grammatical, spelling, or punctuation error and/or 3-4 APA mistakes were noted.

Many grammatical, spelling, or punctuation errors, and/or APA mistakes were noted.

Total points: _______ / 25

C.) Proficiencies - 35% of total grade:

- Refer to Graduate Athletic Training Policy and Procedures Manual or KIN522 D2L accessible via MySFA.
- All proficiencies will be located in the course on D2L. It is the responsibility of the student to upload each proficiency into their Typhon account. All proficiencies will be fillable pdfs for the preceptor to complete within Typhon.
- It is your responsibility to show verification that you have practiced all assigned skills within each proficiency topic with both a PEER and a PRECEPTOR before you take the final assessment. All final assessments should be scheduled with your assigned preceptor, 24 hours in advance. All practices and the final assessment MUST be completed within the scheduled 2-week time frame.
- ATS in the 8-week specialty healthcare rotation MUST perform the FINAL PROF with a GATP Faculty.
- For each proficiency, you will be given two opportunities to successfully pass (80%) the final assessment to show competency of that specific skill. ALL 3rd attempts will be scheduled during “dead” week.
• Proficiency skills will be posted on D2L. All performances/assessments must be completed by the posted due date on each proficiency (that includes a retake). If you are unable to meet a deadline, please notify the course instructor in writing.

• Comprehensive Proficiency testing will occur during the week of Nov17-20. The ATS will be assessed over one of the proficiencies that occurred during the semester.

D.) Evaluations – 35% of total grade:
• During all clinical experiences, evaluations will be completed every 4 weeks throughout the experience.
• An orientation survey MUST be completed by the student within the first week of each new facility rotation. This survey is found in Typhon evaluations.
• At the completion of each clinical site rotation, the preceptor will perform an evaluation on all athletic training students under their supervision (30%).
• The preceptor will complete the ATS evaluation form in Typhon. The preceptor should discuss the completed evaluation with the student. This is your time to ask questions to the preceptor about how you were scored on the evaluation.
• It is your responsibility to check your Typhon account to ensure the ATS evaluation was completed by the preceptor prior to the due date.
• Evaluations of the clinical site and the preceptor will be performed by the athletic training student at the conclusion of each experience. These are found in Typhon under evaluations.
• ALL clinical hours and evaluations are due on the Monday after the end of every four weeks. However, all clinical hours and evaluations are to be completed before the end of the four-week clinical experience.

The ATS will use Typhon to record all clinical hours, complete evaluations, complete proficiencies, and record patient cases. The following clinical skills are required to be performed at specific clinical sites.

<table>
<thead>
<tr>
<th>Skill</th>
<th>Clinical Site</th>
<th>Action in Typhon</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnostic Imaging</td>
<td>Overturf Orthopedics &amp; Nacogdoches Neurosurgery</td>
<td>Record case log of patient encounter, ICD and CPT codes.</td>
</tr>
</tbody>
</table>

IV. Evaluation and Assessments (Grading):

GRADING SCALE

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Grade</th>
<th>Clinical Hours</th>
<th>Proficiencies</th>
<th>Assignments</th>
<th>Evaluations</th>
<th>Attendance</th>
</tr>
</thead>
<tbody>
<tr>
<td>100% – 90%</td>
<td>A</td>
<td>15%</td>
<td>35%</td>
<td>15%</td>
<td>35%</td>
<td>Absences and tardiness will be monitored. Refer to the Attendance policy in Section VIII - Student Ethics and Other Policy Information.</td>
</tr>
<tr>
<td>69% - 80%</td>
<td>B</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>79% - 70%</td>
<td>C</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>69% - 60%</td>
<td>D</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;60%</td>
<td>F</td>
<td></td>
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</tr>
</tbody>
</table>

Grades will be calculated according to the percentages as noted above. Points will be given for hours, evaluations, proficiencies, and assignments. Absences could affect your grade.

V. Tentative Course Outline/Calendar:

<table>
<thead>
<tr>
<th>DAY</th>
<th>DISCUSSION</th>
<th>REFERENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 – 08.24</td>
<td>Introduction; Syllabus; Clinical Expectations; Specialty Healthcare; REVIEW TOPICS Introduce Proficiency #1- Therapeutic Modalities</td>
<td></td>
</tr>
<tr>
<td>2 – 08.31</td>
<td>Quiz 1; Ask your Preceptor Projects Scenarios; Suggested Student Topics to Review</td>
<td></td>
</tr>
<tr>
<td>3 – 09.7</td>
<td>Quiz 2: Proficiency #1 DUE Introduce Prof. #2- Foot, Ankle, Lower Leg &amp; Knee Evaluation Check In</td>
<td></td>
</tr>
<tr>
<td>4 – 09.14</td>
<td>Quiz 3; Journal Reflection #1 Guest Speaker- Ask Your Preceptor Project- Injury Risk Scenarios</td>
<td></td>
</tr>
<tr>
<td>5 – 09.21</td>
<td>Quiz 4; Proficiency #2 DUE Introduce Prof. #3- Therapeutic Exercise</td>
<td></td>
</tr>
<tr>
<td>6 – 09.28</td>
<td>Quiz 5; Discuss Ask your Preceptor Project -Administrative Concepts Scenarios; Joint Mobilizations- Dr White</td>
<td></td>
</tr>
<tr>
<td>7 – 10.5</td>
<td>Quiz 6; Proficiency #3 DUE Introduce Proficiency # 4 – Upper Extremity / Torso Evaluation Check in</td>
<td></td>
</tr>
<tr>
<td>8 – 10.12</td>
<td>Quiz 7; Journal Reflection #2 Scenarios; Suggested Student Topics to Review</td>
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### Course Schedule:

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<th>Date</th>
<th>Event</th>
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| 9 – 10.19  | Quiz 8; Proficiency #4 DUE  
Introduce Proficiency #5: Head, Cervical & Thoracic Spine Evaluation Scenarios |
| 10 – 10.26 | Quiz 9; Journal Reflection #3; Scenarios; Suggested Student Topics to Review  
Patient Encounter Project Due (16-week CE Only) |
| 11 – 11.2  | Quiz 10; Proficiency #5 Due; Check in  
Introduce Prof. #6 Clinical General Medical Conditions Scenarios |
| 12 – 11.9  | Ask Your Preceptor- Administrative Concepts Project Due  
SFA Nursing Simulations – Meet there @ 11:00am |
| 13 – 11.16 | Proficiency #6 Due  
Ask Your Preceptor- Injury Risk Project Due |
| 11.16- 11.20 | Proficiency #7: Comprehensive Proficiency Testing with Dr. Watts |
| 14 – 11.23 | **THANKSGIVING BREAK** |
| 15 – 11.30 | 8-week Case Study Presentations  
Ask Your Preceptor- Policy & Procedure Project Due (16-week CE Only)  
Ask Your Preceptor – Concussion Policy Due (16-week CE Only) |
| 16 – 12.7  | Season Workbook Presentations  
Health Informatics EBP Case Study Due (16-week CE Only) |

**ALL DATES AND ASSIGNMENTS ARE TENTATIVE**

Attendance will be recorded daily, but will not have an associated score. Participation with daily discussions is expected.

### VI. Readings (Required and recommended—including texts, websites, articles, etc.):

**Required Text:**


### VII. Course Evaluations:

Near the conclusion of each semester, students in the Perkins College of Education electronically evaluate courses taken within the PCOE. Evaluation data is used for a variety of important purposes including:

1. Course and program improvement, planning, and accreditation;
2. Instruction evaluation purposes; and
3. Making decisions on faculty tenure, promotion, pay, and retention.

As you evaluate this course, please be thoughtful, thorough, and accurate in completing the evaluation. Please know that the PCOE faculty is committed to excellence in teaching and continued improvement. Therefore, your response is critical!

In the Perkins College of Education, the course evaluation process has been simplified and is completed electronically through MySFA. Although the instructor will be able to view the names of students who complete the survey, all ratings and comments are confidential and anonymous, and will not be available to the instructor until after final grades are posted.

### VIII. Student Ethics and Other Policy Information: Found at [https://www.sfasu.edu/policies](https://www.sfasu.edu/policies)

**Class Attendance and Excused Absence: Policy 6.7**

Regular, punctual attendance, documented participation, and, if indicated in the syllabus, submission of completed assignments are expected at all classes, laboratories, and other activities for which the student is registered. Based on university policy, failure of students to adhere to these requirements shall influence the course grade, financial assistance, and/or enrollment status. The instructor shall maintain an accurate record of each student’s attendance and participation as well as note this information in required reports (including the first 12 days of the semester).
attendance report) and in determining final grades. Students may be excused from attendance
for reasons such as health, family emergencies, or student participation in approved university-
sponsored events. However, students are responsible for notifying their instructors in advance,
when possible, for excusable absences. Whether absences are excused or unexcused, a
student is still responsible for all course content and assignments. Students with accepted
excuses may be permitted to make up work for up to three weeks of absences during a semester
or one week of a summer term, depending on the nature of the missed work. Make-up work must
be completed as soon as possible after returning from an absence.

**Academic Accommodation for Students with Disabilities: Policy 6.1 and 6.6**

- To obtain disability related accommodations, alternate formats and/or auxiliary aids, students with disabilities
  must contact the Office of Disability Services (ODS), Human Services Building, and Room 325, 468-3004 as
early as possible in the semester. Once verified, ODS will notify the course instructor and outline the
accommodation and/or auxiliary aids to be provided. Failure to request services in a timely manner may delay
your accommodations. For additional information, go to [http://www.sfasu.edu/disabilityservices/](http://www.sfasu.edu/disabilityservices/).

**Student Academic Dishonesty: Policy 4.1**

Abiding by university policy on academic integrity is a responsibility of all university faculty and students. Faculty
members must promote the components of academic integrity in their instruction, and course syllabi are required to provide
information about penalties for cheating and plagiarism, as well as the appeal process.

**Definition of Academic Dishonesty**

- **Academic Dishonesty** includes both cheating and plagiarism. Cheating includes but is not limited to
  a. Using or attempting to use unauthorized materials to aid in achieving a better grade on a component
     of a class;
  b. The falsification or invention of any information, including citations, on an assigned exercise; and/or
  c. Helping or attempting to help another in an act of cheating or plagiarism.
- **Plagiarism** is presenting the words or ideas of another person as if they were your own. Examples of plagiarism
  are
  a. submitting an assignment as one’s own work when it is at least partly the work of another person;
  b. submitting a work that has been purchased or otherwise obtained from the Internet or another source;
  c. incorporating the words or ideas of an author into one’s paper or presentation without giving the author credit.

**Penalties for Academic Dishonesty**

Penalties may include, but are not limited to reprimand, no credit for the assignment or exam, re-submission of the
work, make-up exam, failure of the course, or expulsion from the university.

**Student Appeals**

A student who wishes to appeal decisions related to academic dishonesty should follow procedures outlined in
Academic Appeals by Students (6.3).

**Withheld Grades: Policy 5.5**

At the discretion of the instructor of record and with the approval of the academic unit head, a grade of WH will be assigned
only if the student cannot complete the course work because of unavoidable circumstances. Students must complete the
work by the deadline set by the instructor of record, not to exceed one calendar year from the end of the semester in which
they receive a WH, or the grade automatically becomes an F, except as allowed through policy [i.e., Military Service
Activation (6.14)]. If students register for the same course in future semesters, the WH will automatically become an F and
will be counted as a repeated course for the purpose of computing the grade point average.

**Student Code of Conduct: Policy 10.4**

Disruptive Behavior--Interference or disruption of students, faculty, administration, staff, the educational mission, or routine
operations of the university is prohibited. Such activity includes, but is not limited to, behavior in a classroom or instructional
program that interferes with the instructor or presenter’s ability to conduct the class or program, or the ability of others to
profit from the class or program. To remain in the vicinity of activity that is disrupting normal university functions when
requested to leave by a university official is prohibited. The instructor shall have full discretion over what behavior is
appropriate/inappropriate in the classroom. Students who do not attend class regularly or who perform poorly on class
projects/exams may be referred to the Early Alert Program at SFA.
Masks (cloth face coverings) must be worn over the nose and mouth at all times in this class and appropriate physical distancing must be observed. Students not wearing a mask and/or not observing appropriate physical distancing will be asked to leave the class. All incidents of not wearing a mask and/or not observing appropriate physical distancing will be reported to the Office of Student Rights and Responsibilities. Students who are reported for multiple infractions of not wearing a mask and/or not observing appropriate physical distancing may be subject to disciplinary actions.


IX. Other Relevant Course Information:
- Please ask QUESTIONS.
- Remember, practice makes perfect.
- Establish study groups.
- Do not leave studying to the last minute.
- Purchase and utilize some kind of daily planning tool (i.e. paper planner; reminders of all assignments/tests in phone, etc)