

Role of athletic trainers in healthcare

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What Is an Athletic Trainer?

- Athletic Trainers (ATs) are healthcare professionals who render service or treatment, under the direction of or in collaboration with a physician, in accordance with their education and training and the states' statutes, rules and regulations. As a part of the healthcare team, services provided by ATs include injury and illness prevention, wellness promotion and education, emergent care, examination and clinical diagnosis, therapeutic intervention, and rehabilitation of injuries and medical conditions. *Athletic training is recognized by the [American Medical Association \(AMA\)](#) as a healthcare profession.

Scope of Practice

NC Statutes: Article 34

Definition

§ 90-523 Athletic trainer. – A person who, under a written protocol with a physician licensed under Article 1 of Chapter 90 of the General Statutes and filed with the North Carolina Medical Board, carries out the practice of care, prevention, and rehabilitation of injuries incurred by athletes, and who, in carrying out these functions, may use physical modalities, including heat, light, sound, cold, electricity, or mechanical devices related to rehabilitation and treatment. A committee composed of two members of the North Carolina Medical Board and two members of the North Carolina Board of Athletic Trainer Examiners shall jointly define by rule the content, format, and minimum requirements for the written protocol required by this subdivision. The members shall be selected by their respective boards. The decision of this committee shall be binding on both Boards unless changed by mutual agreement of both Boards.

Licensure

§ 90-527. License required; exemptions from license requirement. (a) On or after January 1, 1998, no person shall practice or offer to practice as an athletic trainer, perform activities of an athletic trainer, or use any card, title, or abbreviation to indicate that the person is an athletic trainer unless that person is currently licensed as provided by this Article.

Regulation

- Currently, 49 states and the District of Columbia regulate the practice of athletic training. Individuals must be legally recognized by the appropriate state regulatory agency prior to practicing athletic training. The BOC exam is recognized by all Athletic Trainer state regulatory agencies to meet their exam requirement. Compliance with state regulatory requirements is mandatory and the only avenue to legal athletic training practice.

Educational Requirements

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- Professional training education uses a competency-based approach in both the classroom and clinical settings. Using a medical-based education model, athletic training students are educated to provide comprehensive patient care in five domains of clinical practice: prevention; clinical evaluation and diagnosis; immediate and emergency care; treatment and rehabilitation; and organization and professional health and well-being. The educational requirements for CAATE-accredited athletic training education programs include acquisition of knowledge, skills and clinical abilities along with a broad scope of foundational behaviors of professional practice. Students complete an extensive clinical learning requirement that is embodied in the clinical integration proficiencies (professional, practice oriented outcomes) as identified in the [Athletic Training Education Competencies](#).

Students must receive formal instruction in the following specific subject matter areas identified in the Competencies:

- Evidence-based practice
- Prevention and health promotion
- Clinical examination and diagnosis
- Acute care of injury and illness
- Therapeutic interventions
- Psychosocial strategies and referral
- Health care administration
- Professional development and responsibility

Domains

- Injury/Illness Prevention and Wellness Promotion
- Examination, Assessment and Diagnosis
- Immediate and Emergency Care
- Therapeutic intervention
- Organizational and Professional Health and Well Being

Evidence Based Position Statements

<https://www.nata.org/news-publications/pressroom/statements/position>

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- [Prevention of Anterior Cruciate Ligament \(ACL\) Injury](#) (pdf) (February 2018)
 - [Fluid Replacement for the Physically Active](#) (pdf) (October 2017)
 - [Management of Acute Skin Trauma](#) (pdf) (December 2016)
 - [Preventing and Managing Sport-Related Dental and Oral Injuries](#) (pdf) (October 2016)
 - [Exertional Heat Illnesses](#) (September 2015)
 - [Management of Sport Concussion](#) (pdf) (March 2014)
 - [Pre-participation Physical Examinations and Disqualifying Conditions](#) (pdf) (February 2014)
 - [Conservative Management and Prevention of Ankle Sprains in Athletes](#) (pdf)
 - [Lightning Safety for Athletics and Recreation](#) (pdf) (March 2013)
 - [Evaluation of Dietary Supplements for Performance Nutrition](#) (pdf) (February 2013)
 - [Anabolic-Androgenic Steroids](#) (pdf) (Sept. 2012)
 - [Preventing Sudden Death in Sports](#) (pdf) (Feb. 2012)
 - [Heat Illness Treatment Authorization Form](#) (pdf)
 - [National Athletic Trainers' Association Position Statement: Safe Weight Loss and Maintenance Practices in Sport and Exercise](#) (pdf) (June 2011)
 - [Prevention of Pediatric Overuse Injuries](#) (pdf) (April 2011)
 - [Preventing, Detecting, and Managing Disordered Eating in Athletes](#) (pdf) (Feb. 2008)
 - [Management of the Athlete with Type 1 Diabetes Mellitus](#) (pdf) (Dec. 2007)
 - [Management of sport-related concussion](#) (pdf) (Sept. 2004) |
 - [Management of asthma in athletes](#) (pdf) (Sept. 2005)
 - [Head down contact and spearing in tackle football](#) (pdf) (March 2004)
 - [Heads Up video](#)
 - [Exertional heat illnesses](#) (pdf) (Sept. 2002)
 - [Emergency planning in athletics](#) (pdf) (March 2002)
 - [Environmental Cold Injuries](#) (pdf) (Nov. 2008)
 - [Acute management of the cervical spine-injured athlete](#) (pdf) (May 2009)

Who we work with

- Athletic trainers collaborate with multiple healthcare providers to help deliver the best care. In most instances they are the primary referral point due to daily interaction with athlete and level of knowledge
 - Team Physicians, Physician Specialist (Orthopedist, cardiologist, neurologist, etc), Psychologist, Dietitians, Physical Therapist, Massage Therapists, Strength and Conditioning Specialists, Sport Scientist,
 - One injury can require the coordination of all of these providers (ie. ACL)

How do we deliver care?

- Only healthcare profession that is preventative, on-site for immediate care of injuries and follows patient through entire recovery
- Many collegiate athletic trainers have a set population (ie teams or groups) provide on field coverage, and off field healthcare
 - Smaller universities tend to have more cross coverage care
- Student athletes tend to have open access to their athletic trainers depending on setting. Many settings have a walk in model instead of appointment based or a combination of both
 - This type of coverage model can lead to long hours and high patient volume.
- Athletic trainers tend to be front line in the identification of general medical issues, mental health concerns, supplement and substance abuse.

How can we help in policy making?

- Knowledge of the student athlete experience and administrative needs of the university system
- Athletic trainers are front line in the implementation, delivery and monitoring of regulations.
- Familiar with policy and procedures and evidence based medical practice

Take home points

- Athletic trainers are specialized healthcare providers that work closely with student athletes and the active population
- Athletic trainers are strong advocates for student athlete care and wellness
- Athletic trainers provide care for a wide variety of injuries, illnesses and dysfunction in a variety of settings and healthcare models

How People View Athletic Trainers

What people think we do

Taping Ankles
Handing out Water
Standing on Sidelines

What we actually do

Injury Evaluation
Injury Screening
Injury Prevention
Stretching
Taping
Injury Education
Rehabilitation
Counseling
Moral Support
Encouragement
Performance Enhancement
Reassurance
Gatekeeping
Optimism
Having 30 minutes to clear 50 athletes
Care
Listen
Provide Trust
Self Sacrifice
Provide a safe haven
Be a mentor/preceptor
Be a lifeline
Be a jack of all trades
Equipment manager
Hydration Specialist
Protection

Contact Information



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