

ATHLETIC TRAINING & PUBLIC HEALTH

1. With well in excess of 100,000 sports participants, most of whom are **children and adolescents**, cared for by more than **400 licensed athletic trainers (“ATs”) in the State of Arizona**, a formal regulatory mechanism to ensure the competence and appropriate conduct of athletic training providers is critical, and in the public’s best interest.
2. ATs are on the front lines for a **variety of public health conditions** affecting athletes of all ages, including **MRSA (Methicillin-resistant Staphylococcus Aureus)**:
 - Athletes are at an increased risk for contracting MRSA for several reasons, such as skin-to-skin contact and sharing of equipment
 - More than ½ of ATs in the United States have encountered athletes with MRSA¹
 - ATs are often the first healthcare professional that athletes, especially high school athletes, will see for MRSA care
3. **Sport-related concussion and 2nd impact syndrome** are of major concern to athletes participating in sports, and ATs play a key role in prevention efforts:
 - Across the country, more than **300,000 sports-related concussions occur per year – a high school athlete has an almost 10%** chance of receiving a concussion, regardless of the sport in which he/she participates.
 - Cumulative effects can occur with 3 or more concussions and cause significant disability.
 - In soccer, girls actually have a higher rate of concussion than boys.
 - Nationally, the cumulative costs of concussive injuries are over **\$17 billion annually**.
4. Research suggests that coaches in Arizona are not well-prepared to deal with the management and first aid decisions arising from sports-related injuries, IN SPITE of having basic first aid and CPR training.^{2,3}
5. ATs play a significant role in **pre-participation physical exams and screenings** that decrease the risk of significant health consequences from participation in sports and physical activity
6. Especially in high schools, ATs play an important **“advocate” role** by:
 - Looking out for the interests of athletes;
 - Ensuring that athletes have access to the medical expertise required to properly care for their injuries, and;
 - Making sure that athletes and their parents understand the course of treatment provided for them.
7. Main stream media’s use of **the word “trainer” confuses the public**, and associates athletic trainers with the type of “trainers” (personal trainers) that have recently been linked to steroid scandals in professional sports. For this reason, Major League Baseball has recently committed to referring to athletic trainers as *certified athletic trainers* in all official communications.

REFERENCES

1. Brinsley-Rainisch, K., Gooding, A., & Sinkowitz-Cochran, R. (2007). *MRSA infections in athletics: Perceptions and practices of certified athletic trainers*. Baltimore: The 17th Annual Scientific Sessions of the Society for Healthcare Epidemiology of America.
2. Valovich McLeod TC, Schwartz CD, Bay RC. Sport-related concussion misunderstandings among youth coaches. *Clinical Journal of Sport Medicine*. 2007;17(2):140-142.
3. Valovich McLeod TC, McGaugh JW, Boquiren ML, Bay RC. Youth sports coaches do not have adequate knowledge regarding first-aid and injury prevention. *Applied Research in Coaching and Athletics Annual*. [In press]