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## Student Athlete Satisfaction with UW-Eau Claire Athletic Training Services

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### ABSTRACT

**Maresh NT, Peterson AS.** Student Athlete Satisfaction with UW-Eau Claire Athletic Training Services *Journal of Undergraduate Kinesiology Research* 2007; 3(1) 27-43. **Purpose:** Athletic Training is a growing profession. This growth means that athletes are increasingly coming into contact with athletic trainers. These interactions and the quality of care by athletic trainers can be improved by increasing athlete satisfaction. **Methods:** 188 online surveys were completed by NCAA Division III student-athletes from the University of Wisconsin-Eau Claire. **Results:** High profile athletes reported significantly higher satisfaction in all categories than low profile sports. There was higher reported satisfaction with certified athletic trainers than with student athletic trainers. There was no significant difference regarding comfort with same-sex or opposite-sex athletic trainers. When the results are separated by the domains of athletic training, it is apparent that the areas of rehabilitation and treatment of injury scored significantly lower than the other domains. **Conclusion:** Curriculum, personnel, and facility changes could assist in the improvement of athlete satisfaction with athletic training services.

**Key Words:** athletic training, patient satisfaction, survey, quality of care, NCAA Division III

### INTRODUCTION

The profession of athletic training is a growing profession. Since the 1950s, National Athletic Training Association (NATA) memberships have increased from 200 to nearly 30,000 athletic trainers.<sup>1</sup> With the growth of the profession athletes are coming in contact with athletic trainers more than ever before. The interactions between athletes and athletic trainers are greater than those an athlete has with any other health care profession.<sup>2-3</sup> Athletic trainers, especially in the collegiate setting, work with student-athletes on a day-to-day basis. This gives certified athletic trainers (ATC) and athletic training students (ATS) in an athletic training educational setting a pivotal role in the healthcare of the student-athlete as well as their performance. Athletic trainers facilitate this within the six domains of athletic training: (1) prevention of athletic injuries, (2) injury assessment, evaluation, and recognition, (3) first aid and emergency care, (4) treatment, rehabilitation, and reconditioning of athletic injuries, (5) administration and organization, (6) professional development and responsibility.<sup>4</sup>

It is important to note that an athletic training education program (ATEP) must assure that the ATSS educational requirements are met to adequately prepare them to sit for the NATA Board of Certification exam. The ATEP must also meet the healthcare the needs of student-athletes. This may have direct effects on the profession of athletic training. If the ATEP does not meet the educational needs of the ATSS, the program will send new athletic trainers into the work force that are not prepared to be working on their own. If there are subpar athletic trainers in the work force, the interactions other athletes have with those athletic trainers may affect the reputation of all athletic trainers. If the needs of the student-athletes are not met, their interactions with athletic trainers may be negative which can also influence the future reputation of the profession of athletic training. The satisfaction of the student-athlete population does not solely have benefits for the profession of athletic training but more importantly, the health of the student-athletes. Student-athletes' perception of their care can directly impact the amount of time it takes to return to play.<sup>2</sup> A positive psychological outlook is an important part of the healing process.<sup>2</sup> Proper care, knowledge and performance by athletic trainers is crucial to the health, recovery, and ongoing safety during their athletic events.

Overall there have been few studies regarding student-athlete satisfaction with the services provided by athletic trainers.<sup>2-3,5-9</sup> In separate studies by Scott Unruh, athletes in high profile sports exhibited a higher satisfaction with services provided by athletic trainers than athletes in low profile sports.<sup>3,9</sup> In two other studies on same-sex versus opposite-sex health care providers' services, athletes reported greater comfort with providers of the same-sex. The provider gender preference by the patient increased with gender specific injuries.<sup>7-10</sup> Of the studies found, the majority only measured the student-athlete's satisfaction with services provided by ATCs and not with ATSS. The lack of research completed on athlete satisfaction may directly correlate with the quality of ATSS soon to be in the work force as ATCs. Research for ATSS performance can greatly benefit not only the ATSS professional development but the entire profession of athletic training. It is particularly important to have feedback about the ATSS's abilities and interpersonal skills from the student-athletes because of the frequency of interaction. While the expected satisfaction of the student-athletes is positive, negative feedback will only help improve the profession. This is especially true with a new and growing ATEP.

## **METHODS**

### **Subjects**

Current athletes, ages 18-24, from all 20 intercollegiate sports at the University of Wisconsin-Eau Claire were asked to participate. Of the 659 invitations to participate in the study, 188 responses were received. The responses received provided a random sampling from the athletic teams. The results were separated to compare distribution of sport, age, and year of eligibility (Figures 1, 3, 4). Results were also divided to view the differences between high profile and low profile sports. High profile sports were determined by the number of media or fan requests for information that a particular team received throughout the season (sports deemed high profile will be further discussed later). The information about media requests was provided by the University of Wisconsin-Eau Claire Interim Sports Information Director, Kevin Meinholz. Subjects were informed that by responding to the survey their consent to participate in the study was implied (Appendix A). This study was approved by the University of Wisconsin-Eau Claire's Institution Review Board.

### **Instrumentation**

A Likert-scale questionnaire was created to assess the level of perceived satisfaction of the athletes' medical care given by the athletic training staff and students. We created questions with the guidance of suggestions by ATCs at the university. Athletes responded to questions addressing their degree of comfort regarding the six domains of athletic training. Questions regarding administration

and organization were combined with those regarding professional development and responsibility because the two categories are similar in nature. Primary experience questions were asked to eliminate student-athletes who have not received care from the athletic training staff during their athletic careers. A copy of the survey used is located in Appendix B.

### **Data Collection**

Surveys were sent via email to all the current athletes at the University of Wisconsin-Eau Claire and were given a three week time frame to respond to the questionnaire (November 5 – November 25). Follow-up emails were sent at the beginning of each week. The questionnaire was estimated to take 10 minutes to complete. The student-athletes were asked to respond to the questions based on their experiences with the athletic training staff and students during their athletic years of eligibility. Point values for the Likert scale were given the following meanings: 1 – strongly disagree; 2 – disagree; 3 – undecided; 4 – agree; 5 – strongly agree. The option of “Not Applicable” was given for those who may not have had an experience in a particular question and was given a 3 point value. Some “yes or no” format questions were asked to abbreviate the survey for those who have not had experience in those areas and to expand with follow up questions for those who have.

### **Data Analysis**

The results from the online survey were deposited into a database (Microsoft Excel 2007 and SPSS 15.0) where the results could be calculated. Upon receiving the responses, the results were compared by high and low profile sports and also compared ATC with ATS scores. Attention was also given to the six domains of athletic training noting any differences in satisfaction by the athletes. This can show where both the ATEP and resulting services provided by ATS is either excelling or has the need for improvement.

## **RESULTS**

The average response for each question in the survey was calculated, as well as the frequency in which each response was chosen. A higher chosen number for each question represented higher satisfaction by the student-athlete. The frequency of responses valued four or five were also analyzed. This was done because the value of three was representative of either indifference or non-applicative. This may have skewed the average of the responses because of the inability to distinguish the student-athlete’s intent for choosing a three. As displayed in Figure 5, the average scores for treatment and rehabilitation of injuries were lower than those of each of the other domains. The average and frequency of responses for each individual question are outlined Appendix C.

## **DISCUSSION**

To analyze student-athlete satisfaction in each of the domains of athletic training, we combined the results of each question to create cumulative scores and averages for each of the domains. The average frequency of “strongly disagree” and “disagree” versus “agree” and “strongly agree” responses per question were compared in each domain. Average responses were also compared to determine which domains athletes reported to be most satisfied with. After calculating the average frequency of “strongly disagree” and “disagree” responses per question, the results were nearly the same for each domain, so we did not further investigate that information.

Based on our calculations, each of the domains were relatively similar in average response, as well as average frequency of “agree” and “strongly agree” responses, with the exception of rehabilitation and treatment of injuries (Table 1). There could be multiple reasons for this difference. In our curriculum, the rehabilitation class is the last class in the athletic training curriculum to be completed. The class is taken during the sixth of eight semesters in the ATEP. This means that the ATS has the least amount of experience in this area, when compared to the other domains. This difference could

also be due to the difficulty in creating individualized rehabilitation programs because of the variability in the way each student-athlete responds to their injuries.

When comparing ATCs to ATs, results were significantly different in most domains, with the exception of questions regarding rehabilitation and professionalism (Table 2). The similarity in these two domains is mainly a result of an increased amount of interaction between the ATs and the student-athlete. The ATs work with the athlete at a more personal level during rehabilitation sessions, often on a daily basis. Because of the higher exposure to the ATs, student-athletes create a similar level of comfort with the ATs that ATCs may inherently get because of their experience. It is because of this experience in their profession that the ATCs scored higher in the other domains.

When comparing responses from high and low profile sports, there is a significant difference in the number of “agree” and “strongly agree” responses (Table 3). This difference could, in part, be due to the kinds of sports considered high and low profile and the kinds of injuries that are often seen with those sports. High profile sports (football, men’s and women’s basketball, men’s hockey, softball, and volleyball) tend to cause more acute injuries than many (not all) of the low profile sports, such as golf, cross country, and track and field. Those experiencing more acute injuries may experience more immediate attention than those with chronic or overuse injuries. Responses from cross country and track and field athletes account for the majority of the low profile sport responses and these kinds of athletes often experience more chronic, overuse injuries. These types of injuries can drag on for entire seasons, causing the athlete extreme frustration and in turn, are probably less satisfied with the athletic training services they receive.

Athletes participating in high profile may report higher satisfaction for other reasons, as well. Because the incident of injury in these sports is usually higher, more student and certified athletic trainers are assigned to that sport during the season. For example, a certified and several student athletic trainers travel with the football team to every away game. Swim and cross country meets are only covered by an ATC and ATs if it is a home event. Athletes in a low profile sport may see this and think more attention is being paid to the higher profile sports, when in actuality, the likelihood for injury and staffing resources are just not adequate to have someone there at all times. In-season sports and practice times may also dictate who is treated first in the athletic training room. When ATs work with a particular sport throughout their entire season, they may become slightly biased to help those athletes first because of their familiarity with those athletes.

In a previous study by Drummond et al<sup>7</sup>, athletes reported greater comfort with athletic trainers of the same sex than of the opposite sex. Our results were similar, reporting that athletes are slightly more comfortable with same sex athletic trainers (a difference in average response of 0.1). Drummond’s study reported a more significant difference than our results showed, however. It may be important to note that Drummond’s study did not include ATs, with whom athletes may experience more camaraderie and rapport based on their frequency of interaction.

Another study, by Barefield<sup>2</sup>, athletes’ expectations of student and certified athletic trainers were assessed in the category of social support. The results of this study showed that ATCs scored slightly, but not significantly higher than ATs on all questions. Similar questions in our survey actually showed the opposite. ATs scored slightly higher on questions addressing sincerity and rapport (a difference in average response of 0.1 and 0.2, respectively). The difference was not significant, but was most likely due, once again, to the increased frequency of interaction between ATs and athletes.

In a study done by Scott Unruh<sup>9</sup> comparing high and low profile sports, a significant difference was found showing that athletes in high profile sports were significantly more satisfied with the care provided by athletic trainers than the athletes in low profile sports. This study, as shown in Table 3, also showed that the athletes in high profile sports scored significantly higher in all domains than did the athletes in low profile sports. The study by Unruh<sup>9</sup> also compared Division I athletes to Division II athletes showing no significant difference in their satisfaction with the services provided. We were not able to directly compare results for a Division III institution, however; as the results in his study were calculated differently.

### **Limitations**

In order to properly evaluate the findings of this study, it must be assumed that the athletes who responded did so in an honest manner without any personal bias. Another factor to take into consideration is that several athletes did not fully complete the survey. There were 188 responses to questions at the beginning of the survey, and by the end, the number of responses was down to 150. The reasons for the incomplete surveys are unknown, however; could have been caused by a computer error, as all questions on each page were made required before being able to move forward to the next page of the survey. Unfinished surveys were not discarded because the questions the subjects did answer still provided valuable information to the research.

Although the response rate was relatively low (28.5%), when comparing the number of responses received from each team to the number of athletes per athletic team (see Figures 1 and 2, respectively). Another limitation of the study is that student-athletes may not know what level in the program the ATs currently are. This may have affected their expectations of the ATs. The lower level students may not have mastered certain skills yet, which may alter the athlete's satisfaction without them being aware of that student's abilities and base of knowledge. A disadvantage of our survey, especially since it was voluntary and sent out in email format, is that many athletes may have only been inclined to respond if they were either very satisfied or very unsatisfied with the athletic training services they had received. The emailed message may have been disregarded as junk mail and deleted without knowledge of the content of the message, thus decreasing the number of responses.

### **CONCLUSIONS**

The results of our study show that, while the satisfaction with the services provided by our athletic training program is generally good, there are still areas in which improvement is needed. Rehabilitation of injuries was shown to be a weak point in our program. Since what the ATs are learning within their coursework directly affects their performances in the athletic training room and the services they provide, a curriculum change may be beneficial. If the rehabilitation class is taken earlier, may help ATs accumulate more experience and confidence in the area, which will help in satisfying the athletes' needs. Results also suggest that larger athletic training facilities may be needed to aid in the examination and rehabilitation needs of the athletes. Since the UW-EC ATEP is currently in the process of filling a full time position, and the number of students is growing each year, an increase in personnel may help raise the satisfaction of low profile sports that may not be receiving the amount of coverage as high profile sports. Further studies that are similar in nature must be done at multiple Division III institutions to get a broader subject base. Studies comparing Division I, II, and III would also be useful in assuring that all levels of athletics receive quality care, despite possible budgetary differences. In order to assess improvement at the UW-EC ATEP, this study must be repeated every year or every other year to observe changes.

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## ACKNOWLEDGEMENTS

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## Tables

**Table 1. Average frequency of responses per question.**

Domain	1 and 2 Responses	4 and 5 Responses
Prevention of Injuries	5%	79%
Evaluation, Assessment, and Recognition of Injuries	8	79
First Aid and Emergency Care	6	83
Rehabilitation and Treatment of Injuries	8	68
Administration and Organization/Professional Development	8	84

**Table 2. Average responses for ATS vs. ATC**

Domain	ATS	ATC
Prevention of Injuries	3.80	4.40
Evaluation, Assessment, and Recognition of Injuries	4.13	4.37
First Aid and Emergency Care	4.00	4.40
Rehabilitation and Treatment of Injuries	3.95	3.93
Administration and Organization/Professional Development	4.30	4.38

**Table 3. Average responses of high profile vs. low profile sports**

Domain	1 and 2 Responses		4 and 5 Responses	
	Low Profile	High Profile	Low Profile	High Profile
Prevention of Injuries	4.14	5.28	66.18	80.04
Evaluation, Assessment, and Recognition of Injuries	8.29	6.13	64.94	77.09
First Aid and Emergency Care	5.87	5.07	65.27	83.53
Rehabilitation and Treatment of Injuries	8.26	4.82	42.02	70.99
Administration and Organization/Professional Development	7.83	5.41	57.74	75.94

Figures

Figure 1. Distribution of responses by sport

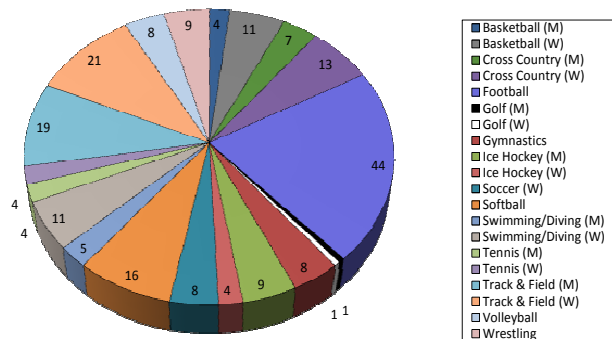
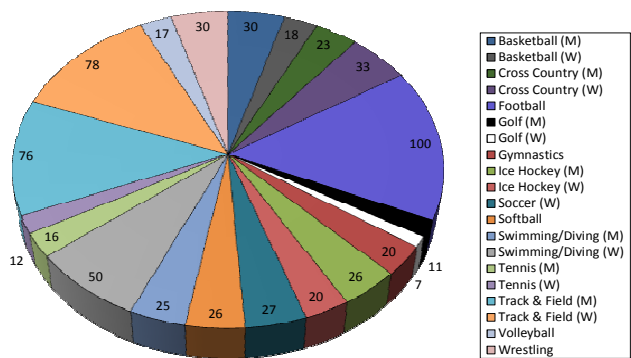
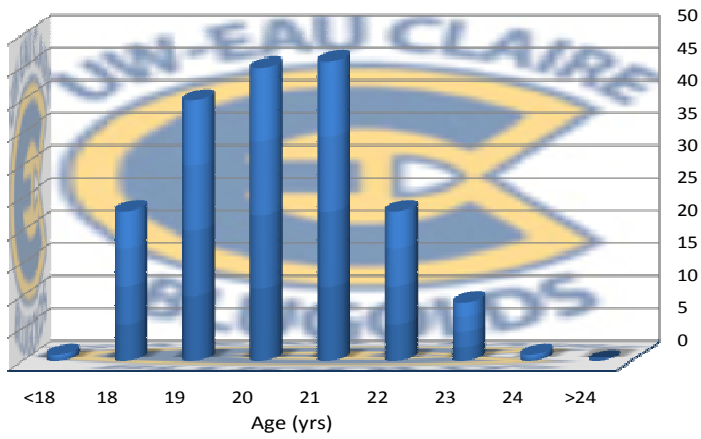


Figure 2. Number of athletes per sport

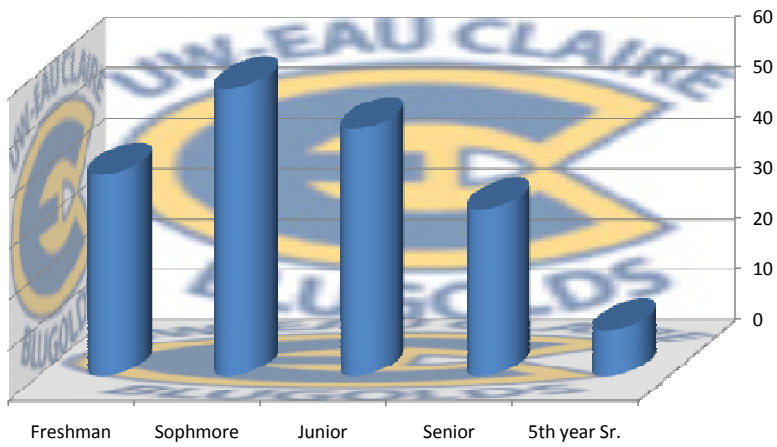


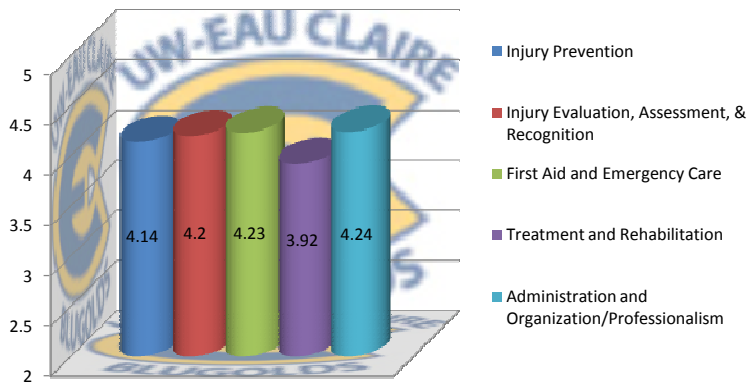


**Figure 3. Distribution of responses by age**



**Figure 4. Distribution of responses by year of eligibility**



**Figure 5. Average score by domain**

## Appendix A

You are invited to participate in a study conducted by Nathan Maresh and Mandy Peterson, which will entail completion of an online survey to assess the performance of the student and certified athletic trainers at the University of Wisconsin-Eau Claire. **If you have not used the athletic training facilities, you may disregard this survey.** This study is being conducted in partial fulfillment of the course requirements for Research Methods in Kinesiology, KINS 474, taught by Dr. Lance Dalleck, at the University of Wisconsin-Eau Claire and we will be accepting responses until **November 25<sup>th</sup>**. This course is in compliance with the course certification requirements of the University Institutional Review Board for the Protection of Human Subjects. **By completing the survey you are giving your consent to participate in this study.** Data will be coded to maintain confidentiality. Your name will not appear on any form. No data will be personally identified with you. Participation is completely voluntary, and you may elect to not complete the survey without adverse consequences. There are no risks beyond the inconvenience of time (approximately 10-minutes).

If at any time you have questions about the study, you may contact:

Faculty Advisor:

Department:

University:

City, State, Zip:

Telephone:

E-mail:

If you have questions or concerns about the treatment of participants in this study you may call or write:

Dr. William Frankenberger, Chair  
 Institutional Review Board for the Protection of Human Subjects  
 173 Human Sciences and Services Building  
 University of Wisconsin-Eau Claire  
 Eau Claire, WI 54702-4004

Telephone: (715) 836-5604

Thank you for your consideration of participating in this study.

## **Appendix B**

### **DEMOGRAPHICS**

1. What sport team are you a participant of here at the university?
  - a. Basketball (M)
  - b. Basketball (W)
  - c. Cross Country (M)
  - d. Cross Country (W)
  - e. Football
  - f. Golf (M)
  - g. Golf (W)
  - h. Gymnastics
  - i. Ice Hockey (M)
  - j. Ice Hockey (W)
  - k. Soccer (W)
  - l. Softball
  - m. Swimming and Diving (M)
  - n. Swimming and Diving (W)
  - o. Tennis (M)
  - p. Tennis (W)
  - q. Track and Field (M)
  - r. Track and Field (W)
  - s. Volleyball
  - t. Wrestling
  
2. Gender
  - a. Male
  - b. Female
  
3. Age
  - a. Under 18
  - b. 18
  - c. 19
  - d. 20
  - e. 21
  - f. 22
  - g. 23
  - h. 24
  - i. Over 24

4. How often do you use the athletic training facilities?
  - a. Rarely
  - b. Sometimes
  - c. Often
  - d. Frequently
  - e. Daily
5. Current year of eligibility
  - a. Freshman
  - b. Sophomore
  - c. Junior
  - d. Senior
  - e. 5<sup>th</sup> Year Senior
6. Which athletic training facilities have you used?
  - a. McPhee-Olson Athletic Training Room
  - b. Zorn (Basketball) Athletic Training Room
  - c. Hobbs (Hockey) Athletic Training Room
  - d. Carson/Gelein (Football/Softball) Athletic Training Room

#### PREVENTION OF INJURIES

7. I trust the athletic trainers, certified and students, with their abilities to prevent further injury (i.e. taping, bracing, padding, etc)
 

ATS: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

ATC: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree
8. The University of Wisconsin-Eau Claire athletic training program has the tools necessary to accommodate my injury prevention needs.
 

Taping: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

Bracing: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

Padding: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

#### INJURY EVALUATION, ASSESSMENT, RECOGNITION

9. I trust the athletic training, certified and students, with their knowledge of injuries.
 

ATS: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

ATC: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree
10. I feel that my injuries were explained to me clearly.
 

ATS: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

ATC: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree
11. I feel comfortable having an injury evaluated by an athletic trainer, certified or student, of the same sex.
 

ATS: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

ATC: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree
12. I feel comfortable having an injury evaluated by an athletic trainer, certified or student, of the opposite sex.
 

ATS: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

ATC: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

### FIRST AID AND EMERGENCY CARE

13. I trust the athletic trainers, certified and students, with their emergency care and first aid abilities.

ATS: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

ATC: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

14. The University of Wisconsin-Eau Claire athletic training program has the tools necessary to accommodate my first aid and emergency needs.

1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

### TREATMENT AND REHABILITATION OF INJURIES

15. I have experienced an injury while participating here at UWEC.

- a. Yes
- b. No

16. Have you missed a period of practices/games due to your injury?

- a. None
- b. <1 week
- c. 1-3 weeks
- d. 1-2 months
- e. 2-3 months
- f. >3 months

17. Rate your experiences with your treatment/rehabilitation of injuries.

1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

- a. I feel that I returned from injury without any strength deficits.
- b. I feel that I returned from injury at an appropriate conditioning level for my sport.
- c. I felt confident in my injured body part when I returned to play.
- d. I feel that I returned to play at an appropriate length of time for my injury.
- e. I feel that I developed a good rapport with the athletic training students during my rehabilitation.
- f. I feel that I developed a good rapport with the certified athletic trainers during my rehabilitation.
- g. I feel that the rehabilitation process and expectations were explained to me clearly by the certified athletic trainers.
- h. The athletic training facilities have adequate equipment to meet my rehabilitation needs.

18. Rate your experience with therapeutic modalities (electric stimulation, ultrasound, diathermy, iontophoresis, etc.) treatments.

1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

- a. I feel confident that the athletic training students correctly use these modalities to treat my injuries.
- b. I feel confident that the certified athletic trainers correctly use these modalities to treat my injuries.
- c. When using a therapeutic modality for the first time the athletic training student clearly explains what I can expect to feel with the treatment.
- d. When using a therapeutic modality for the first time the certified athletic trainers clearly explains what I can expect to feel with the treatment.

### ADMINISTRATION AND ORGANIZATION/PROFESSIONALISM

19. I feel that my injury and personal information is kept confidential from outside parties.

1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

20. I am always helped in a timely manner.

1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

21. Generally, the athletic training room is kept neat and organized.

1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

22. The athletic training room is a suitable size for the amount of athletes being treated in a given day.

1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

23. The certified and student athletic trainers are sincere in their attitudes towards me.

ATS: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

ATC: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

24. I feel comfortable approaching the athletic trainers, certified and students, with my health concerns.

ATS: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

ATC: 1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

25. I feel that the athletic trainers, certified and students, are professional.

1=Strongly disagree, 2=Disagree, 3=Indifferent or N/A, 4=Agree, 5=Strongly Agree

a. The ATS always present themselves in a professional manner.

b. The ATC always present themselves in a professional manner.

c. The ATS always act in a professional manner.

d. The ATC always act in a professional manner.

## Appendix C

<b>7. I trust the athletic trainers, certified and students, with their abilities to prevent further injury (i.e. taping, bracing, padding, etc.).</b>							
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>Response Total</b>	<b>Response Average</b>
ATS	3% (5)	6% (10)	23% (41)	44% (77)	25% (44)	<b>177</b>	<b>3.8</b>
ATC	3% (5)	1% (2)	8% (13)	30% (51)	58% (100)	<b>171</b>	<b>4.4</b>
<b>8. The University of Wisconsin-Eau Claire athletic training program has the tools necessary to accommodate my injury prevention needs.</b>							
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>Response Total</b>	<b>Response Average</b>
Taping	2% (4)	0% (0)	12% (21)	27% (48)	59% (105)	<b>178</b>	<b>4.4</b>
Bracing	2% (4)	4% (7)	21% (36)	33% (57)	40% (69)	<b>173</b>	<b>4</b>
Padding	3% (5)	1% (2)	18% (32)	34% (59)	43% (75)	<b>173</b>	<b>4.1</b>
<b>9. I trust the athletic training, certified and students, with their knowledge of injuries.</b>							
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>Response Total</b>	<b>Response Average</b>
ATS	5% (8)	9% (15)	21% (35)	47% (79)	19% (32)	<b>169</b>	<b>3.7</b>
ATC	3% (5)	5% (8)	12% (20)	29% (48)	51% (85)	<b>166</b>	<b>4.2</b>
<b>10. I feel that my injuries were explained to me clearly.</b>							
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>Response Total</b>	<b>Response Average</b>
Explained clearly	4% (6)	8% (14)	17% (29)	40% (68)	31% (52)	<b>169</b>	<b>3.9</b>
<b>11. I feel comfortable having an injury evaluated by an athletic trainer, certified or student, of the same sex.</b>							
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>Response Total</b>	<b>Response Average</b>
ATS	3% (5)	2% (4)	12% (20)	21% (36)	62% (104)	<b>169</b>	<b>4.4</b>
ATC	3% (5)	1% (2)	10% (16)	18% (30)	68% (114)	<b>167</b>	<b>4.5</b>
<b>12. I feel comfortable having an injury evaluated by an athletic trainer, certified or student, of the opposite sex.</b>							
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>Response Total</b>	<b>Response Average</b>
ATS	3% (5)	3% (5)	12% (21)	23% (39)	59% (99)	<b>169</b>	<b>4.3</b>
ATC	3% (5)	1% (2)	8% (14)	23% (39)	64% (107)	<b>167</b>	<b>4.4</b>

<b>13. I trust the athletic trainers, certified and students, with their emergency care and first aid abilities.</b>							
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>Response Total</b>	<b>Response Average</b>
ATS	3% (5)	6% (10)	12% (20)	43% (73)	36% (60)	<b>168</b>	<b>4</b>
ATC	3% (5)	2% (4)	8% (14)	27% (45)	60% (100)	<b>168</b>	<b>4.4</b>
<b>14. The University of Wisconsin-Eau Claire athletic training program has the tools necessary to accommodate my first aid and emergency needs.</b>							
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>Response Total</b>	<b>Response Average</b>
	2% (3)	2% (4)	12% (21)	31% (52)	52% (88)	<b>168</b>	<b>4.3</b>
<b>17. Rate your experiences with your treatment/rehabilitation of injuries.</b>							
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>Response Total</b>	<b>Response Average</b>
I feel that I returned from injury without any strength deficits.	2% (3)	11% (18)	24% (38)	36% (57)	27% (42)	<b>158</b>	<b>3.7</b>
I feel that I returned from injury at an appropriate conditioning level for my sport.	1% (1)	10% (16)	22% (35)	37% (58)	30% (47)	<b>157</b>	<b>3.9</b>
I felt confident in my injured body part when I returned to play.	1% (1)	12% (18)	24% (37)	33% (51)	30% (46)	<b>153</b>	<b>3.8</b>
I feel that I returned to play at an appropriate length of time for my injury.	3% (5)	5% (7)	21% (32)	34% (53)	37% (57)	<b>154</b>	<b>4</b>
I feel that I developed a good rapport with the athletic training students during my rehabilitation.	4% (6)	3% (4)	19% (30)	32% (49)	43% (66)	<b>155</b>	<b>4.1</b>
I feel that I developed a good rapport with the certified athletic trainers during my rehabilitation.	4% (6)	9% (14)	17% (27)	31% (48)	39% (60)	<b>155</b>	<b>3.9</b>
I feel that the rehabilitation process and expectations were explained to my clearly by the athletic training students.	4% (6)	8% (13)	17% (27)	37% (58)	33% (51)	<b>155</b>	<b>3.9</b>
I feel that the rehabilitation process and expectations were explained to my clearly by the certified athletic trainers.	4% (6)	6% (9)	19% (30)	35% (54)	36% (56)	<b>155</b>	<b>3.9</b>

The athletic training facilities have adequate equipment to meet my rehabilitation needs.	3% (4)	2% (3)	16% (25)	39% (60)	41% (63)	155	4.1
<b>18. Rate your experience with therapeutic modalities (electric stimulation, ultrasound, diathermy, iontophoresis, etc.) treatments.</b>							
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>Response Total</b>	<b>Response Average</b>
I feel confident that the athletic training students correctly use these modalities to treat my injuries.	1% (1)	3% (5)	33% (52)	28% (44)	35% (56)	158	3.9
I feel confident that the certified athletic trainers correctly use these modalities to treat my injuries.	1% (1)	3% (4)	33% (52)	23% (36)	42% (66)	159	4
When using a therapeutic modality for the first time the athletic training student clearly explains what I can expect to feel with the treatment.	1% (2)	3% (4)	36% (57)	25% (40)	35% (55)	158	3.9
When using a therapeutic modality for the first time the certified athletic trainers clearly explains what I can expect to feel with the treatment.	1% (2)	1% (2)	36% (56)	26% (41)	35% (55)	156	3.9
<b>19. I feel that my injury and personal information is kept confidential from outside parties.</b>							
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>Response Total</b>	<b>Response Average</b>
Confidentiality	0% (0)	3% (4)	5% (8)	34% (51)	58% (87)	150	4.5
<b>20. I am always helped in a timely manner.</b>							
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>Response Total</b>	<b>Response Average</b>
----->	3% (5)	11% (17)	13% (20)	39% (59)	33% (49)	150	3.9
<b>21. Generally, the athletic training room is kept neat and organized.</b>							
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>Response Total</b>	<b>Response Average</b>
Organized	1% (1)	3% (4)	6% (9)	36% (54)	55% (82)	150	4.4
<b>22. The athletic training room is a suitable size for the amount of athletes being treated in a given day.</b>							
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>Response Total</b>	<b>Response Average</b>
Acceptable size	5% (8)	25% (37)	14% (21)	40% (60)	16% (24)	150	3.4
<b>23. The certified and student athletic trainers are sincere in their attitudes towards me.</b>							
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>Response Total</b>	<b>Response Average</b>
ATS	3% (4)	3% (5)	6% (9)	30% (44)	58% (86)	148	4.4
ATC	2% (3)	7% (10)	6% (9)	31% (46)	54% (79)	147	4.3
<b>24. I feel comfortable approaching the athletic trainers, certified and students, with my health concerns.</b>							



	1	2	3	4	5	Response Total	Response Average
ATS	3% (4)	7% (11)	8% (12)	28% (42)	54% (80)	149	4.2
ATC	3% (5)	6% (9)	6% (9)	32% (48)	52% (77)	148	4.2
<b>25. I feel that the athletic trainers, certified and students, are professional.</b>							
	1	2	3	4	5	Response Total	Response Average
The ATS always present themselves in a professional manner.	1% (2)	4% (6)	7% (11)	36% (54)	51% (77)	150	4.3
The ATC always present themselves in a professional manner.	1% (2)	0% (0)	7% (11)	29% (44)	62% (93)	150	4.5
The ATS always act in a professional manner.	1% (2)	3% (5)	10% (15)	34% (50)	52% (77)	149	4.3
The ATC always act in a professional manner.	1% (2)	0% (0)	7% (10)	32% (48)	60% (90)	150	4.5

### Disclaimer

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