Chapter 2: THE ATHLETIC HEALTH CARE TEAM

- Effective delivery of health care to sports participants is best achieved through a team approach. Team includes at least the coach, team physician, and a BOC-certified athletic trainer. The athletic trainer can be on-campus daily and make decisions regarding injury severity, medical referral, and return to play. When an athletic trainer is unavailable, coaches who are trained in first aid and CPR should offer basic first aid and life-support services.

- Physician, athletic trainer, and coaching staff should coordinate efforts regarding injury prevention. The team should also be involved in pre-participation health screening; development and implementation of an emergency plan; medical supervision; injury recognition, treatment, and rehabilitation; record keeping; and education programs.

I. Sports Medicine.

A. **Sports medicine** is defined as ________________________________ (Slide 2).

   1. Sports medicine practitioners include: ________________________________ (Slide 2).

B. Sports medicine services for professional athletes typically include conducting preseason physical exams; proper skill instruction; conditioning programs; nutrition education and dietary counseling; preventive taping, strapping, and bracing; and acute injury care, referral, and rehabilitation.

   1. Interscholastic athletes typically have fewer services available, but usually include preseason physical evaluation/examination. A growing number of schools employ a BOC-certified athletic trainer. The NATA publishes *Appropriate Medical Care for Secondary School-Aged Athletes—Consensus Statement* that outlines essential components and members of the team.

C. In the past, an **orthopedic surgeon** provided health care for professional and college athletes. Current trends indicate that more “primary care” physicians will become providers of sports care medicine. Physicians can receive specialized training by entering sports medicine fellowships that last 1 to 2 years and can lead to the credential, Certificate of Added Qualifications in Sports Medicine (CAQ).

II. Key Members of the Team. ________________________________ (Slide 3).

A. Coaches in public school settings should receive training in

   a. ________________________________ (Slide 4)
   b. ________________________________ (Slide 4)
   c. ________________________________ (Slide 4)
   d. ________________________________ (Slide 4)
   e. ________________________________ (Slide 4)
   f. ________________________________ (Slide 4)

B. **Team physicians** are ________________________________ (Slide 6). The duties of the team physician are listed on page 26 under “Medical Management of the Athlete” and “Administrative and Logistic Duties.” (Coordinate preparticipation screening, examination, and evaluation, manage injuries on the field, coordinate rehabilitation and return to participation, provide for proper documentation and medical record keeping, develop a chain of command, address equipment and supply issues, provide for proper event coverage, assess environmental concerns and playing conditions). Physicians may be willing to volunteer as team physicians.
C. A BOC-certified athletic trainer is an ________________________________ (Slide 8).

1. Athletic trainers provide services in the following areas:
   a. ____________________________________________________________ (Slide 8)
   b. ____________________________________________________________ (Slide 8)
   c. ____________________________________________________________ (Slide 8)
   d. ____________________________________________________________ (Slide 8)
   e. ____________________________________________________________ (Slide 8)

D. In the United States, the NATA is the governing body for the profession of athletic training. BOC certification is granted upon qualifying for and successfully completing the certification examination that is now offered via a national network of computerized testing centers.

   1. To qualify, one must complete an educational program that is accredited by the Commission on Accreditation of Athletic Training Education (CAATE). A list of core-subject matter areas in CAATE-accredited curriculums is shown on page 27.

III. Requirements for Application for the BOC Certification Examination. When they apply to take the certification exam, students must meet the criteria listed on page 27. To remain certified, an athletic trainer is required to earn continuing education credits and report these to BOC every 2 years.

IV. Professional Settings for the Practice of Athletic Training. Since 1980, there has been a 300% increase in the member of registered sports medicine clinics in the United States. These centers provide services such as fitness evaluation and exercise prescription, lifestyle counseling, and evaluation and treatment of injuries.

   A. In addition to clinics, many hospitals provide sports medicine health care as part of outpatient services. A few corporations also provide on-site health and fitness programs that offer professional opportunities for athletic trainers. Professional sports teams also provide jobs for athletic trainers.

   B. The Secondary School Setting. To reduce costs, schools can hire teachers who are also certified athletic trainers. A recent study found that the national average annual salary for high school athletic trainers was approximately $43,884.

   1. A certified athletic trainer on staff can reduce the school’s legal vulnerability for claims relating to sports injuries. Additionally, the trainer can teach classes such as basic injury care, first aid and CPR, nutrition, and physical conditioning.

   C. Sports Medicine Delivery. NATA has a placement service for certified athletic trainers. Another option for locating qualified persons is to contact universities that offer CAATE-approved curriculums in athletic training for information about recent graduates from the programs.