



Department of Kinesiology
ATR 493: Clinical Preceptorship

Fall 2016

Meeting days:	Instructor: Nicole Cosby, PhD, ATC
Meeting times: 7:30-9:25am	Office phone: 1-619-849-2901
Meeting location: Rohr 119	E-mail: nicolecosby@pointloma.edu
Any additional info:	Office hrs: T/TH 10-12:30
Final Exam: Friday, December 15 th 7:30am	Canvas Login: canvas.pointloma.edu

COURSE DESCRIPTION and AIM

This course aims to provide you with in-depth study and eventual mastery of the knowledge and skills you will need as a health professional to perform basic general medicine evaluations on patients in the clinical setting. Students will be prepared and asked to contribute to each clinical setting (general medicine, orthopedic, physical) as requested by their onsite preceptor(s).

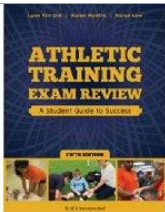
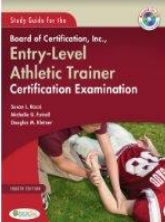
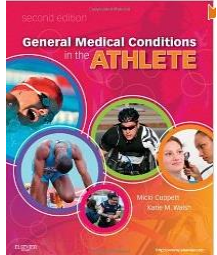
In the process, you will develop an emerging mastery of the Educational Competencies of the NATA's Educational Council (See Appendix D for details on these Competencies in preparation for the Board of Certification Examination for Athletic Trainers)

To be successful in this course, students must take ownership of learning materials that might seem very interesting, but will help them grow and develop clinicians that take a multifaceted approach to patient evaluation and treatment.

STUDENT LEARNING OUTCOMES

1. All students will perform at an "autonomous" level on proficiency testing as evaluated by their Approved Clinical Instructor
2. All students will receive 85% or better during evaluations with Approved Clinical Instructor in the areas of personal performance, education competence, psychomotor skill and clinical proficiency
3. Students will be able to pass the MOC NATA BOC examination by 70% at the end of the Fall semester
4. Students will be able to illustrate their knowledge of an assigned general medical condition as assessed with an oral presentation rubric by presenting to peers and healthcare professionals
5. Students will be able to score a high satisfactory (80%) or better (100%) during their oral presentation on a general medical condition
6. Students will be able observe and make treatment/rehabilitation based decisions using evidence based medicine based on a patient interaction during rotation. These observations and treatment decisions will be made in written form using a case study format.

REQUIRED TEXTS AND RECOMMENDED RESOURCES

Required Textbooks		
	Title	Athletic Traiing Exam Review: A guide to success (4 th or 5 th ed)
	Author	Lynn Van Ost and Karen Manfre
	ISBN	978-1617116131 (5 th ed)/ 978-1556428548 (4 th
	Publisher	Slack Inc
	Publication Date	June 15, 2013
	Title	Study Guide for the Board of Certification, Inc. Entry-Level AT certification Examination
	Author	Susan Rozzi, Michelle Futrell and Douglas Kleiner
	ISBN	978-0803600201 (4 th ed)
	Publisher	FA Davis
	Publication Date	December 6, 2010
Recommended Textbook		
	Title	General Medical Conditions in the Athlete 2 nd ed
	Author	Micki Cuppett and Katie Walsh
	ISBN	978-0323059213 (2 nd ed)
	Publisher	Elsevier
	Publication Date	April 6, 2011

FINAL EXAMINATION POLICY

Successful completion of this class requires taking the final examination **on its scheduled day**. The final examination schedule is posted on the [Class Schedules](#) site. No requests for early examinations or alternative days will be approved.

PLNU COPYRIGHT POLICY

Point Loma Nazarene University, as a non-profit educational institution, is entitled by law to use materials protected by the US Copyright Act for classroom education. Any use of those materials outside the class may violate the law.

PLNU ACADEMIC HONESTY POLICY

Students should demonstrate academic honesty by doing original work and by giving appropriate credit to the ideas of others. Academic dishonesty is the act of presenting information, ideas, and/or concepts as one's own when in reality they are the results of another person's creativity and effort. A faculty member who believes a situation involving academic dishonesty has been detected may assign a failing grade for that assignment or examination, or, depending on the seriousness of the offense, for the course. Faculty should follow and students may appeal using the procedure in the university Catalog. See [Academic Policies](#) for definitions of kinds of academic dishonesty and for further policy information.

PLNU ACADEMIC ACCOMMODATIONS POLICY

If you have a diagnosed disability, please contact PLNU's Disability Resource Center (DRC) within the first two weeks of class to demonstrate need and to register for accommodation by phone at 619-

849-2486 or by e-mail at DRC@pointloma.edu. See [Disability Resource Center](#) for additional information.

PLNU ATTENDANCE AND PARTICIPATION POLICY

Regular and punctual attendance at all classes is considered essential to optimum academic achievement. If the student is absent from more than 10 percent of class meetings, the faculty member can file a written report which may result in de-enrollment. If the absences exceed 20 percent, the student may be de-enrolled without notice until the university drop date or, after that date, receive the appropriate grade for their work and participation. See [Academic Policies](#) in the Undergraduate Academic Catalog.

ACTIVE LEARNING AND EVIDENCE BASED MEDICINE

Active Learning

Your active participation in this class will be required. You will be responsible for your own learning by reviewing class material before and after class. I will guide you in this process; however, in the end the onus of learning will be your responsibility. **Become intrinsically motivated to improve yourself and your understanding of therapeutic modality treatments** and techniques; if you do this you will succeed every time.

Here are some KEYS to success:

- o EFFORT (Work hard)
- o APPROACH (Work smart)
- o ATTITUDE (Think positively)

Evidence Based Medicine

Evidence based medicine (EBM) is the integration of clinically relevant research, clinical skills and experience, and patient preferences and values (Sackett et al 2000). The increased awareness **and focus on the practice of Evidence Based Medicine comes from our daily need for valid information about diagnosis, prognosis, therapy, and prevention.** We want to ask local questions about the effectiveness of therapeutic modalities and design ways to find answers. The EBM portion of this course is **designed so students can explore therapeutic modalities commonly used in the athletic training setting** and determine what **evidence is available to support their current uses.**

COURSE REQUIREMENTS

**Please Note: The PLNU Catalog states that 1 semester unit represents an hour of class per week, and 2 hours of preparation are normal for each hour of class. Therefore, if you spend about 4 hrs per week outside of class in preparation, you will significantly increase your chances of doing well!*

Course Assignments

A. Course Rotations, Continuity and Chapel Attendance

1. Clinical Rotations are 5 weeks long with the exception of the semester long PLNU Athletic Training Clinic rotation. Clinical educational affiliates are provided on syllabus.
2. In addition to the 5 week long rotations with a General Medicine Practitioner, Physical Therapist and an Orthopedic Surgeon students will also be expected to spend at minimum 3 clinical hours in the PLNU clinic.
3. The Rehab United and Longevity Physical Therapy rotations are the only rotations will students must obtain 30 hours of clinical times. The others are variable but these two rotations are not. As such students should have two 3 hour rotations per week.
4. Some of the students may have clinical rotations that interfere with Chapel attendance. I have tried my best to schedule your rotations so that you can make it back to campus for Chapel. In the event that a student misses Chapel please note the following message from the provost: **Each semester, there are over 50 opportunities for chapel credits (about 4 per week). Fr/So are required to get 32 of those 50+ and Jr./Sr. are required to get 25 of those 50+ opportunities. So, if one equates exemptions for opportunities actually missed and then wants that number deducted from their required attendance, one grossly over weights a single missed opportunity since what is required is far less than what is available. The other factor is that chapel attendance is counted on the semester basis rather than on a week by week basis. So to meet the required amount students have to average less than 2 a week (for JR/SR), in a given week where they don't have conflicts, they could get up to 4 chapel credits.**

B. **Clinical Case Reports (50 points each)**

Case studies of clients with whom the student works during each clinical rotation. One case report is required for **each rotation** and **due the Monday** of the fourth week of each rotation at colloquy in hard copy.

C. **Journaling (50 points each)**

The student will chronicle, preserve and present the achievements realized during the term. Student will log the events of **each day** worked in the OR/clinic rotations of this course including comment on the roles played by the various medical professionals with whom the student works.

Every five weeks (at the conclusion of each rotation) the student will turn in their journal along with a summary at colloquy. The summary should include:

- a. Highlights/provocative events and cases
- b. Significant areas of professional and personal growth during the clinical experience
- c. Plans for professional/personal growth
- d. Plans for post-graduation. Does this change during each rotation?
- e. Mentoring: how is it going? Any areas of concern in regards to your mentee, things your mentee might be right that deserve attention.

D. **Clinical Performance Assessments**

1. Students will be assessed on the educational competencies and clinical proficiencies in assignments and/or one-on-one sessions with Dr. Cosby or other preceptors in the PLNU clinic.
2. In the final week of your surgical, physical therapy, and general medicine clinical rotations the preceptor will assess the student's clinical performance on the ***Assessment of Student Clinical Performance by the preceptor*** (online). In the PLNU rotation **midterm** and **final** assessments are performed by Dr. Cosby. These periodic assessments are vital for students to know how they are perceived by clinical professionals and performing clinical. The written assessment of the student's developmental progress in each of the clinical proficiencies will be retained in the student portfolio, and by the Program Director.

E. **Individual Monthly Meeting with Dr. Cosby (see syllabus)**

Senior level ATEP students will meet with Dr. Cosby once a month to discuss their preparation strategies for the BOC, career goals, office site preceptorships and life of course!!! (See tentative schedule for dates)

F. **General Medicine Presentations (100 points)**

As part of the requirements for completing the ATEP, students will select a general medicine topic and will be responsible for creating an in class presentation that is 45'-1 hour in length. Topics for these presentations will include:

- | | |
|-----------------------------|--------------------------------------|
| ✓ Eyes, Ear, Nose, Throat | ✓ Abdomen: Organs, Urogenital |
| ✓ Seizure and TBI | ✓ Musculoskeletal Infection |
| ✓ ThorPreceptorc: Heart | ✓ CNS: Degenerative |
| ✓ ThorPreceptorc: Lungs | Diseases/Neoplasms |
| ✓ Dermatological Conditions | ✓ Mental Health Conditions |
| | ✓ Bone, Joint, Soft Tissue Disorders |

G. General Medicine Screening

During the clinical practicum students will become proficient and assessed on the following general medicine skills/techniques:

✓ Ophthalmic Examination	✓ Abdominal Examination
✓ Otoscopic Examination	✓ General Neurological Examination
✓ Blood Pressure Examination	✓ Asthma Inhaler
✓ Heart and Lung Auscultations	✓ Thermometer
✓ Pulse Assessments	✓ Pupillary Reflex and Reaction
✓ Body Composition Calculations	✓ Eye Motility and Acuity
✓ Urinalysis	✓ Laceration Management

H. Mentorship of Junior ATS

The student will work closely with the junior athletic training student(s) he/she is assigned to (see appendix for student assignments). During the bi-monthly meeting, progress and goals will be discussed as well as strength/weaknesses of the mentee. The student should discuss **progression of mentee** in their **journal**. At the end of the semester the student will turn in a **reflection paper about his/her role as a mentor**.

I. Peer Assisted Teaching/Evaluation

The student will help review proficiencies that are assigned to the juniors and evaluate them. The student will evaluate (autonomous/with prompting/needs improvement) a minimum of 8-10 proficiencies for each of their mentees. During this evaluation the student will be able to give an evaluation of with prompting/needs improvement. This is the Juniors time to get feedback from you prior to asking an ATC to pass of a proficiency.

J. Study Preparation for BOC Examination

- Weekly standardized tests derived from the Arnheim text will be provided to be completed at the student's discretion for the BOC certification exam preparation.
- Van Ost assignments and exams: weekly critical thinking assignments will be assigned by domains. Online exams will be given throughout the semester.
- It is highly encouraged to complete all assignments weekly in preparation for the Mock exams.
- Creating a weakness diary. Students will be expected to turn in a diary which states the areas of their weakness. Specifically, students will have questions that they missed on the tests taken in Arnheim. They will also develop a plan of action for studying → all the way to April.

K. Moc Examinations

Students will take 2 NATA MOC examinations. One examination at mid semester and a final MOC BOC examination at the end of the semester. This is done to give the students of gauge of where they sit going into the Spring semester and preparing the Board examination in April.

Course Exams

Arnheim Equizzes (14x20)

Online quizzes will be posted at the end of each module to asses student learning. Please see tentative schedule for due dates.

Midterm BOC MOC Exam (100 points each)

The material covered in class up to the point of the exam will be tested.

Final BOC MOC Exam (100 points)

Cumulative exam comprised of written questions and practical skills testing.

ASSESSMENT AND GRADING

A. Case Reports (3@50 pts each)	150
B. Journaling (3@50 pts each)	150
C. General Medicine Presentations	100
D. Arnheim Equizzes (14@20 pts each)	280
E. Midterm BOC MOC	100
F. Final BOC MOC	100
TOTAL	880

All assignments are due at the beginning of the class period in which they were assigned. Classes missed due to athletic events, planned family functions or athletic training assignments must be planned and arranged with the professor before class.

NOTE: It is your responsibility to maintain your class schedule. Should the need arise to drop this course (personal emergencies, poor performance, etc.), you have responsibility to follow through (provided the drop date meets the stated calendar deadline established by the university), not the instructor.

Week	Date	Topic/Presenters	Assignments Due	CR
1	9-8 (F)	Introduction to course; Orientation to clinical affiliates Orientation at VALLETTA ORTHOPEDICS @ 3:30pm		NA
2	9-15 (F)	CLINICAL ROTATIONS BEGIN Medical Evaluation Techniques and Equipment (Cosby)	BOC prep- Arnheim Chapters: Psychosocial; On Field Acute Care	1
3	9-15 (F)	Blood disorders in the athletic population (Ganz) TESTLET in class testing	BOC prep- Arnheim Chapters: Therapeutic Mod; Off field eval; BBP	1
4	9-22 (F)	Seizure and TBI (Jalen) TESTLET in class testing	BOC prep- Arnheim : Ther Ex **Wk. meeting #1** Van Ost- Critical Thinking – Cardiovascular (Evaluative Tests)	1
5	9-29 (F)	Special Populations (Nicole Cosby) Urinalysis TESTLET in class testing	BOC prep- Arnheim : Pharmacology **CASE STUDY DUE 1** Van Ost- Critical Thinking – Respiratory (differential dx)	1
6	9-29 (F)	Respiratory Disorders (Paul) Clinical Practice: lung sounds	BOC prep- Arnheim Training & Conditioning **Wk. Meeting DR. COSBY** (Journal #1 Due)	1
7	10-6 (F)	Musculoskeletal Infection, Bone, Joint, Soft Tissue Disorders (Jalen, Nathan)	BOC prep- Arnheim Nutrition Van Ost- Critical Thinking – Musculoskeletal (Treatment)	2
8	10-13 (F)	Genitourinary/Gyn Disorders (Delaney) Clinical Practice: S/S & care of diseases	BOC Prep- Arnheim Environmental medicine	2
9	10-13 (F)	FALL BREAK FRIDAY-No Clinical Duties (student inform CI) Dermatology (Nathan)	BOC Prep- Arnheim Protective Equipment Van Ost: Critical Thinking – Orthopedics (Differential Diagnosis & Evaluative Tests)	2
10	10-27 (F)	Fitness Assessment (Ann Davis?) Clinical Practice: Fitness Assessment	BOC prep- Arnheim Bandaging and taping **CASE STUDY DUE 2**	2
11	11-3 (F)	Eye, Ear, Nose, Throat (Nathan) Clinical Practice: Ophthalmic, nasal, throat, ear exam	BOC prep- Arnheim Mechanism Sports Trauma Van Ost- Critical Thinking – Viscera (Signs & Symptoms) **Wk. Meeting #2** (Journal #2 Due)**	2
12	11-10 (F)	CNS: Degenerative Diseases/Neoplasm (Cosby) Clinical Practice: Neural assessment	BOC prep- Arnheim Tissue Response to Injury	3
13	11-17 (F)	DO MONDAY/TUESDAY CLINICALS ONLY THANKSGIVING THURSDAY!! Cardiac Disorders (Delaney,Paul) Clinical Practice: Heart Sounds, rhythm, Pulse, BP	Weakness Diary and plan of action for BOC DUE	3
14	11-17 (F)	Mental Health Conditions (Cosby) Determining your weaknesses for the EXAM	BOC prep- PLNU Mock practice exam ALL PROFICIENCY DONE	3
15	12-1 (F)	How to take the test???	**CASE STUDY DUE 3** Evaluation by preceptor Final Eval with ME ☺ (Final Journal Due)	3
16	12-8 (F)	BOC MOC EXAM	STUDY, STUDY, STUDY	3

**2017 ATR 493 Clinical Rotation
Assignments**

	Physical Therapy Rotation	General Medicine Rotation		Orthopedic Rotation		
Fall	Catalyst/Longevity	SDSM	MCMC	Valletta Orthopedics		
1					<i>Surgical</i>	<i>Clinical</i>
9-8-2017 - 10-6-2017	PS M: 4-7 (Brian) W: 4-7 (Kristen) DP T: 2-5 R:2-5	DC (W-Dr. Rohrer 8-11)	ES (R Dr. Wong 8-12)	JL	W-8-10:30 (KM)	T-2-5 (KM)
				NS	W-8-10:30 (KM)	F-8-12 (KM)
2						
10-13-2017 - 11-10-2017	NS	JL (W-Dr. Rohrer 8-11)	BS (TR Dr Wong 8:30-Noon)	PS	M-12-5 (KM)	W-1-5 (UTC)
	DC			BY	W7-1030 (KM)	<i>Emily R 830-12 (LJ)</i>
				DG	W7-1030 (KM)	-----
3						
11-17-2017 - 12-15-2017	JL	NS (W-Dr. Rohrer 8-11)	PS (W-Dr.Wong 1-5)	DC	W-8-10:30 (KM)	F-8-12 (KM)
				MG	M 1-4 (KM)	<i>W 1-4 (UTC)</i>
				BS	W 7-10:30 (KM)	

Name	Requirements	Phone
Chris Giudicelli, DPT (Rehab United) cgiudicelli@rehabunited.com Rehab United Sports Medicine and Physical Therapy 3959 Ruffin Road Suite F San Diego, CA 92123	Two days/week for a minimum of 6 hours of participation/week Please email Chris (cgiudicelli@rehabunited.com) two weeks before your rotation to let him know the <u>DAYS</u> and <u>TIMES</u> you are available to work.	858-279-5570
Kristen Knightly (Catalyst Physical Therapy) Knightly.k@gmail.com Catalyst Physical Therapy 3434 Midway Dr #2005a San Diego, CA 92110	Two days/week for a minimum of 6 hours of participation/week Please email Kristen (knightly.k@gmail.com) two weeks before your rotation to let him know the <u>DAYS</u> and <u>TIMES</u> you are available to work.	619-501-2195
Mike Wright (Longevity Physical Therapy) wright@longevityphysicaltherapy.com Longevity Physical Therapy 4561-G Mission Gorge Place San Diego, CA 92120	Two days/week for a minimum of 6 hours of participation/week	619 501-9037
Dr. Rhorer (General Medicine) San Diego Sports Medicine (Alvarado) 6699 Alvarado Road, Suite 2100 San Diego, CA 92120	One day/week for a minimum of 3-5 hours of participation/week every Wednesdays from 7:30-10:30	619.225.1212
Dr. Anthony (General Medicine) San Diego Sports Medicine (Sorrento Valley) 4010 Sorrento Valley Blvd, Suite 300 San Diego, CA 92121	One day/week for a minimum of 3-5 hours of participation/week every Wednesday from 1:30-5:00	858.274.9116
Dr. Calvin Wong (General Medicine) Metro Comprehensive Medical Center 444 W. C Street, Suite #185 San Diego, CA 92101	One day/week for a minimum of 4 hours of participation/week (See clinical schedule to determine time)	619-232-6262
Dr. Damien Valletta., DO, ATC (Ortho/Surgical Rotation) Valletta Orthopedics (La Jolla and Kearny Mesa) UTC Office: 8929 University Center Lane, Suite 205 San Diego, CA 92122	See clinical schedule for days and times of the rotation	(858) 657-0000 option #2

<i>Kearny Mesa Office:</i> 3939 Ruffin rd. San Diego, CA 92123		
<i>Dr. Najeeb Khan (Ortho/Surgical Rotation)</i> Kaiser Orthopedics San Diego, CA 92106	Clinical Rotation (R afternoon, W mornings) Surgical (M, T, W morning)	312.771.5656
<i>Dr. Nicole Cosby (PLNU)</i> PLNU Athletic Training Clinic	One or two days/wk for a min 3 hours of participation/wk	619.849.2901



**Assessment of Student Clinical Performance
by the Preceptor**

Objective: To obtain a candid assessment of the student's clinical progress to date

Administration: At the midterm and completion of each clinical course/rotation this assessment is to be completed by the Preceptor and shared with the student in a meeting at which time the student and preceptor are encouraged to dialogue about the student's clinical growth.

Instructions: The preceptor completes the assessment and schedules an appointment with the student to explain perceptions of the student's progress and potential. The feedback must be accurate and delivered in a positive tone. The student is offered an opportunity to respond in writing, signs and dates the form. The preceptor signs and dates the form, provides the original to the student for their portfolio, keeps a copy for the course record and provides a copy to the Program Director in a timely manner.

Student Name _____ **PRECEPTOR Name** _____
Clinical course by number _____ **Circle semester and write in year E SP 201** _

Directions: PRECEPTOR complete sections I-III by circling the value, which best quantifies your perceptions of the student's Personal Performance, Educational Competence and Clinical Proficiencies. In Section IV follow the directions for writing the narrative regarding the student's Overall Clinical Performance and Maturity

Circle the response which best quantifies your response to the provided statement.

For a rating of disagree or strongly disagree please write comment

Section I Personal performance-Attitude, drive, affect

1. The student is enthusiastic and appropriately focused during clinical session

Strongly agree	Agree	Disagree	Strongly Disagree
4	3	2	1

Comment:

2. The student is well groomed, punctual, and courteous to peers, clients and preceptor

Strongly agree	Agree	Disagree	Strongly Disagree
4	3	2	1

Comment:

Section II Educational competence-knowledge base

1. The student has a knowledge base appropriate to the level of their education to date

Strongly agree	Agree	Disagree	Strongly Disagree
4	3	2	1

Comment:

2. The student knows where their knowledge &/or skill requires further attention

Strongly agree Agree Disagree Strongly Disagree

4 3 2 1

Comment:

Section III Clinical proficiencies-use of psychomotor skills

1. The student has clinical skills commensurate with the level of their education to date

Strongly agree Agree Disagree Strongly Disagree

4 3 2 1

Comment:

2. The student has consistently progressed in skill development during this clinical class/rotation.

Strongly agree Agree Disagree Strongly Disagree

4 3 2 1

Comment:

3. The student is efficient, effective and safe in their clinical assessments and treatment of clinical client's.

Strongly agree Agree Disagree Strongly Disagree

4 3 2 1

Comment:

Section IV. Narrative

Directions: Write a succinct narrative, which addresses the overall clinical performance and clinical maturity of the student. The narrative should clarify the current level of clinical performance as indicated by the student's level of clinical judgment, style, technical expertise and grace.

Section V. Student and preceptor conference

Date of meeting_____

Student written response, not required

Student signature_____ **preceptor signature**_____

Copies: Original retained by student for their portfolio
 Copy to PRECEPTOR
 Copy to Program Director

CASE STUDY GUIDELINES

Three double-spaced, twelve point font computer generated pages. Please reference no less than 4 published refereed journal articles. This paper should be formatted in the AMA acceptable style. For further detail see: <http://www.nata.org/sites/default/files/JAT-Authors-Guide-2010.pdf>

YOUR CASE STUDIES SHOULD INCLUDE AND WILL BE GRADED ON THE FOLLOWING CONTENT:

Page formatting:

- ✓ 8 ½ by 11 inch paper
- ✓ Double spaced
- ✓ 1 inch margins
- ✓ Include line counts (i.e. line numbers) to facilitate the review process

Manuscripts should include the following:

- ✓ Title page (no more than 12 words or 85 characters)
- ✓ Abstract (no more than 150 words) and Three key words on a standalone page
- ✓ Body of the case study should include:
 - Personal data of the patient (age and sex, race, marital status, occupation)
 - Chief complaint of the patient
 - History of the chief complaint (this should include symptoms that made patient present to physician)
 - Results of physical examination (initial evaluation) – physician findings
 - Diagnosis
 - Treatment (surgery, referred to physical therapy etc)
 - Rehabilitation protocol (if none present maybe make a suggestion of what that might look like...i.e. what would you do with the patient...use your references to back you up)
 - Criteria for return to play (when, how and what do use to determine when the patient can return to practice, work, competition etc)
 - Deviation from the norm (what makes this case unique)

Grammatical Errors, Typos and misuse of terms

- ✓ Three errors are allowed within the document. Anything above this will result in a decrease of your grade by one letter. I.e. if you originally got an A on the paper but you had greater than 3 errors your grade will be reduced to a B.

Assignment Learning Outcomes

1. Students will be able observe and make treatment/rehabilitation based decisions using evidence based medicine based on a patient interaction during rotation. These observations and treatment decisions will be made in written form using a case study format.
2. Students will be able to submit at least one of their case studies to the Journal of Athletic Training for publication in the Case Report section of the journal