

AT 430
Therapeutic Interventions in Injury/Illness

PATHOLOGY OF INJURIES AND ILLNESSES

Cognitive Domain

- 8 - Describes the aging process as it relates to athletes and others involved in physical activity.
- 12 - Defines tissue lesions by body system in terms of etiology, pathogenesis, pathomechanics, treatment options, and expected outcomes.
- 13 - Outlines the autoimmune and immunodeficiency responses and their associated diseases (e.g., lupus, HIV/AIDS).
- 14 - Analyzes the physiologic responses of diseases to physical activity and inactivity.
- 15 - Describes the pathology of diseases of the blood (e.g., anemia, iron deficiency, hemolysis that would impair strenuous physical activity).
- 16 - Recognizes the common warning signs and symptoms of cancer.

Affective Domain

- 2 - Recognizes that physician consultation is a moral and ethical necessity in the diagnosis and treatment of pathologic conditions.
- 3 - Accepts the moral and ethical responsibility of maintaining current knowledge of the pathologic conditions of athletes and others involved in physical activity.
- 4 - Promotes accountability for moral and ethical decision-making in the treatment of pathologic conditions.

ASSESSMENT AND EVALUATION

Cognitive Domain

- 16 - Differentiates the use of diagnostic tests (x-rays, arthrograms, MRI, CAT scan, bone scan, ultrasound, myelogram) based on their applicability in the assessment of an injury or illness when prescribed by a physician.

ACUTE CARE OF INJURIES AND ILLNESSES

Cognitive Domain

- 37 - Recognizes the signs and symptoms of toxic drug overdose.

PHARMACOLOGY

Cognitive Domain

- 1 - Recognizes the general concepts and differences in the legal regulation of non-prescription, prescription, and classified pharmaceuticals.
- 2 - Recalls and can access the laws, regulations, and procedures that govern storage, transportation, dispensation, and recording prescription and nonprescription medications (Controlled Substance Act, scheduled drug classification, and state statutes).
- 3 - Identifies the role of the Food and Drug Administration (FDA) in approving and recalling drugs.
- 4 - Identifies appropriate terminology and pharmaceutical abbreviations used in the prescription and dispensation of medications.
- 5 - Identifies the common resources used to identify indications, contraindications, precautions, and adverse reactions for prescription and nonprescription medications.
- 6 - Recalls how the concept of potency and expiration affects drug dose protocols.
- 7 - Identifies common methods used to administer medication.
- 8 - Relates the relationship of generic to brand name pharmaceuticals.
- 9 - Describes the kinetic process of absorption, distribution, metabolism, and elimination of administered medication.
- 10 - Describes how physical activity may influence a drug's therapeutic effect.
- 11 - Illustrates the general concepts of dissolution, bioavailability, and bioequivalence.
- 12 - Recognizes the general action of biotransformation in the biochemical reactions that occur during drug absorption.
- 13 - Recognizes that adverse drug reactions can be immediate (acute) or delayed (chronic).
- 14 - Describes the potential risks of co-interaction between two or more pharmaceutical agents.
- 15 - Recognizes the difference between cortical and anabolic steroids and other androgens.
- 16 - Describes the general indications, contraindications, and adverse reactions of prescription and nonprescription anti-inflammatory and antiarthritic medications (e.g., steroidal and nonsteroidal).

17 - Lists the general indications, contraindications, and adverse reactions of commonly used prescription and nonprescription analgesic medications.

18 - Lists the general indications, contraindications, and adverse reactions of prescription and nonprescription local anesthetics.

19 - Lists the general indications, contraindications, and adverse reactions of bronchodilators and other prescription and nonprescription respiratory medications as they relate to physical activity.

20 - Identifies the general indications, contraindications, and adverse reactions of prescription and nonprescription antibiotics.

21 - Identifies the general indications, contraindications, and adverse reactions of anaphylaxis medications.

22 - Identifies the general adverse reactions of gastrointestinal prescription and nonprescription medications.

23 - Lists the general indications, contraindications, and adverse reactions of beta-blockers and antihypertensives.

24 - Recalls the general indications, contraindications, and adverse reactions of prescription and nonprescription topical applications.

25 - Identifies the usage patterns, general effects, and adverse short- and long-term reactions of performance enhancing drugs.

Psychomotor Domain

1 - Employs the Physician's Desk Reference (PDR), the Drug Facts and Comparisons, or on-line services to obtain information on the medications prescribed for athletes and others involved in physical activity.

2 - Follows federal, state, and local regulations regarding storing, transporting, dispensing, and recording medications.

3 - Documents tracking of medications by name, manufacturer, amount, dosage, lot number, and expiration date.

4 - Replicates procedures for storage and inventory of medications.

5 - Reviews and adheres to a policies-and-procedures manual as it relates to medications.

6 - Replicates the procedure for using an emergency epinephrine injection to prevent anaphylaxis as per physician instruction.

7 - Replicates procedures for using an asthmatic inhaler to prevent and treat exercise-induced bronchial spasms and/or asthmatic conditions.

Affective Domain

1 - Recognizes that pharmacology applies to the immediate and ongoing care of injury and illness.

2 - Recognizes the importance of pharmacological concepts in health care.

3 - Accepts physician (or other qualified health care provider) and pharmacist consultation as a legal, moral, and ethical necessity in the prescription and dispensation of medication.

4 - Appreciates the use of clinical references such as the PDR and clinical databases to identify medications.

5 - Accepts the laws and regulations that govern the storage, transportation, and dispensation of all drugs.

6 - Supports the moral and ethical behavior of athletic trainers in dealing with the issues of drug use and abuse in sports.

7 - Accepts moral and ethical responsibility for maintaining current knowledge of the medications commonly prescribed to athletes and others involved in physical activity.

8 - Advocates moral and ethical behavior of self and colleagues in dealing with issues of a pharmacological nature.

9 - Promotes accountability for moral and ethical decision-making in pharmacological issues.

GENERAL MEDICAL CONDITIONS AND DISABILITIES

Cognitive Domain

8 - Describes the use of a peak-flow meter in the evaluation and management of respiratory conditions.

9 - Describes strategies for reducing the frequency and severity of asthma attacks.

Psychomotor Domain

2 - Manages acute asthma attacks and takes appropriate steps to reduce the frequency and severity of asthma attacks.

9 - Uses an otoscope correctly to examine the ear and nasal passages.

10 - Use and interprets urine diagnostic Chemstrips (dipsticks).

17 - Demonstrates the proper use and interpretation of a peak-flow meter (hand-held spirometer) in the assessment of asthmatic athletes and other asthmatics involved in physical activity.

NUTRITIONAL ASPECTS

Cognitive Domain

23 - Describes the signs, symptoms, and physical consequences of disordered eating.

24 - Explains the referral system for individuals with disordered eating.

Affective Domain

3 - Appreciates the long-term effects of disordered eating, bone density loss, and secondary amenorrhea on the skeletal health of the physically active.

4 - Recognizes the need for and implements proper referral for eating disorders.

PSYCHOSOCIAL INTERVENTION AND REFERRAL

Cognitive Domain

1 - Describes the current psychosocial and sociocultural issues and problems confronting athletic training and sports medicine and identifies their effects on athletes and others involved in physical activity.

5 - Provides health care information to patients, parents/guardians, athletic personnel, and others regarding the psychological and emotional well being of athletes and others involved in physical activity.

6 - Disseminates information regarding the roles and functions of various community-based health care providers (sport psychologists, counselors, social workers).

7 - Describes the accepted protocols that govern the referral of athletes and other physically active individuals to psychological, community health, or social services.

8 - Describes the theories and techniques of interpersonal and cross-cultural communication among certified athletic trainers, athletes, athletic personnel, patients, administrators, health care professionals, parents/guardians, and others.

9 - Employs the basic principles of counseling, including discussion, active listening, and resolution.

10 - Describes the various strategies that certified athletic trainers may employ to avoid and resolve conflicts among superiors, peers, and subordinates.

11 - Identifies the symptoms and clinical signs of common disordered eating (anorexia nervosa, bulimia) and the psychological and sociocultural factors associated with these disorders.

12 - Identifies the psychological issues that relate to physically active women of childbearing years.

14 - Describes commonly abused substances (e.g., alcohol, tobacco, stimulants, nutritional supplements, steroids, marijuana, and narcotics) and their impact on an individual's health and physical performance.

15 - Recognizes the signs and symptoms of drug abuse and the use of ergogenic aids and other substances.

16 - Identifies the societal influences toward substance abuse in the athletic and physically active population.

17 - Contrasts psychological and physical dependence, tolerance, and withdrawal syndromes that may be seen in individuals addicted to alcohol, prescription or nonprescription medications, and/or 'street' drugs.

18 - Describes the basic signs and symptoms of mental disorders (psychoses), emotional disorders (neuroses, depression), or personal/social conflict (family problems, academic or emotional stress, personal assault or abuse, sexual assault, sexual harassment) and the appropriate referral.

19 - Identifies contemporary personal, school, and community health service agencies, such as community-based psychological and social support services.

20 - Formulates a plan for appropriate psychological intervention and referral with all involved parties when confronted with a catastrophic event.

21 - Describes the acceptance and grieving processes that follow a catastrophic event.

23 - Defines seasonal affective disorder (SAD).

24 - Cites the potential need for psychosocial intervention and referral when dealing with populations requiring special consideration (e.g., those with exercise-induced asthma, diabetes, seizure disorders, drug allergies and interactions, or unilateral organs).

Psychomotor Domain

1 - Intervenes, when appropriate, with an individual with a suspected substance abuse problem.

3 - Uses appropriate community-based resources for psychosocial intervention.

Affective Domain

1 - Accepts the professional, ethical, and legal parameters that define the proper role of the certified athletic trainer in providing health care information, intervention, and referral.

2 - Accepts the responsibility to provide health care information, intervention, and referral consistent with the certified athletic trainer's professional training.

3 - Recognizes the certified athletic trainer's role as a liaison between the physically active, athletic personnel, health care professionals, parents/guardians, and the public.

4 - Accepts the need for appropriate interpersonal relationships between all of the parties involved with athletes and other involved in physical activity.

5 - Accepts the moral and ethical responsibility to intervene in situations of suspected or known use and/or abuse of legal and illegal drugs and chemicals.

6 - Accepts the moral and ethical responsibility to intervene in situations of mental, emotional, and/or personal/social conflict.

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