Northern Michigan University

MS in Athletic Training

Plan of Study (22-23)

Name: _____ NMUIN _____

Phone: _____ Semester Admitted _____

Email: _____ Current Date: _____

Course ID	Course Title	Semester	Credits	Grade	Substitutions
Required Ccourses					
ES 422	Sports Biomechanics (3)				
ATR 501	Pathology & Pharmacology (4)				
ATR 510	Healthcare Admin and Prof Behaviors (3)				
ATR 520	Orthopedic Assessment I (4)				
ATR 521	Orthopedic Assessment II (4)				
ATR 541	Principles of Athletic Training (3)				
ATR 542	Orthopedic Taping and Bracing (2)				
ATR 550	Advanced Manual Therapies (3)				
ATR 560	Therapeutic Exercise (4)				
ATR 572	Internship in Athletic Training (8)				
ATR 575	Research Methods in AT (3)				
ATR 580	Therapeutics Modalities (3)				
ATR 585	Evidence-Based Practice (3)				
ATR 590	AT Graduate Seminar and Capstone (3)				
ATR 591A	Clinical Skills in Athletic Training (2)				
ATR 591B	Clinical Skills in AT II (2)				
ATR 592A	Clinical Experience in AT I (3)				
ATR 592B	Clinical Experience in AT II (3)				
ATR 592C	Clinical Experience in AT III (3)				
	Total Credits (63)				

I recommend that this program of study be approved. ( )

Graduate Program Director _____ Date _____ Student _____ Date _____

Department Head _____ Date _____ Dean of Graduate Studies _____ Date _____

Rev 03/23