



NATA INTERCOLLEGIATE
COUNCIL *for* SPORTS MEDICINE

Considerations for Athletic Trainers in the Collegiate Setting in the Transfer and NIL Era

With the rise of NIL, revenue sharing and professional-level earning potential, today's student athletes carry significantly higher financial value and legal exposure than in the past. Along with a rapidly increasing volume of student athletes seeking to transfer each year, it introduces additional medical, legal and documentation considerations for athletic trainers. These challenges are occurring in an already demanding environment for athletic trainers, contributing to increased workload, role strain and risk of burnout. It is placing significant added demands on an already stretched sports medicine workforce.

Points of consideration for athletic trainers:

- Athletic trainers are operating in an environment of increased scrutiny, liability and expectation for defensible medical decision-making. Examples include:
 - Lost Earnings Claims: Injuries, return-to-play decisions or alleged mismanagement may be linked to lost NIL deals or future contracts.
 - Third-Party Interests: Agents, collectives, sponsors and legal representatives may request or subpoena records.
 - Expanded Duty of Care: Courts increasingly evaluate whether medical care met documented standards—not just clinical judgment.
 - Post-Career Litigation: Medical decisions made during college may be challenged years later.
- Proactive alignment with legal, compliance and risk management teams is essential to protecting the athlete, the athletic trainer and the institution. Athletic trainers should not operate in isolation when navigating heightened liability and risk exposure.
 - Understand the structure at each institution can be different, so work in collaboration with your institution's team physicians, administration, compliance office, faculty reps and legal counsel about your limitations and burdens with the current expectations as it relates to transfers and liability.
 - Ensure documentation practices align with institutional policy and state law.
 - Confirm that appropriate consent forms are in place, current and legally sound (e.g., informed consent, assumption of risk, release of information).
 - Understand institutional expectations and state laws regarding:
 - Medical record retention
 - Information sharing with third parties (agents, collectives, family)
 - Electronic medical record (EMR) use and access
 - Defer to institutional guidance when questions arise regarding subpoenas, record requests or legal inquiries.
 - Discuss the AT's role in determining financial burden to the institution before, during and after student athlete participation.

- Clarify when student athletes start and end being the responsibility of yourself and the institution.
 - Create a procedure plan for when potential NIL deals are related to health care.
 - Work with related staff to determine when NIL deals could impact current providers relationships, reflect negatively on the student athlete's image or complicate current medical care.
- For incoming student athletes, at the minimum athletic trainers should:
 - Ensure appropriate consent and release of information are obtained for sharing records
 - Verify SCT testing, cardiac testing, etc. that was done at previous institution
 - Obtain significant medical history and perform a new pre-participation exam
 - Refer to the NATA Intercollegiate Council for Sports Medicine's [PHI Best Practices Considerations](#)
 - Instruct the new student athlete on where their medical record lives and how to access it
- The exit physical has become a critical component of risk management, continuity of care and athlete protection to support safe transition of care to future institutions or professional settings.
 - Align exit physical procedures with institutional policy and legal guidance
 - Establish a clear medical snapshot at time of departure (graduation, transfer, dismissal or early exit) to reduce disputes regarding the origin or status of injuries following departure.
 - Current injury and treatment status
 - Functional limitations or restrictions at departure
 - Outstanding referrals, imaging or follow-up recommendations
 - Athlete education regarding ongoing care needs
 - Document plan of care and student athlete understanding of risks, reporting responsibilities, participation status and post-departure coverage of costs plan
 - Remind student athlete how to obtain their medical record and that they are responsible for forwarding to their next institution.
- The increased burden to athletic trainers is another source of strain to our profession. Discuss with administration and coaches how this has affected your workload.
 - Set realistic expectations on timelines for safely and properly onboarding new student athletes.
 - Help fellow athletic trainers by equipping your departing student athletes with the ability to provide as much medical history as they can to the next institution.
- To help reduce pressures to stray from the best standards of care, you should familiarize yourself with the [NATA Code of Ethics](#) and [NCAA Medical Autonomy Best Practices](#).
 - Use [NCAA Sports Medicine Handbook](#) as guidance for policies and procedures
 - Work with your Athletics Health Care Administrator and have a plan for annual policy and procedures review
 - Refer to [NATA Best Practices for Documentation](#) for assistance with record keeping
 - Refer to [BOC standards of prof practice reference](#)
 - Reference your state practice act on any limitations you may fall under