

**University of Wisconsin-Milwaukee  
Department of Kinesiology  
Integrative Health Care and Performance  
Master of Science-Athletic Training Program**

***Physical Examination and Immunization Verification Form***

Student Name \_\_\_\_\_

The Master of Science in Athletic Training Program at the University of Wisconsin-Milwaukee is a rigorous and intense program that places specific requirements and demands on the students enrolled in the program. An objective of this program is to prepare graduates to enter a variety of employment settings and to render care to a wide spectrum of individuals engaged in physical activity. The following technical standards establish the essential qualities considered necessary for students admitted to this program to achieve the knowledge, skills, and competencies of an entry-level athletic trainer, as well as to meet the expectations of the program's accrediting agency—the Commission on Accreditation of Athletic Training Education (CAATE). Prior to admission, all students must meet the following technical standards. In the event that a student is unable to fulfill these technical standards, with or without reasonable accommodation, the student will not be admitted into the program and/or may be dismissed from the program. Compliance with the program's technical standards does not guarantee a student's eligibility for the BOC certification exam.

Athletic training students must demonstrate:

1. The mental capacity to assimilate, analyze, synthesize, and integrate concepts, to problem solve in the formulation of a basic assessment, and to make therapeutic judgments regarding physical deviations from the norm.
2. Sufficient postural and neuromuscular control, sensory function, and coordination to perform appropriate physical examinations using accepted techniques and to accurately, safely and efficiently use equipment and materials during the assessment and treatment of patients.
3. The ability to communicate (oral and written) effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds; this includes, but is not limited to, the ability to establish rapport with patients and communicate judgments and treatment information effectively. Students must be able to understand and speak the English language at a level consistent with competent professional practice.
4. The ability to record the physical examination results and a treatment plan clearly and accurately.
5. The capacity to maintain composure and continue to function well during periods of high stress.
6. The perseverance, diligence and commitment to complete the athletic training education program as outlined and sequenced.
7. Flexibility and the ability to adjust to changing situations and uncertainty in clinical situations.
8. Affective skills and appropriate demeanor and rapport that relate to professional education and quality patient care.

The Master of Science in Athletic Training program works with the Accessibility Resource Center to assist students if the student believes he/she will require accommodation to meet the technical standards. The Accessibility Resource Center will verify the student's disability and, in consultation with the department, identify the accommodation(s) that the department should provide to such student so that the student can meet the technical standards. This determination may include a review of whether the accommodations requested are reasonable, a review of whether the proposed accommodation would pose a direct threat to clinician/patient safety, and take into account the educational process of the student or the institution, including all coursework, clinical experiences and internships deemed essential to graduation.

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**Immunizations**

	YES	NO	Date of Administration
NOTE: If documentation (i.e. copy of childhood immunization records or a signed note from physician and/or nurse) verifying immunizations is not provided, then titers must be obtained for measles, mumps, rubella, and varicella (enclose a copy of the laboratory results)			
Diphtheria-Tetanus (within last 10 yrs)			
Measles/Mumps/Rubella			Dose 1: _____ Dose 2: _____
Hepatitis B			Dose 1: _____ Dose 2: _____ Dose 3: _____ Signed Refusal: _____
History of chicken pox OR varicella vaccine			
TB Skin Test (w/in last year)			Result: + / - Chest X-ray (w/in 1 yr if + skin test): Date _____ Result: + / -
Meningococcal*			

\* Recommended for students living in the dormitories, but not required

I certify that I have read and understand the technical standards of admission listed above, and I believe to the best of my knowledge based on a routine physical examination that *(student name)* \_\_\_\_\_ meets each of these standards with or without reasonable accommodation.

Examiner Comments:

Are there any accommodations this student may need? **YES / NO**

Date of physical examination: \_\_\_\_\_

Health care provider (MD, DO, NP, PA) printed name \_\_\_\_\_

Health care provider (MD, DO, NP, PA) signature \_\_\_\_\_

**This form must be returned before the first day of class to:**

Lori Woodburn  
Pavilion 350  
Department of Kinesiology  
University of Wisconsin-Milwaukee  
Milwaukee, WI 53201-0413

*Please direct all questions to Jennifer Earl-Boehm at 414-229-3227 or jearl@uwm.edu*