**Crisp County High School Athletic Training Operating Protocol between Certified Athletic Trainers and Volunteer Team Physician**

This protocol concerns the following Certified Athletic Trainers and volunteer team physician:

I.

A. J.P. Hamilton, ATC, LAT – Athletic Trainer License# AT002286

B. Dr. Domenic Scalamogna, MD – Orthopedic Surgeon License# 069632

C. Dr. Lester Littell, MD- Orthopedic Surgeon License#AL63877

II. All injuries will be recorded on a daily treatment log by a Certified Athletic Trainer. When deemed necessary for a student athlete to seek a physician an injury report will also be filled out by the Certified Athletic Trainer. When a student athlete seeks the medical attention from a physician a signed medical script stating clearance to participate in activity must be given to the Certified Athletic Trainer. In case of an emergency, the athlete will be taken to the emergency room and referred to a physician the next day.

III. This protocol is only in effect for the athletes participating in interscholastic sports at Crisp County High School.

IV. The Certified Athletic Trainer (ATC) employed by Crisp Regional Health Services will evaluate all injuries sustained by any student athlete. All evaluations and treatments will be performed within the scope of practice for Certified Athletic Trainers as defined by the NATA and the State of Georgia. Any injury that meets the criteria that is outlined in this protocol shall be referred to a licensed physician for diagnosis. The consulting physician will then determine the appropriate plan of care.

V. In accordance with Sections 43-5-7 and 43-5-8 of the Georgia Administrative Code for Athletic Trainers, a Licensed, Certified Athletic Trainer shall apply the following principals, methods, and procedures within their scope of practice:

A. Injury Prevention

B. Injury Recognition and Evaluation

C. Basic First Aid

D. Emergency Care

E. Injury Management/Treatment and Disposition

F. Rehabilitation through the use of safe and appropriate physical rehabilitation practices including those techniques and procedures following injury and recovery that restore normal functional status.

G. Conditioning

H. Performance of tests and measurements to prevent, evaluates, and monitors acute and chronic injuries.

I. Selection of preventative and supportive devices, temporary splinting, taping, bracing, protective equipment, strapping, and other immobilization devices and techniques to protect an injured structure, facilitate ambulation, and restore normal function.

J. Organization and administration of facilities within the scope of the profession.

K. Education and counseling to the public regarding the care and prevention and injury within the scope of the profession.

VI. For the treatment and rehabilitation of muscle skeletal injuries the Certified Athletic Trainer may initiate the administration of the following: (per operating protocol via physician)

A. Therapeutic Devices

B. Sports Massage for cramping or upon doctor’s prescription

C. Mechanical Devices

D. Cryotherapy (e.g. ice, cold packs, cold water immersion, spray coolants)

E. Thermotherapy (e.g. topical analgesics, moist/dry hot packs, heating pads, paraffin bath)

F. Other Therapeutic Agents (e.g. whirlpool, electrical stimulation, or ultrasound, laser therapy)

G. Application of Topical Prescription Medications (e.g. Phonophoresis or Iontophoresis only under the prescription of a licensed physician)

VII. In the following instances, athletes must be referred to the volunteer team physician or the student athlete’s family physician:

A. General Family Physician

1. All concussions deemed more severe than Grade I according to the American Academy of Neurology guidelines

2. All illnesses will be referred to family physicians

B. Orthopedic Physicians/Surgeons

1. All suspected fractures

2. All Grade III injuries (sprains, strains, contusions)

3. Any Grade II injury that causes significant function impairment

4. Any Grade I injury which does not respond to traditional training room treatments

C. Emergency Room

1. Any obvious deformity, caused by either fracture or dislocation, which will be immobilized and transported by EMS, when deemed necessary

2. All Grade III concussions with loss of consciousness greater than one minute will be transported by EMS, with full neck injury precautions. When loss of consciousness is less than one minute, means of transportation will be determined upon evaluation.

VIII. Guidelines for EMS Transport of Suspected Neck Injuries

A. Abnormal level of consciousness or progressive loss of consciousness

B. Obvious swelling or deformity of the cervical spine

C. Cervical pain or tenderness

D. Neurological signs and/or symptoms

E. Pain, stiffness, or neurological symptoms with active cervical range of motion

F. Any doubt concerning severity of injury

IX. Guidelines for Medical Referral of Head Injuries

A. Rapid loss of consciousness

B. Prolonged mental confusion (greater than 30 minutes)

C. Prolonged post-traumatic amnesia (greater than 30 minutes)

D. Increasing headache

E. Pupils that are unequal and/or unreactive to light

F. Uncoordinated and/or involuntary movement of the eyes

G. Signs indicating a possible skull fracture

H. Unusual slowing of pulse and/or blood pressure

I. Delayed onset of head injury symptoms

J. Post-concussion symptoms lasting longer than five days

X. Guidelines for Suspected Dislocations and Fractures

A. All suspicion and\or obvious dislocations and fractures will be splinted as is and referred to or transported to the emergency room for reduction, x-rays, or any further medical attention, through the most effective means indicative of the situation.

B. All dislocations and fractures will be referred to an orthopedic doctor for follow-up evaluation and treatment as soon as possible after emergency room visit per Onsite Emergency Room Physician.

**Standing Orders and Protocols Signatures**

As the designated volunteer team orthopedic physicians for Crisp County High School Athletics, I authorize the certified and licensed athletic trainers to treat student athletes in accordance with the standard procedures and protocols delineated by the National Athletic Trainers’ Association and the above established protocol. This standing order expires one year from date of signature.

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Dr. Domenic Scalamogna, MD Date

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Dr. Lester F Litell, MD Date

As the certified and licensed athletic trainers for Crisp County High School, we agree to treat student athletes in accordance with the standard procedures and protocols delineated by the National Athletic Trainers’ Association and the above established protocol. This standing order expires one year from date of signature.

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J.P. Hamilton, LAT, ATC Date