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## STANDARD PROCEDURES FOR INJURY or ILLNESS for Licensed Athletic Trainer(s)

- 1. Immediate Evaluation of Injury or Illness of ALL student-athletes.
  - A. Rule out head and neck injury:
    - 1. Ambulance transport if necessary for loss of consciousness, severe or worsening concussive symptoms, or suspected neck injury.
    - 2. Athlete must be referred to a licensed healthcare professional if in a stable condition.
  - B. Rule out use of Epi-pens for severe allergic reactions:
    - 1. If administered, athlete must be transported or treated as directed by individual management plan.
  - C. Rule out a Sudden Cardiac Arrest event:
    - 1. Immediate referral if athlete is in stable condition. If unstable, immediate ambulance transport.
  - D. Provide Emergency First Aid as needed as per Emergency Action Plan.
- 2. Evaluation of an Injury or Illness for ALL student-athletes.
  - A. History: Mechanism of injury
  - B. Inspection/Observation- check for swelling, discoloration, deformities
  - C. Palpation- pinpoint tenderness
  - D. Special testing
  - E. R.O.M- check range of motion
- 3. Immediate Treatment of an Orthopedic Injury for ALL student-athletes.
  - A. PRICE's (Protection, Rest, Ice, Compression, Elevation)
  - B. Record injury or illness assessments
  - C. Referral for further medical treatment as needed
- 4. Notify Parent(s) or Guardian(s) of the extent of the Injury or Illness.
- 5. Immediate Follow-up Treatment (next 24-48 hours).
  - A. Re-evaluation of injury or illness status
  - B. Monitor signs, symptoms, orthopedic screening results, head injury management
  - C. Seek further medical treatment (optional)
- 6. Post Injury Care.
  - A. Treatments including modalities as indicated.
  - B. Rehabilitation Program for orthopedic injuries:
    - 1. Short-term goals: protection, decrease swelling, increase range of motion, etc.
    - 2. Long-term goals: 90% strength and full pain-free range of motion with functioning testing as
    - determined by the school medical director's designee(s).
  - C. Supportive techniques:
    - 1. Taping, Bracing, pad fabrications, etc as determined by school medical director and/or designee(s).
- 7. Functional Testing.
  - A. Determine the level of activity for returning to participation:
    - 1. Out, limited, or full participation as determined by the attending physician and/or the school medical director's designee(s).
  - B. 5 Phase Return to Participation program for concussions: If required by a licensed healthcare professional trained in the evaluation and management of concussions.
- 8. Return to Participation.
  - A. Continue rehabilitation until long-term goals are met as determined by the school medical director's designee(s).
  - B. Full participation for Orthopedic injuries if 90% strength and full pain-free ROM with functional testing as determined by the school medical director and/or designee(s).
  - C. Concussions: release from a licensed healthcare provider trained in the evaluation and management of concussions. Completion of a RTP program, if designated by above healthcare provider.
  - D. Release from licensed medical professional, school medical director, and/or designee(s).