

MESSIAH

ATHLETIC TRAINING

Medical Confidentiality Statement for Athletic Training Students

As an Athletic Training Student (ATS) with the Messiah College Athletic Training Program, I understand that I will be working with athletes in a medical environment and I agree to keep all information concerning Messiah College athletes strictly confidential.

Specifically, this means that I may not:

- discuss or disclose any athlete's health problems, treatment procedures, or records with another athlete, student, or "non-medical" person.
- distribute any information- oral, written, electronic or by phone about an athlete to anyone outside of the Messiah College Athletic Department Staff to whom the information may be relevant, as it pertains to the athlete's participation in his or her sport.
- remove any papers or records concerning an athlete from the athletic training room.
- read an athlete's records without proper authorization.
- voice any personal medical opinions beyond the scope of my training and without the permission of a preceptor.

I, the undersigned, have read and understand the terms of confidentiality and agree to abide by them. I further understand and agree that failure to comply with said standards may result in a dismissal from the Athletic Training Program.

Student Name (print): _____

Student Signature: _____ Date: _____
(month/day/year)

Program Director Signature: _____ Date: _____
(month/day/year)