

## **General Medical Issues in Athletic Training A283 (3 credits) – Spring 2012**

- Professor:** Katie Grove, PhD, LAT, ATC, 855-3640
- Office:** University Gymnasium Athletic Therapy Room
- Class Schedule:** 10:10 – 11:00 M-W-F – University Gym
- E-mail address:** [kagrove@indiana.edu](mailto:kagrove@indiana.edu)
- Prerequisites:** Admittance into the Athletic Training Major  
Concurrent enrollment in A270, A281, and A383
- Texts:** **Clinical Pathology for Athletic Trainers**, O'Connor, & Fincher,  
Second Edition, 2008
- Oncourse:** Oncourse will be used not only for grading but for all projects due in this class. You must download all completed documents into the Assignment section on Oncourse by 11 pm on the date scheduled. See “Policy for turning in assignments” below for grading on late assignments. Additionally because the class time is so limited there will be other information on the website for you to refer to. As much as possible a general outline will be presented prior to each class meeting.

### **Course Description:**

This course is designed to present information on various diseases and conditions the athletic trainer will confront. Illness/condition recognition, assessment, differential diagnosis, referral and treatment in different patient populations will be discussed in class labs and clinical experiences.

This course is a service-learning and communication intensive course so you will participate in service learning through Volunteers in Medicine and maintain a reflective journal about your experiences. It is hoped that what you learn in class will be reflected in your general medical experiences.

### **Attendance and Tardiness**

Attendance is required for this class. It is an expectation that you will be here, however you will be permitted 3 absences without recourse. In order for an absence to be excused, proper written notification must be provided (i.e. note from doctor, etc.) and the instructor must be notified **prior** to missing class (email or phone call). Additional absences will cost 2% of your final grade with each absence (class or clinical). You may compensate for a class absence with the submission of 3 one page abstracts which are from peer reviewed journals. The topics must relate to the listed course objectives. They must be no more than 250 (1 type written page, 12 point, New Time Roman font). Minimal effort on an abstract will not be credited. A copy of the article must also be submitted.

## **Primary Course Objectives and Outcomes:**

1. Develop an environment for learning which provides the student with the opportunity to explore through case studies the athletic trainer's role in recognition, assessment, differential diagnosis, referral and treatment in different patient populations

### Assessments:

- Diagnostic technique presentation
- Prescription medication lab
- OTC medication presentation and dispensation lab
- Illness case study

2. Environment of learning which facilitates a sense of social responsibility and helps the student connect the relevance of general medical and service learning experience with personal and professional growth.

### Assessments:

- Reflective journals (pre, mid, & post VIM)
- Course portfolio

## **Athletic Training Competency Objectives**

At the completion of A283 the student will:

1. Identify the precautions and risks associated with exercise in individuals who have systemic medical conditions (1)
2. Describe the principles of effective heat loss and heat illness prevention programs. These principles include, but are not limited to knowledge of the body's thermoregulatory mechanisms for acclimation and condition, fluid and electrolyte replacement requirements, proper practice and competition attire, and weight loss (2)
3. Describe and explain cell adaptations (e.g. atrophy, hypertrophy, hyperplasia, metaplasia, and dysplasia). (1)
4. Describe the pathology of diseases of the blood (e.g., anemia, iron deficiency, hemolysis that would impair strenuous physical activity). (3)
5. Describe the warning signs and symptoms of cancer. (10)
6. Describe the signs and symptoms of deep and superficial vein thromboses, pulmonary embolism and other emboli, and myocardial infarction. (6)
7. Interprets vital signs as normal and abnormal including, but not limited to, blood pressure, pulse, respiration, and body temperature. (1)
8. Recognizes the characteristics of common life-threatening condition that can occur either spontaneously or as the result of direct trauma thorax and viscera, and identifies the management of these conditions (11)
9. Describe the signs and symptoms of diabetic coma and insulin shock and describes the proper treatment. (9)
10. Recognizes the following pathologies: eye, ear, mouth. (8)
11. Lists the common causes, signs and symptoms of respiratory infections and describes strategies for reducing their frequency (e.g. pneumonia, bronchitis, sinusitis, URI, and asthma). (7)
12. Describe the use of a peak-flow meter in the evaluation and management of respiratory conditions. (7)

13. Compare and contrast the signs and symptoms of respiratory tract conditions (e.g., common cold, influenza, allergic rhinitis, sinusitis, bronchitis, asthma, pneumonia, and pleurisy).(7)
14. Recognizes the relationship between changes in blood pressure, and respiration rate and changes in activity level. (1)
15. Explain the typical history, sign, symptom and treatment of cardiopulmonary conditions (coronary heart disease, hypertrophic cardiomyopathy, heart murmurs, and mitral valve prolapse) (6).
16. Identify the symptoms/signs associated with injury/illness (e.g., cellulitis, lymphangitis, lymphadenitis, and bacteremia). (1)
17. Describe the common conditions that affect the liver, gall bladder, and pancreas. (11)
18. Describes the signs and symptoms of common gastrointestinal tract illnesses, contagious viral illnesses, skin lesions, skin infections and disorders and conditions that affect bones and joint (arthritis and gout).(5)
19. Recognize the general concepts and differences in legal regulation of non-prescription, prescription, and classified pharmaceuticals (FDA). (4)
20. Understand the concepts of dissolution, bioavailability, bioequivalence, biotransformation, adverse drug reaction and potential risks of co-interaction. (4)
21. Identify the general indications, contraindications and adverse reactions of common prescription and non-prescription analgesics, local anesthetics, antibiotics, anaphylaxis, beta blockers and anti-hypertensives and bronchodilators. (4)
22. Recognizes the importance of getting a good history and how to get a history (1)

**Grading (% is subject to change)**

Written Exams (3)	15	
Final Exam (Comprehensive)	20	
Course Worksheets (10 points each)	5	
Quizzes	5	
Portfolio	15	(Appendix A)
Diagnostic Equipment Presentation	10	(Appendix B)
OTC Medication Dispensation (2)	5	(Appendix C)
Illness Case Study	15	(Appendix D)
Reflections (pre-mid-post)	<u>10</u>	(Appendix E)
	100 %	

**Policies re: Turning in Assignments:**

Students will lose 10% of total points for each day an assignment is late, unless noted otherwise in syllabus. After 1 week (7 calendar days by class time) the assignment will no longer be accepted or graded. Students will automatically receive zero points after this time. In addition, **10%** will be deducted from your final assignment grade for any assignment (or form) turned in any manner other than as described in this syllabus or as directed in class.

## **Appendix A**

### **Course Portfolio:**

Each of you will be developing a course portfolio for this class. This portfolio is a collection of your work (artifacts) showcasing your efforts, progress and achievement with captions describing the artifacts of the projects you will present in class (Diagnostic equipment, OTC Administration, Reflective journal, and Illness Case Studies). By completing this portfolio:

- 1) You will be able to expand your own professional portfolio, and
- 2) You will be able to examine your roles as an athletic trainer in a broadening profession.

The NATA Content areas which could be covered in this area are: Pathology of Injuries/Illness, Acute care of Injury/Illness; Pharmacology; General Medical Conditions/Disabilities, Nutritional Aspects of Injury/Illness, Psychosocial Intervention/Referral and Foundational Behaviors of Professional Practice

Your portfolio will consist of the following labeled sections:

- a. Table of Contents
- b. Syllabus
- c. Medical terminology related to illnesses and conditions
- d. Diagnostic Equipment handouts (for all classmates)
- e. OTC medication administration forms
- f. Illness Case Study
- g. Reflective journal
- h. Course Power points

In preparation for this portfolio purchase a 3 ring binder and dividers immediately. You will thus be able to build the portfolio throughout the semester, instead of rushing to put it together at the last minute. This portfolio will contain your homework assignments, power point presentations as well as handouts and power points from other students in the above mentioned sections.

The final version of this notebook will be turned in prior to class on 4/13/12. The rubric for your portfolio evaluation is on the next page. Failure to turn your portfolio at the designated time (prior to class) will mean a 20% loss in total points. With another 20% loss in points for each date it is late. After one week you will lose all points.

Portfolio Rubric for A283

Student's name: \_\_\_\_\_

**GOALS OF THE PORTFOLIO:**

- ◆ To present collection of evidence that depicts your professional development in this class. Artifacts chosen are evidence of your work in A283 providing evidence of reflection about your abilities, strengths, and areas for continued growth.
  
- ◆ To develop artifacts which will be appropriate for your professional portfolio

**GOALS FOR THIS ASSESSMENT:**

**I. PROFESSIONAL PRESENTATION OF EVIDENCE:**

*Points*

- 5 Artifacts are neat, typed whenever appropriate, and bound in a professional manner. Photos are mounted neatly. Appropriate paper used throughout. Visually appealing fonts, graphics, paper, cover.
  
- 4 Most artifacts are neat and displayed as above, but several are not presented in a quality manner.
  
- 3 Only about half of the artifacts are presented as described in #5 above. Originals may be difficult to read, not typed, poorly mounted, or not presented using quality paper or binder.
  
- 1 Only a few artifacts are presented as described in #5 above.

**Suggestions:**

**II. ORGANIZATION OF PORTFOLIO:**

- 10 Clear organization of artifacts with labeled divider pages. Artifacts are placed in appropriate sections. All artifacts are explained in captions of some kind. Photos are labeled. Order of artifacts within sections makes sense and builds understanding of reviewer of the athletic training student's competence and experiences.
  
- 8 There is a clear organizational scheme but small improvements could be made (i.e. labeling, placement of dividers, placement of artifacts, etc.)
  
- 6. There is a noted organizational scheme but moderate improvements could be made (i.e. labeling placement of dividers, placement of artifacts, etc.)
  
- 4. There is an attempt made to organize artifacts but it is not effective for the reviewer and some major changes are needed.
  
- 1 Little or no attempt to organize artifacts. This is a "trunk of treasures" or a scrapbook with no recognizable thoughtful organizational pattern.

**Suggestions:**

**III. QUALITY OF SUBSTANCE OF EVIDENCE FOR DEVELOPING BEHAVIORAL SKILLS IN CONTENT AREAS (5 pt.)**

*Notes:*

- ◆ The checklist below shows this reviewer’s impression of which behavioral skills/classification [i.e. cognitive (C), psychomotor (P), foundational behaviors (FB), clinical integration (CI)] are portrayed in the NATA content areas of which you show evidence. The reviewer’s impression of the quality of evidence shown is also included. The reflections and captions you include in the portfolio should outline this evidence thus making such skills easy to identify for the reviewer.

NATA CONTENT AREAS	Behavioral Skill(s) Portrayed	Evidence Shows Development In This Area	Evidence Could Be Improved	Evidence Supplied is Insufficient
Evidence-Based Practice	C / P / FB / CI			
Prevention and Health Promotion	C / P / FB / CI			
Clinical Examination and Diagnosis	C / P / FB / CI			
Acute Care of Injury and Illness	C / P / FB / CI			
Therapeutic Interventions	C / P / FB / CI			
Psychosocial Strategies and Referral	C / P / FB / CI			
Healthcare Administration	C / P / FB / CI			
Professional Development / Responsibility	C / P / FB / CI			
Clinical Integration Proficiencies				

**IV. CAPTIONING OF ARTIFACTS / REFLECTIVE RATIONALE FOR ARTIFACT SELECTION: Diagnostic equipment, OTC Administration, Reflective journal, and Illness Case Studies**

- 5 Specific artifacts (including photos, videos, student work samples, and printed material) are captioned with a clear, concise explanation of its significance and what it shows about the athletic training student as a professional. Relationships between artifacts, if they exist, are noted. The captioning shows this student’s ability to reflect about her / his experiences, strengths and on-going growth plans.
4. Most artifacts are captioned. Some captions could be improved for some reason as noted below. Captions show some reflection about the athletic training student’s practice and on-going growth.
- 3 Captions are lacking or captioning is not always adequate to explain the artifact. It would be difficult to examine this portfolio and make sense of what it shows without the athletic training student present to explain.
- 1 Chosen artifacts are either uncaptioned or captioned in a general, cursory way...i.e. “here’s a project I did on shoulder rehabilitation”. No reflection is evident.

**Suggestions:**

**General Comments:**

**Appendix B**  
**DIAGNOSTIC TECHNIQUES/TESTS**

**Diagnostic Equipment/Tests (Due on Oncourse 2 days prior to presentation)**

**Objective:** Introduce the student to the different diagnostic equipment used in the differential diagnosis of illnesses/conditions (non-orthopaedic).

You and a partner will be given either a piece of diagnostic equipment or a type of diagnostic test used in the differential diagnosis of **illnesses/conditions**. You and your partner are to give a very short power point presentation which **must** include the following information.

- A Name of equipment and alternate names
- B Why and when it is used
- C How it is to be used
- D Examples of positive and negative results
- E. Include in this presentation the history of an *actual case* using the diagnostic equipment and act out a situation (when the equipment is available for use)
- F. You may find a case by:
  - 1. Meeting with your ACI/CI (remember this could include an RN at VIM) for a case.
  - 2. Ask for the file from Nita or RN at VIM. You cannot make copies of material from the files and you may not take the files with you but you can jot down notes. Keep in mind that you will never include names in this presentation.
  - 3. You can schedule a brief appointment with Dr. Hipskind, Janet Hitzeman (ANP) or RN at VIM to talk briefly about the case.
  - 4. See below for the format you are to use on your power point presentation
  - 5. In some but not all cases you can access the equipment and demonstrate its use in class.

For situations where you cannot demonstrate the case in class you are to include pictures on your power point presentation of how this is to be done.

This is a   age   y. o.   sex  . They present with the following symptoms: \_\_\_\_\_ and signs: \_\_\_\_\_. Further medical history reveals \_\_\_\_\_. A decision was made to administer the following test(s) \_\_\_\_\_ this was done by (demonstrate when possible or show pictures) \_\_\_\_\_ Positive results are indicated by: \_\_\_\_\_; and negative results are indicated by: \_\_\_\_\_. If the results are positive the plan is to \_\_\_\_\_ . If the results are negative the plan is to: \_\_\_\_\_

(Assignments)

*Stethoscope (auscultation):*

*Urinalysis:*

*Computed Tomography:*

*CBC:*

*Colonoscopy/Endoscopy:*

*Magnetic resonance imaging (MRI, FMRI):*

*Ophthalmoscope/Otoscope:*

## Appendix C

### OTC MEDICATION DISPENSATION

Objective: After completing this lab the student will become competent in the administration of OTCs to student athletes using the correct protocol and under the direction of a CI/ACI.

NATA Content areas which could be covered in this area are: Pharmacology and Health Care Administration

You will be dispensing OTC medication under the direction of your ACI/CI to athletes /patients during your time in the ATEP. In preparation for this you will dispense medication to student athletes/patients twice during this semester. If you are not given this opportunity you should ask an CI/ACI to give you a medical situation to work through. The protocol you will follow is this:

1. Work with a CI/ACI to determine which medication to dispense related to a specific illness/condition. At least one of these must occur in an IU Athletic Training Room.
2. Find the medication
3. List Generic and Brand Name
4. Find active ingredient
5. Determine if there are any warnings, indications, or contraindication to this medication
6. Dispense to the athlete/patient (with ACI/CI present)
  - a. Includes amount given
  - b. Includes description of how to take
  - c. Any possible side effects/warnings
  - d. Complete form
7. Write down the required information on the clipboard
8. ACI/CI must sign form signifying completion

The dates for submission of completed documents are: #1 (2/08/12) and #2 (4/04/12) in one of the files outside my office. Failure to submit these on the due dates will mean a loss of 20% of the total points for each day they are late.

Use the forms on the next two pages for this project.

OTC Drug Dispensation # 1  
Due 2/08/12 (before class)

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

Date completed \_\_\_\_\_

1. Condition(s) used for:

\_\_\_\_\_

2. Drug name(s):

Generic: \_\_\_\_\_

Brand: \_\_\_\_\_

3. Active Ingredient(s): \_\_\_\_\_

4. Warnings: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Indications: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Contraindications: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. Protocol for medication dispensation:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8. Other Comments: \_\_\_\_\_

\_\_\_\_\_

Verification (CI/ACI) \_\_\_\_\_

Date \_\_\_\_\_

Instructor Approval \_\_\_\_\_

Date \_\_\_\_\_

OTC Drug Dispensation #2  
Due 4/04/12 (before class)

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

Date completed \_\_\_\_\_

1. Condition(s) used for:

\_\_\_\_\_

2. Drug name(s):

Generic: \_\_\_\_\_

Brand: \_\_\_\_\_

3. Active Ingredient(s): \_\_\_\_\_

4. Warnings: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Indications: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Contraindications: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. Protocol for medication dispensation:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8. Other Comments: \_\_\_\_\_

\_\_\_\_\_

Verification (CI/ACI) \_\_\_\_\_

Date \_\_\_\_\_

Instructor Approval \_\_\_\_\_

Date \_\_\_\_\_

## Appendix D

### ILLNESS CASE STUDIES

#### **Illness Case Presentation**

You and your partner will be researching an illness/condition case to present to the class. You will be assigned a chapter and it is up to both of you to find a case related to the chapter you are assigned. You must share your proposed case with either a nurse at VIM, your ACI/CI, or our Nurse Practitioner or Team Physician.. You will then present the case to the class. Your classmates will have a chart to complete related to the case. The goal is for your classmates to perform a differential diagnosis to determine what the case is they will do this by asking you questions with the ultimate goal of deciding what the illness or condition is. Your case study will be presented at the beginning of the class following the lecture.

**NATA Content Areas** which could be covered with this Case Study are: Pathology of Injuries/Illness, Acute Care of Injuries/Illness, Pharmacology, General Medical Conditions, Conditions/Disabilities, Nutritional Aspects of Injury/Illness, Psychosocial Intervention/Referral, Health Care Administration.

**Behavioral Skills** portrayed will depend on the case you are presenting. If it is an actual case you are/have dealt with it will include: cognitive (C), psychomotor (P), and Clinical Integration. Could Foundational Behaviors (FB) be a part of your case?

Your case study involves the following steps:

1. Determine the illness/condition you want to present to class.
2. Research the illness/condition by using the reference list at the end of your assigned chapter. Additionally the **Physician's Desk Reference** is to be used for any prescription medication. Compile a resource file including relevant hard copies for your course portfolio.
  - a. Illness / condition
  - b. Personal demographics (age, sex, activity/job)
  - c. History of:
    - i. Family
    - ii. Pt.
    - iii. Disease / Condition
  - d. Signs / symptoms
  - e. Diagnostic tests
  - f. Differential diagnosis
  - g. Treatment
    - i. Prescription and / or OTC medication
    - ii. Other treatment
  - h. Prognosis
  - i. Return to activity / job
  - j. Future plans
3. Develop a power point presentation to present in class
  - a. Provide description of case on first page

- b. Following slides developed in anticipation of questions asked
    - i. Demographics of patient
    - ii. Signs/symptoms
    - iii. Differential diagnosis
    - iv. Diagnostic tests to be used
  - c. Provide correct diagnosis
    - i. Medications (RX and OTC) to be used if any
    - ii. Other treatment
    - iii. Prognosis
4. Complete the chart with anticipated questions and answers (Chart on next page)
  5. Provide a list of all resources used to complete this project using the format found in the NATA Journal
  6. Put all of these into a document to download onto Oncourse in the assignment section by class time on due date
  7. Hand out empty chart with case listed in class
  8. Present case to class and ask them to complete the chart to the best of their ability
  9. Use chart to ask questions – refer to your chart for answers
  10. Refer to correct slide for answers

Chapters in book and assignments

Cardiovascular and Hematological (Chapter 6):

Pulmonary (Chapter 7):

GI and Hepatic-Biliary (Chapter 8):

Neurological (Chapter 13):

EENT (Chapter 11):

Dermatology (Chapter 12):

Renal and Urogenital (Chapter 9):

Endocrine and Metabolic (Chapter 10):

EENT (Chapter 11):

Psychological (Chapter 14)

## CLINICAL RULES

1. Check the Clinical Assignment Descriptions forms BEFORE starting the rotation and note necessary contact numbers, responsibilities, etc. Fill out your Expectation form on ATRACK. You may want to print and bring also but grades are done via ATrack submission by 1<sup>st</sup> week of clinicals.
2. Be sure to wear you IU sports med uniform and name tag. Please only long pants. NO SHORTS!
3. Be sure to give your clinical instructors / volunteer coordinator YOUR contact information. Sometimes the doctors in particular are sick or something and they need to let you know not to come.
4. BE sure to have contact information for BOTH sites. If you are running late and are sick, let them know! You also need to let me know if you are sick and can't make it. Remember we have a communicable disease policy to follow. (i.e. don't go if you are sick but try to work this out in advance if at all possible. We can schedule you will one of our docs / nurse if needed).
  - a. Shelly ---- at VIM 812-333-4033; Back line at IMA (Do NOT give these numbers to anyone....only use if need to call in sick or late) 812-322-4755 or 322-4509
5. Let the supervisors know your schedule if it doesn't match up exactly with what I have scheduled. Essentially I have given you 30 – 45 min or so to get there after class.
6. Let the physicians know if there is something that may make you uncomfortable and you prefer not to enter the room with a particular patient. (for example they do pelvic examinations).
7. When in with the physicians at IMA, please try not to fidget. Also, once the patient is on the exam table, you may sit as you maintain a professional demeanor.
8. Physicians at IMA may also ask you to do a patient intake or history. Be ready to “present” the patient to the physician with the relevant history information.
9. Do NOT ever hesitate to ask someone to help you if you can't find a BP or whatever. Do not ever guess or provide inaccurate information. The nurses have no problem with you asking for some help if needed.
10. NO PHONES, TEXTING, ETC at either location!!!!
11. MAKE THE MOST OF IT! Remember these experiences serve different purposes. One purpose is to allow you to use your skills to serve the community (IMA) and allow you to refine these skills, become comfortable with a diverse set of patients and improve your confidence. The other purpose at IMA is to tap into the knowledge of the docs, asking appropriate questions (at the appropriate time, etc).

## Appendix E

### The Reflective Journal

#### Objectives:

1. To allow the student to think about pre-conceptions of varied cultural groups and how their pre-conceptions may affect how they react to, communicate with and provide health care to different clientele.
2. To allow the student to evaluate personal and professional values and their affect on interaction with different clientele.
3. To experience the role of the athletic trainer in different settings besides the student athlete and to see how athletic training skills can be used in a variety of settings.
4. To observe how direct clinical work in the VIM may affect your views of the clientele and how you deliver health care to other groups.
5. To contemplate your role in social responsibility

Students will participate in reflective practice by maintaining a reflective journal of their time in the general medical rotation. The reflective journal should be kept in the student portfolio as well as electronically. The outline for the reflective journal will be in the Assignment section of Oncourse but will not be available for other students to read.

This reflective journal will be used 3 times during the year: pre-service, midway (during your general medical rotation) and after you have completed your rotation. As these are turned in electronically you will receive feedback from me. In cases where there appears to be conflicts or questions I will ask the ACE to contact you.

In your journal you are to reflect upon and answer the following questions three times during the year. You may certainly add any other thoughts you may have.

**Pre-Service Reflections: *These questions must be answered by everyone and put on Oncourse by Tuesday, January 10<sup>th</sup> by 11 pm to aid in the discussion with the ACI Nellie --- on Wednesday, January 12th.***

What does service learning mean to you?

What preconceptions do you have about your general medical rotation at VIM?

What preconceptions do you have about the people who come to a free health care clinic such as your general medical rotation at VIM?

Are you aware of the range of medical needs at VIM?

Why is there a need for your service as an athletic training student at VIM?

What skills and knowledge do you already have that you'll use to contribute to your service learning experience at VIM?

What can you do with the knowledge you will gain at VIM?

What personal qualities both personal and professional (e.g. leadership, communication skills, compassion, etc.) do you hope to develop through service-learning? In what ways do you anticipate these qualities will help you in the future? To help others in the future?

What does social responsibility mean to you?

**Midway** – *The midway responses are due by 11 p.m. Friday of your second week at VIM.* Please put these on Oncourse in the Assignment section and send by email to: What similarities do you perceive between you and the people you are serving?

How are you perceived by the people you are serving?

What do you think a typical day is like for the people you serve? What pressures do they confront?

How have patients and staff treated you and how do you feel about that?

How does this clinical experience have an impact on their life socially, educationally, politically, recreationally, etc.?

What have you learned about your patient's lives? Are they different from other people you know? How different?

How is the clinic affecting your patients' lives?

If you were in charge at VIM how would you improve the delivery of service to clients?

What questions/problems have you had during your VIM experience? Have you had these answered? By whom?

Has anything at VIM made you uncomfortable? Has anything been especially rewarding?

**Post-Service Reflections:** *Turned in within one week after your rotation at VIM is completed*

Were the preconceptions you had about your general medical rotation at VIM correct? Please explain why or why not?

Were the preconceptions you had about the patients at VIM confirmed? Why or why not?

Has this experience changed the way you think about athletic training?

Why was there a need for your service as an athletic training student at VIM? Why or why not?

What skills and knowledge did you use to contribute to your service learning experience at VIM?

What skills and knowledge did you refine or gain at VIM? How can you use these skills and knowledge in other professional and personal situations?

What personal qualities both personal and professional (e.g. leadership, communication skills, compassion, etc.) did you develop through service-learning?

In what ways do you anticipate these qualities will help you in the future? To help others in the future?

How has your sense of social responsibility change after the service experience?

**Course-focused questions:**

How has the service learning experience helped in your ability:

To perform a complete and accurate medical history?

To recognize important signs and symptoms related to disease?

To perform a differential diagnosis; To recognize when referral is needed and to whom?

Did the experience contradict or reinforce class material?

How did the classroom experience help you overcome obstacles or dilemmas at VIM?

How did your service experience at VIM help in your classroom experience?

What aspects of your learning may have been due to your service experience?

In what ways did you use your athletic training skills and knowledge during your service learning experience?