

Athletic Training Education Exit Interview

Athletic Training Student: _____ Date: _____

Person (s) Conducting Interview: _____

Directions: Please carefully read each of the questions. Please provide your feedback regarding your experiences as an athletic training student. All responses will be kept confidential and will be used for program evaluation and enhancement purposes only. Please be honest and as specific as possible when answering the questions.

1. Please list the Overall Strengths of the UCONN Athletic Training Education Program.

2. Please list any Weaknesses of the UCONN Athletic Training Education Program.

On a scale of 1 to 10, what overall rating would you give to the UCONN ATEP Program?

1 2 3 4 5 6 7 8 9 10

3. If you were program director, what are 3 things you would do to make the UCONN Athletic Training Education Program better?

4. What were the top 3 (delivery, relevant material etc.) AT courses you had the opportunity to take while at the UCONN Athletic Education Training Program? Please explain why.

5. What 3 courses were the least favorable (delivery, relevant material etc.) AT courses you had the opportunity to take while at the UCONN Athletic Education Training Program? Please explain why.

6. What was your favorite clinical experience while in the program? Please explain why.

7. What was your least favorite clinical experience while in the program? Please explain why.

Please list each of your clinical rotations, the ACI, and then rate both on a scale from 1 to 10. Provide any additional comments if necessary.

Clinical Rotation	ACI	Clinical Rotation Score	ACI Score

General Comments:

8. Do you feel as though the UCONN Athletic Training Education Program prepared you for your future career aspirations? Please explain.

9. When are you taking the BOC exam? Did you pass?

10. What are your plans for next year? What are your goals in 5 years?

For each of the following domains, please circle a rating of how well you were prepared in this area while a student at UCONN.

5=Excellent 4=Above Average 3=Average 2=Satisfactory 1=Poor

1. Risk Management & Injury Prevention (i.e. recognizing “at risk” athletes through physical exams, conducting physical exams, selecting/fitting protective equipment, developing emergency action plans)

1 2 3 4 5

Please briefly explain why you gave this rating.

2. Pathology of Injury and Illnesses (understanding the physiological response to acute trauma, tissue repair/regeneration, chronic inflammation, common diseases)

1 2 3 4 5

Please briefly explain why you gave this rating.

3. Assessment and Evaluation (maintain medical records, assessing injuries, making referrals, making return to play decisions)

1 2 3 4 5

Please briefly explain why you gave this rating.

4. Acute Care of Injury & Illness (use of emergency action plans, determining when to call 911, emergency life support)

1 2 3 4 5

Please briefly explain why you gave this rating.

5. Pharmacology (using a drug reference to find information on a drug, documentation related to pharmaceuticals, administering medications)

1 2 3 4 5

Please briefly explain why you gave this rating.

6. Therapeutic Modalities (identifying short and long term rehabilitation goals, selecting appropriate modalities, determining indications/contraindications for modalities)

1 2 3 4 5

Please briefly explain why you gave this rating.

7. Therapeutic Exercise (developing rehabilitation goals, using appropriate exercises for ROM, strength/endurance, speed/power/agility, progressing an athlete through a program, making return to play decisions)

1 2 3 4 5

Please briefly explain why you gave this rating.

8. General Medical Conditions & Disabilities (maintaining medical records, assessing illness, making referral decisions)

1 2 3 4 5

Please briefly explain why you gave this rating.

9. Nutritional Aspects of Injury & Illness (making nutritional recommendations for in-season and out-of-season athletes, making nutritional recommendations for weight-loss/weight-gain, recognizing signs and symptoms of eating disorders, giving guidance about nutritional supplements)

1 2 3 4 5

Please briefly explain why you gave this rating.

10. Psychological Interventions & Referral (controlling emergency situations calmly, communicating with other medical personnel, maintaining patient confidentiality, motivating patients during rehab programs)

1 2 3 4 5

Please briefly explain why you gave this rating.

11. Health Care Administration (communicating effectively with peers/patients/athletes, managing budget and facility resources, developing facility/administration plans)

1 2 3 4 5

Please briefly explain why you gave this rating.

12. Professional Development & Responsibility (disseminating injury prevention and health care information, participating in continuing educational/professional development, involvement in local/state/national organizations, mentoring students)

1 2 3 4 5

Please briefly explain why you gave this rating.

Please evaluate each of the following courses. Circle the response that most accurately reflects your opinion of the course. Provide any additional information in the space provided. Be sure to include strengths, weaknesses, and suggestions for improvement.

5=Excellent 4=Above Average 3=Average 2=Satisfactory 1=Poor

1. EKIN 2100 Introduction to Athletic Training I /EKIN 2110 Introduction to Athletic Training II

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

2. EKIN 3135 Rehabilitation of Athletic Injuries

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

3. EKIN 3105 Therapeutic Modalities for Athletic Injuries

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

4. EKIN 3124 Therapeutic Modalities Laboratory

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

5. EKIN 3120 Athletic Training Anatomy

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

6. EKIN 4500 Physiological Systems in Human Performance

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

7. EKIN 3177 Pathophysiology and Pharmacology for Athletic Trainers

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

8. EKIN 3125 Taping and Bracing Laboratory

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

9. EKIN 3145 Rehabilitation of Athletic Injuries Laboratory

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

10. EKIN 3150 Assessment Laboratory

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

11. EKIN 3165 Current Research and Issues in Athletic Training

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

12. EKIN 3155 Athletic Training Administration

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

13. EKIN 3170 Health and Medicine

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

14. EKIN 3175 Strength and Conditioning for Athletic Trainers

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

15. EKIN 4510 Mechanisms and Adaptations in Sport and Exercise

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

16. EKIN 3130 Assessment of Athletic Injuries

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

17. EKIN 3520 Applied Anatomy and Kinesiology

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

18. EKIN 3100 Prevention and Care of Athletic Injuries

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

19. EKIN 3156 Administration Laboratory

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

20. EKIN 3522 Sport Biomechanics

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

21. EKIN 3160 Counseling in Sports Medicine

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

22. EKIN 3140 Emergency Procedures in Athletic Training

5 4 3 2 1

Please evaluate the instructor of the course.

Comments:

Please provide us with any comments or suggestions that you feel appropriate in the evaluation of your experiences as a student in the UCONN athletic training education program.

Permanent Address, Phone, and Email:

THANK YOU for taking the time to complete this exit interview.