Doisy College of Health Sciences

Jump to ^ Ÿ Table of Contents

Program Goals

d Z ^] v š > } µ] • h v] À Œ •] š Ç š Z o Ÿ d Œ] v] v P W Œ } P Œ u Á] o o W

1. W Œ ‰ Œ Œ Ÿ . š Z o Ÿ š Œ] v Œ • Á Z } Á] ‰ ‰] Œ š U v ‰ Œ Ÿ] ‰ š] v] v š Œ ‰ Œ } (• •] } v o µ Ÿ } v
2. W Œ } u } š U • µ ‰ ‰ } Œ š U v ‰ Œ Ÿ] ‰ š] v] v š Œ ‰ Œ } (• •] } v o µ Ÿ } v
3. Z Œ µ] š v Œ š] v v } ‰ Ÿ u o v µ u Œ } (• š µ v š • Á Z } Œ ‰ o } (

Jump to ^ Ÿ } table of Contents
: µ u ‰ š } d } ‰

Organizational Chart

Jump to ^ Ÿ }able of Contents
: µ u ‰ š } d } ‰

Program Curriculum

d Z ‰ µ Œ ‰ } • } (š Z ' Œ W Œ š } P W Œ E µ ( ] v •] š v Z d Ÿ á n t D Œ i s] U] v e r s i t y to prepare
š Z o Ÿ š Œ] v Œ • Á Z } Œ P v Œ o ‰ Œ Ÿ Ÿ } v Œ ‰ Œ •] À] P - c á] t e r e d v c u r a s e d principle
d Z • š µ v š À o } ‰ • o] v] o Œ • } v] v P U ‰ • Ç Z } u } š } Œ U v } u u µ v] Ÿ } v
o Œ v] v P] o] Ÿ •] v š Z } P v] Ÿ À U ‰ • Ç Z } u } š } Œ U v + Ÿ À } u] v • X d
professional curriculum that builds on •a š Œ } v P Z µ u v] Ÿ • U i e n c e Z , a n d] h e u r a l s c i e n c e base.

Pre-Professional Entry

š ^] v š > } µ] • h v] À Œ •] š Ç U u } • š } (š Z • š µ v š •] v š Z o Ÿ š Œ] v] v P Œ
accelerated 3+2 ‰ Œ } P Œ u v } u ‰ o š š Z ‰ Œ } P Œ u] v . À Ç Œ •] v o µ] v P š
š Z] Œ Ç Œ U • š µ v š • v š Œ š Z ‰ Œ } (• •] } v o ‰ Z • } (š Z ‰ Œ } P Œ u X
Z o } Œ } (^] v] v Æ Œ] • g h] e E d w a r d P Œ M a r g a r e t D o u s
^] v • X ^ š µ v š • Á Z } } v Ÿ v µ v • µ • • (µ o o Ç o g r a ‰ a r e a w a r d e d t h e š Z o Ÿ d Œ
D • š Œ } (š Z o Ÿ d Œ] v] v P P Œ L Œ š Z] Œ . L Z Ç Œ X

Studentswdn 11 Tf 0.01E016F>2.7 <017D>-3.6 <018C6F>2.7 <0-0.001 Tc 0.003 Tw 3.804 0 Td [(w)-3 o o Ï } ‰ fl

Jump to ^ Ÿ } v d o } (} v š v š •
: µ u ‰ š } d } ‰

Plans of Study - Roadmaps

Standard Track

Year One

Fall	Credits

Jump to ^ Ÿ }dv o } (} v š v š •
: µ u ‰ š } d } ‰

Post-Baccalaureate Track

Year One

Summer		Credits
E d ð ì ì ì	Human Gross Anatomy	5
D d ñ ì í ì	W Œ] v] ‰ o • } (š Z o Ÿ d Œ] v] v P	2
	Credits	7
Fall		

Jump to ^ Ÿ }dv o } (} v š v š •
: µ u ‰ š } d } ‰

Jump to ^ Ÿ }dv o } (} v š v š •
: µ u ‰ š } d } ‰

W‹Œ‹ µ]•]š •W E d ðìì ìV D d ñìíì
K+ Œ W & oo • u •š Œ }voÇ

MAT 5250 Musculoskeletal Assessment and Management II (4)
dZ]• }µŒ• }À Œ• šZ ‰ šZ}l]v u Ÿ • }(• o š ‰ šZ}o}P] • Á]šZ]v šZ
•‰]v U v Œ o À vš Æ u]v Ÿ}v š Zv]‹µ • š} ••]•š]v]+ Œ vŸ o] Pv}•
u •µŒ •X dŒ šu vš ‰Œ} µŒ •]v oµ

Jump to ^ Ÿ}dv o }(}vš vš•
:µu‰ š} d}‰

hour Œ ‹µ]Œ •u vš•/w W Œ}P Œ W UP Œ y P~Œ ~.v o Æ u v}š š l v•U }Œ
reported as a course grade. Assignment of W U }Œ v} P Œ uµ•š ‰‰Œ}À Ç šZ
]Œ š}Œ v }µŒ• }}Œ]v š}Œ (}Œ šZ }µŒ•]v ‹µ •Ÿ}vX

a. When an W U }Œ v} P Œ]• ••]P v U šZ }µŒ• }}Œ]v š}Œ]• Œ
Z vP }(P Œ (}Œ u Á]šZ]v šZ oo}Á o Ÿu ‰ Œ]} • • š Ç
b. dZ •šµ vš]• Œ •‰}v•] o (}Œ u ŸvP šZ v •• ŒÇ }µŒ• Œ
Ÿu oo}Á ~ }v.Œu]vP Á]šZ šZ }µŒ• }}Œ]v š}Œ šZ š šZ
u šX dZ •šµ vš •Z}µo o•} }v.Œu šZ šo šZ the transcript. Z • v Z

6. Undergraduate students may repeat a course and the most recent grade of a course repeated will
}µvš]v šZ 'Œ W}]vš À Œ P ~'W • ÁZ]o šZ ‰Œ À]}µ• PŒ
Æ oµ (Œ}u šZ 'Œ W}]vš À Œ P ~'W •X

a. oo PŒ • (}Œ }µŒ• • Œ ‰ š Á]oo Œ u]v }v šZ }8] o šŒ
b. ^šµ vš• Œ]À]v Pare responsible for verifying Á]šZ šZ K8 }(^šµ vš &]v
^ Œ À] • ÁZ šZ Œ Œ ‰ Ÿv P }µŒ• Á]oo + š šZ]Œ o]P]]o

Waived Courses Policies

1. Waived courses
   a. Waived courses and their associated hours are not counted toward the degree.
   b. Waived hours are recorded on the degree À o but they do not show on the transcript.
2. Waived courses in the pre

Jump to ^ Ÿ}dv o }(}vš vš•
:µu‰š} d}‰

Jump to ^ Ÿ } v

‡ Ð ‹ • ‹ – ‹ ‘ • •

1. W Z • • }A(T ŠVZŒE } PWŒE u
    a. W ŒŒ‰ Œ } (• •] } v o W Z • W

Jump to ^ Ÿ }dv o } (} v š v š •
: µ u ‰ š } d } ‰

1. d Z (} o o } Á] v P e r m Œ E š Z W š }] v š ~ À W Œ K E P < µ] Œ for each semester of the pre-professional phase

≤ 30 Credit Hours	Academic Standing	>30 credit hours
t î X ó ì	Good Standing	t î X ó ì
î X ï ì 2.69	Academic Jeopardy	2.5 -- 2.69
< 2.3	u] W Œ } Ÿ } v	≤ î X ð õ

2. W } o] Ç Œ P Œ] v P v } v } W ‰ Œ o }] (v • •] } Á v] š o Z W Z Œ • ' W Z ‹ µ] Œ u v š •]
   a. A student that does not meet the pre-professional phase ' W Œ ‹ µ] Œ u v š •] v v Ç • u will be placed on ‰ Œ } P Œ u u] v ‰ Œ } Ç Ÿ } š o] P] o š } ‰ Œ } P Œ] v š Z š Z o Ÿ d Œ] v] v P W Œ } P Œ u X
   b.

Jump to ^ Ÿ } d v o } (} v š v š •
: µ u ‰ š } d } ‰

c. •šµ vš šZ š } • v}š u š šZ ‰Œ}(••]}v o 'W Œ ‹µ]Œ u vš
semesters in the professional phase is academically ineligible }vŸvµ]v šZ šZo Ÿ
dŒ]v]vP WŒ}PŒ u v Á]oo]•u]•• X
d. dZ]•u]•• •šµ vš u Ç ‰ Œu]© š} š l Œš]v }µŒ• •

Jump to ^ Ÿ}dv o }(}vš vš•
:µu‰ š} d}‰

Jump to ^ Ÿ } v

Jump to

Jump to

Jump to

Professional Behavior Policy

š Z o Ÿ d Œ] v] v P] • Z µ u v • Œ À] ‰ Œ } (• •] } v X K v } ( ] š • v š Œ o š v š] • Œ G š] v } v µ š š Z š u } v • š Œ š • • v •] Ÿ À] š Ç šbeingšZo‰ZsÇ•d o v % honesty in all endeavors d Z š Z o Ÿ d Œ] v] v P W Œ } P Œ u v } Œ • • š Z ‰ Z] o } • } ‰ Z Ç Mission Statement of Saint Louis University, the } Œ } (Œ Ÿ . Ÿ } v [• } } (W Œ } (, and] } v o Z • the Code of Ethics v ^ Z Œ W Œ } (• • of]the E š }ovµ o• š Z o Ÿ d Œ] v Œ • [• • }] Ÿ } v X d Æ ‰ š Ÿ } v • } (š Z • š µ v š [• ‰ Œ } (• •] } v o Z À] } Œ • Œ • } v š Z • } v W Œ } P Œ u ‰ } o]] • v ‰ Œ } µ Œ • X

No code of ethics or professional standards can address every possible scenario that may arise in the future.

, } Á À Œ U • š µ v š • Œ Æ ‰ t

,< 0 (Á U • • 9, š ` ð Œ%v •o38 >>BD3 <0E768C>13019A08C>1357>74<0110>1 < <0(p) (s)>(r).9 <0(o)-91<

,< 0 • €À • (µ `"À U

38 ,i P 0hÁ>>BD3 <0E76F>424À0>-9.6 <0 g <011

Jump to ^ Ÿ } dv o } (} v š v š •
: µ u ‰ š } d } ‰

Jump to ^ Ÿ }dv o } (} v š v š •
: µ u ‰ š } d } ‰

W Œ }: • •

1. Meet with the student to discuss said breach of professional behavior and possible strategies to improve behavior.
2. } µ u v š u Ÿ v P } v š Z W Œ } (• •] } v o Z À] } Œ À] • u v š & } Œ u X
3. ^ µ Œ •] P v š µ Œ • (Œ } u • š µ v š v (µ o š Ç } v š Z } u ‰ o š W Œ } (
   Form.

ð X o o } Á • š µ v š š } Œ • ‰ } v] v Á Œ] Ÿ v P š } o Œ] (Ç Z] • } Œ Z Œ ‰ Œ
© Z š } š Z } u ‰ o š W Œ } (• •] } v o Z À] } Œ À] • u v š & } Œ u X

5. W Œ } À] v o š Œ } v] } Œ Z Œ } ‰ Ç } (š Z } u ‰ o š W Œ } (• •] } v
   • š µ v š [• (µ o š Ç u v š } Œ X
6. W o Z Œ } ‰ Ç } (š Z } u ‰ o š W Œ } (• •] } v o Z À] } Œ À] • u
   ‰ Œ u v v š . o X
7. & µ o š Ç u v š } Œ] • Œ • ‰ } v •] o (} Œ u } v] š } Œ] v P š Z v µ u Œ } (W Œ
   Œ • µ o Ÿ v P] v W Œ } (• •] } v o Z À] } Œ E } Ÿ . Ÿ } v X D } Œ š Z v } v W Œ
   Œ • µ o š] v W Œ } (• •] } v o Z À] } Œ W Œ } Ÿ } v] v P] • • µ

W Œ } (• •] } v o Z À] } Œ W Œ } Ÿ } v W
. v] Ÿ } v (W • š µ v š Œ] À • u } Œ š Z v } v W Œ } (• •] } v o Z À] } Œ E } Ÿ .
} v W Œ } (• •] } v o Z À] } Œ W Œ } Ÿ } v X ;] v (š Z ‰ š Œ } (v š [ ] } v Z o À] } Œ u] v š } (š
• š µ v š [• (µ o š Ç u v š } Œ v š Z W Œ } P Œ u] Œ š } Œ U } (v š µ Œ Á Z]
‰ o } v W Œ } (• •] } v o Z À] } Œ W Œ } Ÿ } v X W Œ } (• •] } v o Z À] } Œ W
certain s‰] . Ÿ À] Ÿ • v l } Œ š Z] o] š Ç š } u } v • š Œ š ‰ ‰ Œ } ‰ Œ] š
• •] P v š] v Á Œ] © v } v š Œ š X

W Œ } • • W

1. ^ š µ v š Á] o o v } Ÿ . } (š Z] Œ ‰ Œ } Ÿ } v Œ Ç • š š µ • . Á] š Z o © Œ
2. ^ š µ v š Á] o o Œ ‹ µ] Œ š } Œ š µ Œ v •] P v } v . Œ u Ÿ } v } (š Z] • v
3. W Œ } P Œ u] Œ š } Œ U ‰ ‰ Œ } ‰ Œ] š (µ o š Ç u u Œ l u v š } Œ U v •
   to improve professional behaviors.

ð X

Jump to ^ Ÿ } v o } (} v š v š •
: µ u ‰ š } d } ‰

Department Dismissal Appeals

Jump to ^ Ÿ }dv o } (} v š v š •
: µ u ‰ š } d } ‰

(}Œ ‰Œ}PŒ u]•u]•• oU šZ WŒ}PŒ u]Œ š}Œ ••µu • šZ Œ}o }(
]Œ š}Œ] vŸ. • }vG] š }( ]vš Œ •šU šZ ‰ Œšu vš u]v]•šŒ š

2. ^šµ vš E}Ÿ. Ÿ}v
dZ DAC Chairperson v]}Œ šZ WŒ}PŒ}vš]Œ•]š}vŒŸ. •šµ vš•U]šZ Œ]v ‰
telephone, and then sends a follow-up e-mail. Ç Œ ‰oÇ]vP šZ u }(šZ •š šµ• }(šZ •šµ
(Œ}u šZ WŒ}PŒ uX • •šµ vš }(}]•Ç }oo P }(, oš^ to] v •U
šZ •šµ vš](šZ •šµ vš]• v µv ŒPŒ µ š •šµ všX]Ÿ}v ooÇU
šZ ‰‰ o ‰Œ} ••U v]• }‰] š} šZ (µošÇ u vš}ŒU}ŒWŒ]}(PŒ
‰‰o] o •U v šZ ,^ ••}] š v (}Œ ^šµ vš v u] +]Œ
lv}Áo P Œ]‰š }(šZ]• v}Ÿ. Ÿ}mail. Ç Œ ‰oÇ]vP š} šZ -

/(lv}Áv š šZ Ÿu }(uš]Zo v]vŸ}Ÿ oŸ}-vU šZ •šµ vš]• ‰Œ}À] Á]šZ š
u u Œ• ÁZ} Á]oo] šZ]Œ • X dZ •šµ vš u Ç Œ mber, •š •µ •Ÿšµ
including the DAC Chairperson. Depending on availability of the DAC u µ Œ•U šZ Œ ‹µ •š u Ç v}š
honored.

3. Student Dismissal Appeal
a. dZ ‰‰ o Œ ‹µ `à • X µs <011E0176>16.1 <.9 <015A21 <000304 (em)7.5 (b)5.3

Jump to ^ Ÿ}dv o }(}vš vš•
:µu‰ š} d}‰

ii. / (š Z] • u] • • o ‰ ‰ o Œ ‹ µ • š] • v] v š Z • š µ v š o
v ‰ Œ } µ Œ • Á Œ v } š (} o o } Á U š Z • š µ v š v . o v
v } (š Z }] • Ç } o o P } (, o š Z ^] v • • • Ÿ ‰ µ o š] v š
' Œ] À v W } o] Ç X

6. ^ š µ v š E } Ÿ . Ÿ } v } ( ] •] } v X

(DA467)Tj /C2_0 1 Tfa 0.002 Tc 0.017 Tw [(DA)7

Jump to ^ Ÿ } d v o } (} v š v š •
: µ u ‰ š } d } ‰

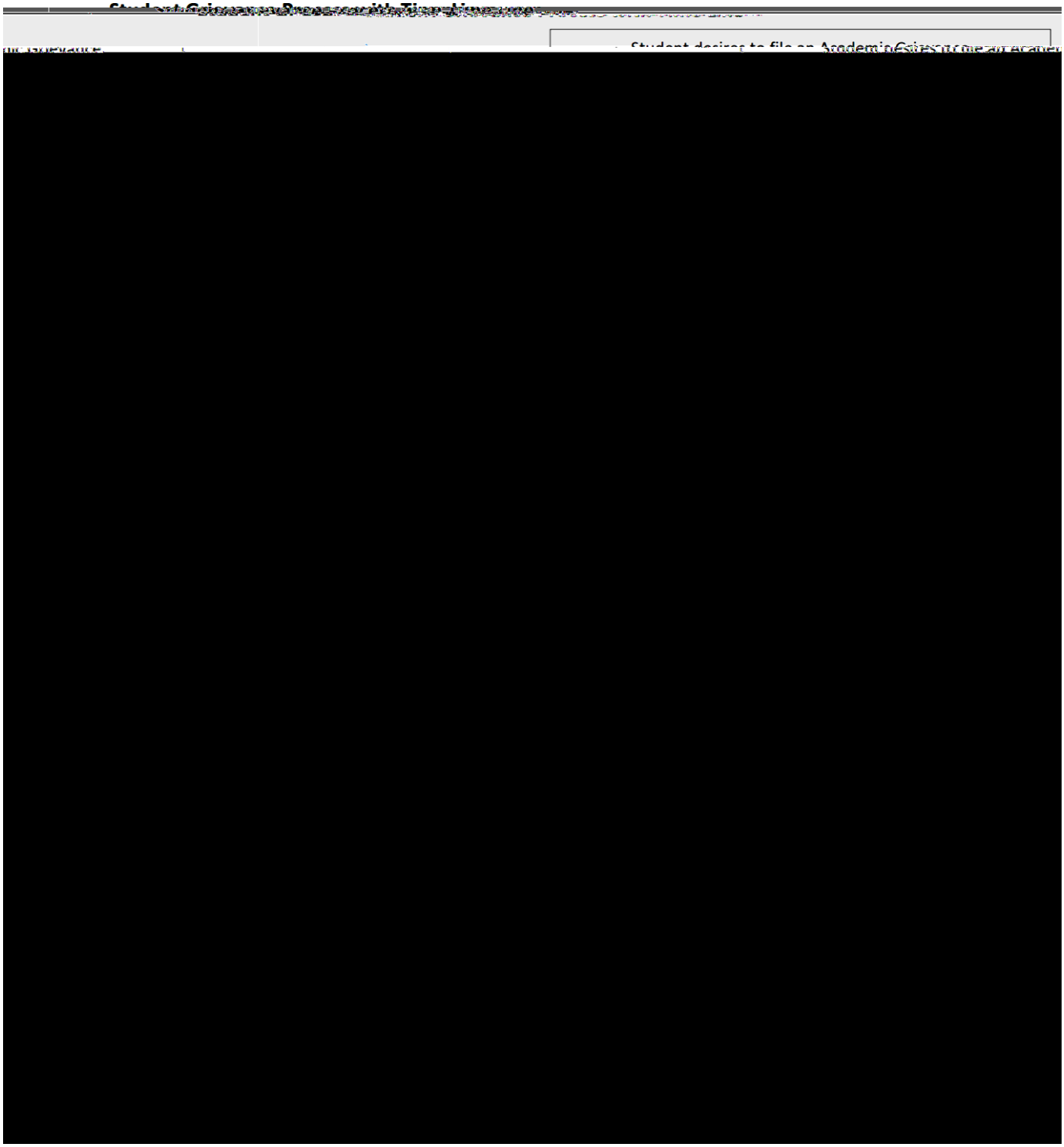
X Membership

& µ o š Ç

d Z '] • } u ‰ } • } ((µ o š Ç u u Œ • (Œ } u š Z , ^ X Z u] ‰

Œ ‰ Œ • v š Ÿ À š } • Œ À term of three years. However, in the event thecc5 (H)5.43T40358 (o)-3.61

Jump to ^ Ÿ } d v o } (} v š v š •
: µ u ‰ š } d } ‰



Jump to ^ Ÿ}dv o }(}vš vš•
:µu‰ š} d}‰

APPENDIX A

Required Components of a Student Grievance

^ š µ v š • Á Z } Á] • Z š } . o P Œ] À v Œ v } µ Œ P š } } v š š š Z

+] Œ • ~ ^ • (} Œ] v (} Œ u Ÿ } v Œ P Œ] v P š Z ‰ Œ } • • X d Ç ‰] o o Ç • š µ

DCHS Dean that includes the follo Á] v P] v (} Œ u Ÿ } v W

x ^ š µ v š v u U v v Œ / v µ u Œ X

x / v Ÿ . Ÿ } v } (š Z ‰ ‰ Œ } ‰ Œ] š , ^

Jump to ^ Ÿ } v o } (} v š v š •

: µ u ‰ š } d } ‰

: µ u ‰ š } d } ‰

, } v } Œ • ^ } .]...Ÿ... •.....í ì.....
Awards.....11.....
Scholarships

Jump to ^ Ÿ } v d o } (} v š v š •
: µ u ‰ š } d } ‰

Address and Phone Updates

Jump to ^ Ÿ } v d o } (} v š v š • : µ u ‰ š } d } ‰

877-525-5669 or online atZ © ‰ W l l Á Á Á X o •] R Z Š Z } µ X } u l • o µ

Jump to ^ Ÿ } v d o } (} v š v š •
: µ u ‰ š } d } ‰

Jump to ^ Ÿ } v d o } (} v š v š •
: µ u ‰ š } d } ‰

o }µŒ• • Á]šZ oo }vš vš À]]•š v o Œv]vPW
f

Jump to ^ Ÿ}v d o }(}vš vš•
:µu‰ š} d}‰

tZ]o šZ (µošÇ Œ }Pv]Ì • šZ]u‰}Œš v }(u‰o}Çu vš (}Œ šZ •šµ
‰Œ]u ŒÇ Œ •‰}v•]]o]šÇ]• š} Z]• }Œ Z Œ u] Œ ŒX dZ]• Œ •‰}v

Jump to ^ Ÿ}v d o }(}vš vš•
:µu‰ š} d}‰

Smoking and Eating

Smoking is prohibited at Saint Louis University. Absolutely no food, drinks or water are allowed in the Doisy College of Health Sciences student lab. No food is allowed in the auditorium, but water in a spill-proof container is permissible. Food and drinks in spill-proof containers are allowed in the other classrooms unless otherwise • ‰] . Ç š Z } µ Œ • } } Œ] v š } Œ } Œ] v • š Œ µ š } Œ X

Program Complaint Policy

d Z] • ‰ } o] Ç (} ˆ À • •] z Š ˆ À } p } p o] • Z } • q 0 Ð v o µ Ç } v , P € W ` ¢ P (} Œ

Jump to ^ Ÿ } v d o } (} v š v š •
: µ u ‰ š } d } ‰

Honors Societies

Alpha Sigma Nu: Jesuit Honor Society

1. o] P]] o] š Ç W ^ > h • š µ v š • ~ u] v] u µ u : µ v] } Œ • š v] v P • Á] š Z ï X ò ' W (Œ } u : • µ] š h v] À Œ •] š Ç • Œ] v À] š š } ‰ ‰ o Ç X
2. ^ o Ÿ } v W d W Œ } P Œ u Á Œ • } u u] © ‰ Œ } À] • v [• K 8 Á] š Z v • o š • v } u] v • (} Œ o ‰ Z ^] P u E µ Á Z] [(š üR] ÀPp ÁÀ A ^] ! • 4 }

Jump to ^ Ÿ } v d o } (} v š v š • : µ u ‰ š } d } ‰

i. P Œ µ š •š µ v š µ Œ Œ v š o Ç v Œ } o o] v š Z d W Œ } P

3. ^ o Ÿ } v } u u] © W / } š d µ o ‰ Z Æ µ Ÿ À } Œ
ð X Z } P v] Ÿ } v W / } š d µ o ‰ Z / v] Ÿ Ÿ } v Œ u } v Ç] v ^ ‰ Œ] v P ^ u • š Œ

Awards

}] • Ç } o o P } (, o š Z ^] v • ~ ,^ • o µ u v] • • }] Ÿ } v ' Œ µ Ÿ v P ^ š µ v š •

1. o] P]] o] š Ç W } v P Œ µ Ÿ v P • ¥] } Œ U } v P Œ µ Ÿ v P ‰ } • š

Jump to ^ Ÿ } v d o } (} v š v š •
: µ u ‰ š } d } ‰

3. Œ]š Œ] W µuµo ŸÀ 'W }(ïXòì }Œ PŒ š Œ }µš }(ðXììU Œ •µu U
professional references.
ðX Á Œ vv}µv u všW WŒ]}Œ š} (oo • u •š Œ }(• }v ‰Œ}(••]}v o
5.

Jump to ^ Ÿ}v d o }(}vš vš•
:µu‰ š} d}‰

Clinical Education Section

o] v] o µ Ÿ } v Z ‹ µ] Œ u v š • v W Œ } µ Œ •

: µ u ‰ š } d } ‰

Clinical Education Requirements and Procedures

‡ … Š • ‹ … ƒ Ž – ƒ • † ƒ ” † • ‡ ” – ‹ Ð ‹ … ƒ – ‹ ‘ • ‘ ” •

a. Œ Ÿ . • • š µ v š [•] o] š Ç š } u š š Z ‰ Z Ç •] o u v • } (š Z ‰ Œ } l

b. } u ‰ o š š ‰ Z Ç •] o Æ u ‰ ‰ }] v š u v š

Authorization to Release Information Form

^ š µ v š • u µ • š •] P v v µ š Z } Œ] ò Ÿ • } v] for m . Œ , µ Ÿ } v number, social security number,

] u u µ v] Ì Ÿ } v v W W Œ } Œ • U l P Œ } µ v Z l U v © v v Œ to } Œ • (} Œ

š Z] v • Ÿ š µ Ÿ } the y Á r e • Œ Z µ o (} Œ o] v] o µ Ÿ } v

Physical Examination and Health Record

/ v } Œ Œ š } u š š Z Œ ‹ µ] Œ u v š • (} Œ o] v] o •] š • U ‰ Œ } } (} (µ Œ Œ

‰ Œ] } Œ š } o] v] o Œ } š Æ } u] X Ÿ d Z ‰ ‰ Z l Ç •]] v o o µ • Z o š Z Z] • š } Œ Ç U ‰ Z Ç

Œ • µ o š • U v] u u µ v] Ì Ÿ } v Œ } Œ •] v o µ] v P - • š % ‰ Ÿ d Ÿ • • l] À š] • š X Ÿ } v š v] • š Z

Œ • ‰ } v •]] o] š Ç š } Œ Œ v P v ‰ ‰ }] v š u v š Á] š Z Z] • l Z Œ ‰ Z Ç •]] v v Œ

š } š Z } } Œ] v š } Œ } (o] v] o µ Ÿ } v X / v • µ • ‹ µ v š • u • š Œ • U š Z u

‰ v] v P } v š Z Œ ‹ µ] Œ u v š • } (• š µ v š [• o] v] o •] š X o o e s s š µ v š •

µ Œ] v P š Z ‰ Œ } (• •] } v o ‰ Z • } (š Z ‰ Œ } P Œ u X ^ š µ v š • Á] š Z ‰ } •] Ÿ À

} u ‰ o š v v v µ o • Ç • š u • Œ À] Á Á] š Z š Z ^ š µ v š , o š Z v µ Œ • š ^ > h X

announced, each student is responsible] Œ À] Á š Z •] š [• Œ ‹ µ] Œ u v š • v u š v Ç

} (š Z •] š X &] o µ Œ š } } u ‰ o š o o Œ ‹ µ] Œ u v š • } (š Z š Z o Ÿ d Œ] v

o Ç] v š Z • š Œ š } (š Z o] v] o Æ ‰ Œ] v X

Z ‹ µ] Œ u v š • W

1. W Œ • } v o , o š Z ,] • š } Œ Ç & } Œ u ~ • š µ v š •] P v š µ Œ •
2. W Z Ç •] o Æ u] v Ÿ } v & } Œ u ~ ‰ Z Ç •]] v •] P v š µ Œ •
3. 2 - • š ‰ d ~ Z o š Z ‰ Œ } (• •] } v o •] P v š µ Œ •

ð X Measles, Mumps, and Rubella Immunity Report

5. , ‰ Ÿ Ÿ • ~ š o • š š Z } u ‰ • o Ÿ Œ v š } Z š Œ (µ • o •
6. , o š Z / v • µ Œ v Z ‰ } Œ Ÿ v P & } Œ u ~ } ‰ Ç } ((Œ } v š v l v • š µ v š

Emergency Cardiac Care (ECC)

š Z o Ÿ d Œ] v] v P ^ š µ v š • u µ • š Z À u Œ] v Z Œ } • • ~ } Œ ‹ µ] À o v š •

W Œ } (• •] } v o Z • µ Œ ‰ Œ] } Œ š } š Z] Œ . Œ • š o] v] o ‰ Œ Ÿ µ u X ‹ µ] À o

} (} µ Œ • } µ š o] v Ç] v š Z W Œ Ÿ } P d Œ E u] W Z Œ š } Œ Œ Ÿ . Ÿ } v u µ • š µ Œ Œ v š š Z Œ

• š µ v š [• v Œ } o o] 0 ð Ç … à 0

W • •] . µ š 0 0 À W *] Œ ð # P à . U @ N À Ÿ } 5 ° 0 @ g Ð µ Ÿ } u • š µ ‹ ð f ð 0 . P À Œ Ÿ P µ 0

Jump to ^ Ÿ } v d o } (} v š v š •

: µ u ‰ š } d } ‰

2. W Œ } À] } ‰] • } (š Z (Œ } v š v l } (Œ • prior to August 1 of each v š [• •] l

Jump to ^ Ÿ } v d o } (} v š v š •
: µ u ‰ š } d } ‰

Drug Screening

Œ µ P • Œ v] v P u Ç Œ ‹ µ] Œ ‰ Œ] } Œ š } š Z • š Œ š } (o] v] o Æ ‰ Œ ‹ µ] Œ u v š • } (o] v] o •] š • X ^ š µ v š • • •] P v š } o] v] o •] š Á Z] Z drug screen prior to the start of acc] v] o Æ ‰ Œ] v u µ • š } u ‰ o š š Z] • š • š š Z Œ } µ P Z K 8 } (^ š µ v š , o š Z X ^ š µ v š • Œ Œ • ‰ } v •] o (} Œ š Z } • š } (š Z Œ

W Œ } µ Œ • W

1. Schedule appointment online through • š o Œ v Z ^ > h Á •] š

HIPAA (Health Insurance Portability & Accountability Act) Quiz

š Z o Ÿ d Œ] v] v P ^ š µ v š • u µ • š Z À , / W š Œ] v] v P ‰ Œ training is š } š Z] Œ . Œ ‹ µ] Œ Z Ç Œ v] • À] o o • v } v o] v u } µ o v ‹ µ] Ì š Z Œ } µ P Z ^ µ Ÿ } v Á] o o ‰ Œ } À]] v • š Œ µ Ÿ } v • š } š Z • š µ v š • (} Œ Z } Á š } •• š Z , / W š Œ] v] v P ‰ Œ] } Œ š } š Z . Œ • š o] v] o Æ ‰ Œ] v v š Z Œ Ÿ . š š u µ • š µ ‰ o }] v š } š Z • š µ v š • Œ } Œ ‰ l P] v Ž s o µ ‰ Œ] } Œ š } š

W Œ } µ Œ • W

1. Complete online training module for r/ WA
2. Upload the c Œ Ÿ . š } (} u ‰ o Ÿ } v] v š } Ž s o µ Á] š Z v u v š] v o µ

‹ ƒ „ ‹ Ž ‹ – › • • — ” ƒ • … ‡ ‡ ” ‹ Đ ‹ … ƒ – ‹ ‘ •

1. Liability Insurance is provided through a University-wide policy.
2. Risk D v P u v š Á] o o ‰ Œ } À] Œ Ÿ . š } ( ] v • µ Œ v (} Œ š Z ‰ Œ } P Œ

Medical Health Insurance

Students must have current medical health insurance during their enrollment at Saint Louis University. Students u µ • š ‰ Œ } À] µ Œ Œ v š } ‰ Ç } (š Z] Œ u] o Z o š Z] v • µ Œ v Œ (} Œ File.

W Œ } µ Œ • W

1. h ‰ o } } ‰ Ç } (u] o] v • µ Œ v Œ ~ (Œ } v š v l •] v š } Ž s o µ

Liability Insurance

^ š µ v š • Œ } À Œ Ç ^] v š > } µ] • h v] À Œ •] š Ç u o ‰ Œ Ÿ] v • µ Œ v (} Œ] À > © Œ } (/ v u v] š Ç v v µ o o Ç µ Œ] v P š Z W Œ } (••] } v o W Z • } (u o ‰ Œ Ÿ] v • µ Œ v X ^ š µ v š • u µ • š Œ š µ Œ v v o š Œ } v] Œ] ‰ š } (

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: µ u ‰ š } d } ‰

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Jump to ^ Ÿ } v d o } (} v š v š •

Clinical Education Evaluation

Clinical Education Evaluation Plan

1. d Z W Œ ‰ š } Œ Á] o o À o µ Ÿ } v š } } o • Á Œ •] P v š } ‰ Œ } À] µ v] (} Œ u v } v •] • š v
   performance for all levels of their o] v] o µ Ÿ } v Æ ‰ Œ] v X
2. d Z À o µ Ÿ } v • ‰ Œ š] v] v P š } o] v] o Æ ‰ Œ } v o µ Œ š } } u ‰ o š
   v v ~ • µ u u Ÿ À • } (Z o] v] o µ Ÿ } v Æ ‰ Œ] v X

Clinical Education Site Visits

1. d Z C Á] o o } v µ š š o • š š Á } À] •] š • ‰ Œ (µ o o • u • š Œ o] v] o µ
   a. d Z . Œ • š À] •] š • Z } µ o • Z µ o Á] š Z š Z W Œ ‰ š } Œ ‰ Œ] } Œ
      µ Ÿ } v Æ ‰ Œ] v X
   b. d Z C Œ v ‰ ‰ }] v š Œ ‰ Œ • Á] š o Ÿ À l } (• µ š Z C Œ š • X Œ ‰ Œ
      the CCE u Ç } v } (š Z u] š Z o Ÿ š Œ] v] v P (µ o š Ç u u Œ •
   c. d Z • } v À] •] š Á] o o v } š (} Œ u o o Ç • Z µ o Á] š Z] š Z Œ š Z
2. d Z CCE l } Œ Œ ‰ Œ • v š Ÿ À] • Œ • ‰ } v •] o (} Œ š Z (} o o } Á] v P W
   a. D Ÿ v P Á] š Z š Z • š µ v š š š Z] Œ • •] P v o] v] o •] š š }] • µ •
      i. d Ç ‰ • } (o Œ v] v P Æ ‰ Œ] v • ~] P v } •] • • v U š Œ š u v š
         ‰ Œ Ÿ U À o µ Ÿ } v š Z v] ‹ µ • } • Œ À v ‰ Œ Ÿ U v
         Æ ‰ Œ] v • U ‰ } ‰ µ o Ÿ } v • š Œ š • X
      ii. d Ç ‰ v (Œ ‹ µ v Ç } ( ] v š W Œ Ÿ . ‰ v š Á Œ š Z š Z
   b. D Ÿ v P Á] š W Z Œ š Z ‰ š } Œ • µ • • W
      i. d Z • š µ v š } u u v š • } µ š š Z o] v] o µ Ÿ } v Æ ‰ Œ] v
         Ÿ À] Ÿ • v P Œ l š Ç ‰ } (• µ ‰ Œ À] •] } v • X
      ii. d Z • š Œ v P š Z • } (š Z • š µ v š [• ‰ Œ (} Œ u v X
      iii. d Z Á l v • • • } (š Z • š µ v š [• ‰ Œ (} Œ u v X
      iv. / (‰ Œ } o u ~ • • Œ] • Z Ÿ µ o š Z • Œ Œ ‰ } • •] o • } o µ Ÿ } v ~ • • š } š
         with the W Œ and the student.
      v. } µ u v Ÿ v P š Z } v š the s u W g m o] v] o µ Ÿ } v Z ‰ } Œ š & } Œ u
   3. d Z W Œ] • ‰ Œ š } Œ ‰ } v •] o (} Œ W
      a. Approval of š Z d ^ o] v] o Æ ‰ Œ] v, incl Z d i n g Œ e d a t e U Ÿ s u o µ v v š µ Œ } (
         the Æ ‰ Œ] v .
      b. } u ‰ o Ÿ } v } (- š Œ Z } š u Ÿ] À v o µ Ÿ } v (} Œ d ^ ‰ (š Œ Z (} Œ u v W Z / K Z š } š Z
         the CCE } Œ Œ ‰ Œ • v š Ÿ À . µ •] v P Ž s o µ
      c. D Ÿ with the CCE } Œ Œ ‰ Œ • v š Ÿ À š }] • µ • • W
         i. d Z • š Œ v P š Z • v Á l v performance š Z d ^
         ii. d Z š Z } Œ š u P Z + Ÿ À v • • } (š Z u] d ^ ‰ Œ ‰ Œ Ÿ } v (} Œ š Z
            µ Ÿ } v Æ ‰ Œ] v X

ð X d Z d] • Œ • ‰ } v •] o (} Œ W

   a. Informal assessment of š Z] Œ o] v] o o Œ v] v P Æ ‰ Œ } Œ] Œ v ‰ Œ W Z / K Z Ÿ À š
      arrival.
   b. D Ÿ v P Á] š W Z Œ š Z] • µ • • W

Jump to ^ Ÿ } v d o } (} v š v š •
: µ u ‰ š } d } ‰

3. h v • Ÿ • (š } Œ Ç • š µ v š u] ‰ Œ (} Œ u v W
   a. If the academic progress being made by the] d ^ µ v • Ÿ • (š } Œ Ç l b e s w Z h drawn from š Z] Œ o] v] o Œ ‰ š Œ Ÿ } Ÿ µ u
   b. d Z C W E contact the W Œ ‰ š Á Œ o o] • µ • • š Z Œ Ÿ } v o (} Œ š Z v • • Á] š Z Œ Á o (Œ } u š Z 8 o] š •] š X

Jump to ^ Ÿ } v d o } (} v š v š •
: µ u ‰ š } d } ‰

Appendices

^] v š > } µ] • h v] À Œ •] š Ç ./.v.(.}.Œ.u...Ÿ.}.v...'.µ.]....1

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• }] o l µ o š µ Œ o Ÿ À] Ÿ • (} Œ] v š Œ v Ÿ } v o • š µ v š • v • Z } o Œ • X

/ v • š Œ µ Ÿ } v o D] v š Œ
Xavier Annex Z u X í ì ï 314-977-2919
^ µ ‰ ‰ } Œ š • š Z v } o } P Ç µ • š Z Œ } µ P Z “ D] - Œ µ o Ÿ } v U W Œ } µ Ÿ } v v

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: µ u ‰ š } d } ‰

D Œ Z « d } Á Œ • -97•75323 ï í ð

Counseling Center W ‰ Œ } À] • • •] • š v Á] š Z W u v P] v P • š Œ • • l v Æ] š Ç U Œ o making important personal life decisions, alcohol use concerns, etc. Students should call to arrange a } v . v Ÿ o ‰ ‰ }] v š u v š Á] š Z } µ v • o } Œ X

Student Health W } + Œ • • Œ À] • } (‰ Z Ç •]] v U v µ Œ • U ‰ Z Ç •] o š Z Œ ‰] • š Includes lab š • š • U] u u µ v] Ì Ÿ } v • U o o Œ P Ç] v i Ÿ } v • U ‰ Z Ç •] o š Z Œ ‰ Ç U ‰ Á o o v • • ‰ Œ } P Œ u • U š X ‰ ‰ }] v š u v š • Œ v } µ Œ P X Ž Ž Ž ^ š š > Œ } Œ u µ • š } v . o š š Z ter.š µ v š , o š Z v

Center for Service and Community Engagement µ • Z ^ š µ v š v š Œ ~ 314-977-2805 ï í õ

Center for Leadership & Community Service

ð

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>] Œ Œ] • }(šZ hv]À Œ•]šÇU ÁZ] Z]v oµ W]µ• >] Œ ŒÇU Ku Œ W}}• >
s Ÿ v &]ou >] Œ ŒÇX ^ ŒÀ] •]v oµ W o ••Œ}}u dir]ectSeaarchCServ‰ce • vš Ÿ
~(u Ç ••• ZKDU CŠ • •U Z • Œ Z ••]•š v W Œ}P Œ u v o] Œ ŒÇ
labs also on-site.

University Registrar
Z © ‰ • W l l Á Á Á X • o µ X µ l Œ µ P X ‰ Z ‰ Œ l }vš š
DuBourg Hall Z u 22 314-977-2269

Jump to ^ Ÿ}v d o }(}vš vš•
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Links to Publicly Available Information

Standards / v (} Œ u Ÿ } v	> } Ÿ } v	Link
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î ï	Grievance policy - University Level	W Œ } À } • š t •	Z © ‰ • W l l Á Á Á X • o µ X µ l - ‰ Œ } À } complaints.php
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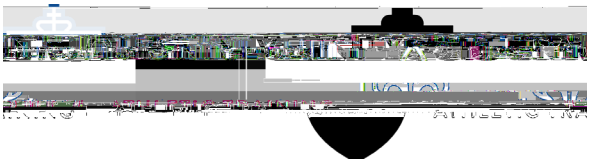


Doisy College of Health Sciences
Athletic Training Program

‹ e j î ô 2 e Ù b : e ± è Í e : 2 Ù : Ù „ : + è ô \

I have been informed about the policies outlined in the Athletic Training Program Handbook.

I acknowledge it is my responsibility to be familiar with and follow the policies presented in the Athletic Training Program Handbook.

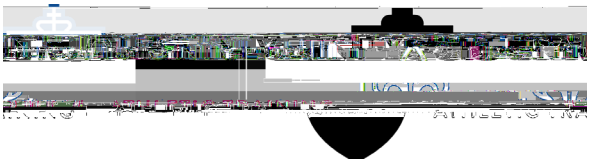
I acknowledge policies may change during my time in the Athletic Training Program and that it is the responsibility of the Program faculty to inform me of those changes.

Date _____

Print Name _____

Signature_____

Updated 5/25/2024



Doisy College of Health Sciences
Athletic Training Program

‹ e j î ô 2 e Ù : 2 ± î ô 2 e Í + e … Ù X ô ô 1 ô 2 e

I have been asked by the Athletic Training Program at Saint Louis University to abide by the Program Handbook and the Professional Standards as they relate to maintaining the
è : 2 ± î ô 2 e Í + e … Ù : Ù Í + + Ù 2 : X 1 Í e : 2 ß Ù I Ù j 2 î ô X \ e Í 2 î Ù e ô Ù e + ô e è
Í 2 2 j Í + Ù F ô Í + e Ù I 2 \ j X Í 2 è ô Ù „ : X e Í æ + e … Ù Í 2 î Ù è è : j 2 e Í æ + e … Ù è e

I Ù Í X ô ô Ù e : Ù 1 Í 2 e Í 2 Ù è : 2 ± î ô 2 e Í + e … Ù : Ù Í + + Ù 2 : X 1 Í e : 2 à Ù î Í e Í à
or verbal form that is considered by the Athletic Training Program to be private and
è : 2 ± î ô 2 e Í + ß Ù I 2 : X 1 Í e : 2 Ù e Í e Ù \ Ù è : 2 \ î ô X ô î Ù è : 2 ± î ô 2 e Í + Ù 2 è + j
e ô \ e ï W j • Ù \ è : X ô \ à Ù + Í æ : X Í e : X … Ù U X Í è e è Í + Ù X ô \ j + e \ à Ù ô Í + e Ù 2 :
è ô è ' Ù X ô \ j + e \ à Ù Í 2 î Ù e X Í 2 \ è X U e \ ß Ù I ô á Ù X î ô \ ô \ ô 2 : e Ù e e ô : à Ù X : ô X } ô Í e à ô Ù X • \ è
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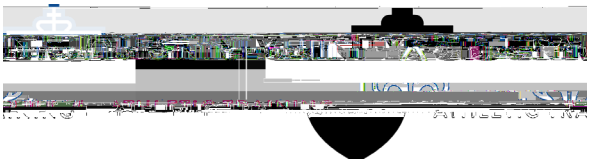
Print Name _____

Signature _____

Updated 5/25/2024



Doisy College of Health Sciences
Athletic Training Program

Hepatitis B Vaccination Form

Student Name (please print) _____

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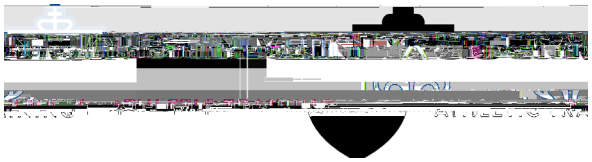
Updated 5/25/2024

Updated: 5/28/24



Doisy College of Health Sciences
Athletic Training Program

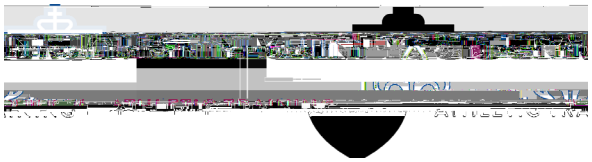
Student Health Record

INSTRUCTIONS: PLEASE PRINT--USE PEN OR TYPE. PLEASE READ CAREFULLY!

A Student Health Record is required for all students enrolled in the Athletic Training Program. This will become part of your confidential health record while enrolled in Saint Louis University Doisy College of Health Sciences and will be kept in your clinical education folder.

This information is desired in the event you should experience any health problems while you are a student and to fulfill the health and safety requirements of our clinical education sites. It has no bearing on your academic work. Therefore, do not hesitate to record all previous or present illnesses or symptoms.

- Please complete the Personal Health History form yourself .
- Have a physician complete the Physical Examination form. Note: Be sure both sides are completed and the signature is given.
- Have your physician fill out and sign forms for TB, MMR, and Hepatitis B or attach proof of immunization or lab evidence of immunity
- The Technical Standards Certification Statement also requires a physician signature.
- If you have not started and are planning to start, or have started the Hep B vaccination series, you only need to fill out the Hep B Vaccination form for the vaccinations you have already received. Please turn in documentation as you receive further vaccinations.
- Fill out the Refusal Of Hepatitis B Vaccine form if you choose not to get vaccinated for Hepatitis B. This may eliminate the possibility of your being assigned to clinical education sites that require this vaccination.
- Complete the Health Insurance Report form, including a copy of the front and back of your insurance card.
- Make copies of all of these forms and place the originals in your Clinical Education Handbook. You will need your originals to make copies for your clinical sites. (The



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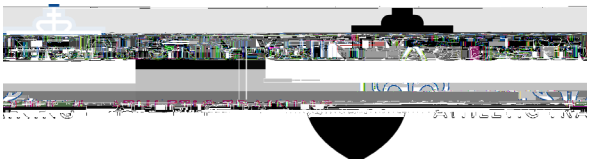


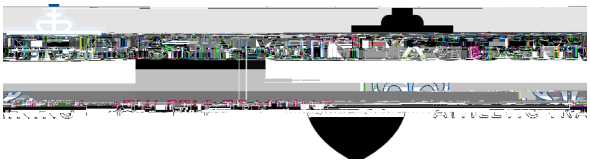
Doisy College of Health Sciences
Athletic Training Program

Personal Health History

Name: _____
(Last (First) (Middle) Date

Í 2 2 ô X Ù I î ô 2 e ± è Í e _: 2 Ù b j 1 æ ô X á Ù_____Age: _____

„ + Í è ô Ù : Ù X e á Ù ö ö ö



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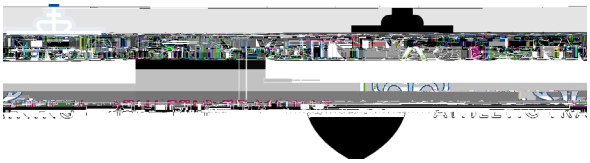
Disease

Updated 5/25/2024



Doisy College of Health Sciences
Athletic Training Program

Physical Examination Form
To be completed by Health Care Provider

Students name_____ Date _____

Sex	Height	Weight	Pulse	O2 Sat	BP

F Í \ Ù \ e j î ô 2 e Ù æ ô ô 2 Ù … : j X Ù U Í e ô 2 e Ù ö ö ö ö ö Ù s P Ù ´ ô Í X Ù ö ö ö ö ö Ù t P Ù ´ ô

History: Does the student present with any serious illnesses, injuries, psychological concerns? If so please describe: _____
_____
_____
_____
_____

Does the student present with abnormalities of any of the following systems:

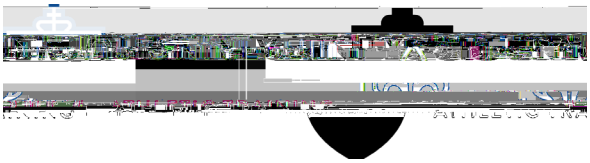
SHEENT	No / Yes	Genitourinary	No / Yes
Respiratory	No / Yes	Musculoskeletal	No / Yes
Í X î : } Í \ è j + Í X	No / Yes	Metabolic / Endocrine	No / Yes
Gastrointestinal	No / Yes	Neurological	No / Yes

If so please describe: _____
_____
_____
_____
_____

To your knowledge is this student currently under treatment for any medical or psychological condition? If so please describe: _____
_____
_____

_____
F ô Í + e è Í X ô Ù U X : } î ô X \ Ù b Í 1 ô

_____ _____
F ô Í + e è Í X ô Ù U X : } î ô X \ Ù ‹ 2 Í e j X ô Date



Doisy College of Health Sciences
Athletic Training Program

2 Step TB Skin Test Immunity Report

Updated 5/25/2024

Saint Louis University
Athletic Training Program

TECHNICAL STANDARDS POLICY FOR ATHLETIC TRAINING STUDENTS

Athletic Training Students must be able to perform certain mental, physical, and other tasks that are essential in providing care for their patients. These requirements are outlined in the Program's Technical Standards for Athletic Training Students.

After being admitted to the program, Athletic Training students must submit a signed certification statement stating that they believe that they can meet these

Updated 5/25/2024

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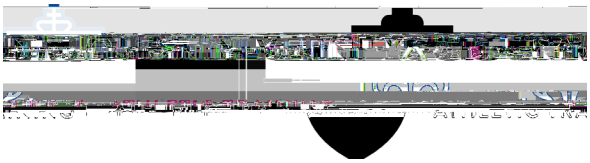

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Updated 5/25/2024

The Doisy College of Health Sciences
Policy and Procedure following a Confirmed A ffirmative Criminal Background Check

Final fFin2C /TT0 5.7icfFinal

4. A student refused by a proposed clinical affiliate should be aware that he/she will not be allowed to complete the assigned practicum at that site. This may result in a delay or failure to complete remaining clinical experiences and ultimately the program of study.

5. If a student is accepted by the initial affiliate site regardless of the affirmative CBC, the student may participate at the facility. Each subsequent affiliating institution that requires students to provide a CBC, however, will also have the right of refusal. In case of subsequent refusals, item number 4 above will apply.

6. The fact that an affiliate refuses a student placement due to an affirmative CBC

Doisy College of Hea lth Sciences
Drug Screening Policy

Final Policy
May 2005

The Doisy College of Health Sciences is committed to maintaining a safe, healthful, and efficient learning environment, which enhances the welfare of our employees, students, pa

The current procedure for Doisy College of Health Sciences students needing to obtain a drug screen is as follows:

1. Students will fill out an authorization form at the school or department level for the release of student information. This will include the release of their name and department/school to student health for drug screening and the release of screen results if required by clinical affiliates.

2. Students may have drug screens performed by a local employer or through the athletic department. Any such screens must meet the screening criteria (i.e. screen for the drugs required by Saint Louis University's Student Health). In addition the employer or the athletic department must be willing to forward test results directly to Student Health for their records.

3. In all other cases, students must go to the Student Health Department at Marchetti Towers (East) with their SLU picture identification badge. Initial screening tests will be performed on site.

4. Students fill out required student health paper work and provide a urine sample on site for testing. If confirmatory testing is not required (i.e. the sample is clearly negative in the screening procedure), a negative report will be sent to a confidential fax located in the Dean's area for the departments or in the School of Nursing for all nursing students. Subsequently the report will be sent to the

7. Upon receiving the results of the counseling evaluation and treatment plan, the department chair or school director will decide if a student may continue in the program. Students judged eligible to continue in the program will be required to submit to another drug test. This test must be negative or the student is subject to immediate dismissal from the program. Any student that has tested positive for illegal drugs may be subject to a random drug screen at any time during the remainder of their academic career at Saint Louis University's College of Health Sciences.

8. Any student dismissed as a result of this policy has a right to appeal. The appeal will follow the guidelines and procedures outlined by their respective department or school.

9. For additional information on the drug screening policy and how it is applied to your program of study please contact the faculty member in your department or school that coordinates field experiences.

_____
Student Signature

_____
Student Name – Printed

_____
Date

Saint Louis University
Athletic Training Program

Missouri Athletic Training Advisory Board Presentation

Statement of Understanding

Name: _____ ___ Student ___ Faculty

I have viewed the presentation made by the Missouri Athletic Training Advisory Board and I understand the athletic training licensure laws in the State of Missouri. I also understand that I need to contact the Board if I need clarification in any aspect of the law.

I agree that I must notify the Saint Louis University Clinical Education Coordinator or Program Director if I am put in a situation that may result in a violation of state law.

Signed _____ Date_____

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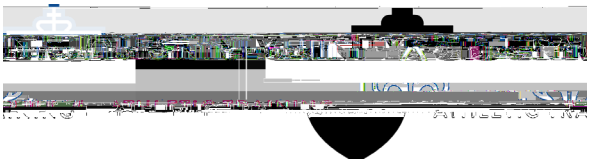
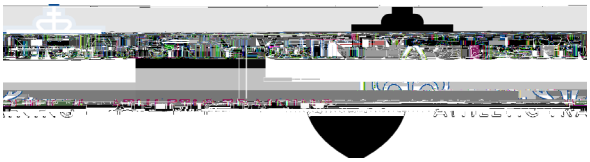


Doisy College of Health Sciences
Athletic Training Program

Statement of Understanding

I am acknowledging that I have viewed the presentation created by the Missouri Athletic Training Advisory Board. After viewing the presentation, I understand the athletic training laws in the state of Missouri. Additionally, I understand that I need to contact the Board of Healing Arts for the State of Missouri if I have any questions pertaining to legal practice of athletic training in the state of Missouri.

Updated 5/25/2024



Doisy College of Health Sciences
Athletic Training Program

Consent for Photo / Promotional Release

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Doisy College of Health Sciences
Athletic Training Program
Professional Behavior Advisement Form

Student Name: _____ Reporter Name: _____

Class Year: Freshman Sophomore Junior PYI PY II

Location of the Incident: _____ Date of Incident: _____

Reporter Role: Mentor Faculty Member Student Preceptor

Please check the corresponding boxes below in the corresponding areas that you feel the SLU Athletic Training Student Did Not meet the Minimal expectations:

Section I: In alignment with the Board of Certification's Code of Professional Responsibility , SLU Athletic Training students are expected to:

Patient Care Responsibilities

Render quality patient care regardless of patients' characteristic protected by law.
Protect the patient from undue harm.
Acts in the patient's best interest.
Advocate for the patient's welfare.
Demonstrate sound clinical judgement based on current evidence-based knowledge. ( )Tj 0.klnEMCatPnts/M
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Professional Respo

Practice their knowledge and skills under the supervision of a preceptor.
Represent themselves as an Athletic Training Student in clinical practice settings.
Conduct themselves personally and professionally in a manner, that reflects the shared values as they represent themselves and the Saint Louis University Athletic Training Program.
Refrain from providing or publishing false or misleading information, photography, or any other communications in any format, including social media platforms, related to athletic training that negatively reflects the profession, their preceptor, Saint Louis University (SLU), or the SLU AT Program.

Descriptive narrative by the reporter of omitted or committed professional behavior(s):

Recommended strategies for improvement / correction of the reporte d professional behavior(s):

Student Response:

Level of Sanction:

- No Sanction
- Professional Behavior Warning #1 __ #2 __
- Professional Behavior Probation
- Dismissal

(The determination of the level of sanction will be determined by the appropriate signee's below)

CODE OF ETHICS

Including Shared Professional Values

Revised May 2022

1 D W L R Q D O $ W K O H W L F 7 U D L Q H U V ¶ $ V V R F L D W
1620 Valwood Parkway, Suite 115
Carrollton, TX 75006
214-637-6282

Preamble

7KH 1DWLRQDO $WKOHWLF 7UDLQHUV¶ $VVRFLDWLRQ &RGH RI (W
should be followed in the practice of athletic training. It is intended to establish and maintain high
standards and professionalism for the athletic training profession. The principles do not cover every

2.5. Members must not file, or encourage others to file, a frivolous ethics complaint with any organization or entity governing the athletic training profession such that the complaint is unfounded or willfully ignore facts that would disprove the allegation(s) in the complaint.
2.6. Members shall refrain from substance and alcohol abuse. For any member involved in an ethics proceeding with NATA and who, as part of that proceeding is seeking rehabilitation for substance or alcohol dependency, documentation of the completion of rehabilitation must be provided to the NATA Committee on Professional Ethics as a requisite to complete a NATA membership reinstatement or suspension process.

PRINCIPLE 3.

PJ ET Q q 0.000009 12 0 612 792 re W* n BT /F4 12 Tf 1 0 0 1 138.24 Tm 91342 0.502 G [(P)-8(HE26(AG E)] TJ 7(0H2 ET Q q 0.0000

SAINT LOUIS UNIVERSITY
HEALTH PROFESSIONAL LETTER OF INDEMNITY

July 1, 2016 – June 30, 2017

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c. Protection is afforded to each protected individual for professional services rendered as emergency aid in a "Good Samaritan" capacity.

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2. EXCLUSIONS

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3. **P** **S IN THE EVENT OF OCCURRENCE,**
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4. **ASSIGNMENT OF**

5. **DEFENS** **CLAIMS AND SUITS**

a.