National Athletic Trainers' Association

Evolution of an Athletic Trainer

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The life and times of an Athletic Trainer have changed over the past twenty years. Traditionally, an athletic trainer worked either in a high school or college setting with an occasional placement in a physical therapy practice. Or if you were lucky enough, you could work with a professional sports team. Today, athletic trainers can be found working in a wide variety of "non-traditional" settings. Not only do athletic trainers work in hospitals, corporations, industrial settings, but have delved out into the world of NASCAR racing, NASA, rodeo, police and fire safety to name a few. Potential for employment as an athletic trainer is left only to the imagination and creative problem solving of current vocational trends and shortages. Today, I would like to talk more about my role as a "Physician Extender" working both in an orthopedic practice and hospital.

Currently, I work at Wareham Orthopedic Associates in Wareham, MA, as an orthopedic assistant. I perform a number of different functions both in the office and in the operating room. My typical work week starts in the operating room on Monday at Tobey Hospital in Wareham, MA. First case begins about 7:45 a.m. so I am at the hospital and changed into scrubs between 7:15-7:30 a.m. My responsibilities are to help position the patient on the operating room table, apply the tourniquet, beanbags, harnesses, etc. I then scrub and get gowned and gloved for the case. Once scrubbed, I prep the surgical site and assist the surgeon in draping and the final preparations for the surgery. During surgery, I assist the surgeon with the case. This involves knowledge of the surgical procedure and the appropriate instrumentation. I use various instruments and equipment to assist in the procedure ranging from radio frequency hemostasis to suturing. When the surgery is completed, I dress the wound area, apply appropriate braces, splints, casts, cooling devices, compression boots, etc. and assist the surgical team in recovery. In recovery, I instruct the patient on proper post op wound care, post op exercise protocols, proper use of durable medical equipment (braces, etc.) and cooling devices. I then see the patient 3-4 days post op in the office for wound check, dressing change and home instructions.

Following the surgery schedule at the hospital, I go to the office for the remainder of the day. Depending on the surgery schedule, I may not get to the office at all or I may be there for several hours. Surgery cases range from joint replacements (total hip, total knee, unicompartmental knee replacements, shoulder replacement) to fracture care (pinning, external fixator, rodding, plating) to reconstructions/repair (ACL, rotator cuff, CMC joint, tibial osteotomy, carpal tunnel, achilles tendon ruptures), to name a few. Many procedures are done both open or arthroscopically. All are fascinating and priceless in advancing one's knowledge of human anatomy and treatment of injuries.

Tuesday through Friday I am in the office. My hours are from 9:00 a.m. until the last patient is done for the day (anywhere from 5:00-6:30 p.m.). One day a week, Thursday, we offer later hours to accommodate patients who have difficulty coming during regular business hours. I perform a number of functions in the office serving as a physician extender. I see patients for wound care, staple/suture removal, follow up exams, home exercise programs, brace fabrication and/or fitting, orthotic fabrication, casting/splinting application and removal. I develop and maintain all educational literature and provide educational programs for athletes, coaches and community members. I serve as the purchasing agent for the practice responsible for inventory control, product selection and purchasing of medical and office supplies. In addition, I perform community out reach for Southcoast Health Systems and provide sports medicine coverage for area schools and teams. I also conduct special projects to improve office function, patient satisfaction and community relations.

Wareham Orthopedic Associates has utilized an athletic trainer in their practice for 20 years. The value an athletic trainer brings to the practice is monumental. Athletic trainers who serve as physician extenders are extremely valuable not only to physicians and hospital staff but to the patients as well. Many tasks performed by a physician during an office visit can be done by a certified athletic trainer. Such tasks include initial injury assessment, wound care, suture removal, bandage care, splinting, casting, home exercise programs, crutch, cane, brace fitting, orthotic fabrication, custom bracing, etc. Utilization of a physician extender (athletic trainer) adds value to a physician practice by allowing physicians to see more patients within a given time frame without decreasing the quality of care.

In essence, the physician extender picks up where the physician leaves off to complete the visit. The athletic trainer/physician extender is able to further educate patients about their injuries or conditions as well as entertain their questions and concerns. Patients tend to express more satisfaction with their care because of more individual attention. The physician extender has the luxury of spending more time with the patient than the physician does. Therefore, patients leave feeling their needs were attended to rather than rushed out the door. Conversely, physicians enjoy the utilization of using an athletic trainer as a physician extender because it allows them to have greater flexibility in their schedule and gives them the ability to see more patients. The utilization of a physician extender is a win-win situation. It will be a home run when reimbursement for procedures performed by athletic trainers is a national phenomenon as both the physician practice and athletic trainer/physician extender reap the benefits of an increased revenue stream.

An athletic trainer placed in the Operating Room (OR) strategically makes sense as well. The hospital staff relishes the days when the athletic trainer is there to assist in the pre-op preparations, surgical procedure, and post op follow up care. With a nursing shortage, the athletic trainer brings much needed expertise and assistance in the OR suite. Nurses look to the athletic trainer for guidance in applying post op braces, splints, casts, bandages, cooling and compression apparatuses. The athletic trainer also serves as a liaison between nurses, administrators, and physicians of various departments. For example, in this instance the athletic trainer who provides service in the OR is intricately involved and knowledgeable about all facets of the pre-op preparations, surgical procedure and post op follow up. Nurses in Surgical Day Care do not

share the same knowledge or expertise as nurses in the OR suite and vice versa. In fact, some nurses in surgical day care rarely if ever go through the double doors of the OR suite. The athletic trainer is invaluable resource to patients and hospital staff throughout the surgical experience.

As the nation's health care system continues to evolve and vocational shortages emerge, it is important for sports medicine professionals to broaden their scope of practice. The constituents of the National Athletic Trainers Association (NATA) have done an excellent job recognizing new opportunities to satisfy many of the challenges facing health care today. The physician extender model is a prime example of the NATA's vision.

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