



**ALABAMA BOARD OF ATHLETIC TRAINERS
PHYSICIAN/ATHLETIC TRAINER PROTOCOL CONSENT FORM**

Please print or type all information, except where a Signature is designated.

Athletic Trainer: _____

Team/Organization: _____

(PRINT or TYPE Physician's Name Below)

I, _____, M.D./D.O. (select one), as team physician/consulting physician, hereby authorize the above-named individual to act in my behalf during my absence. This individual shall perform activities detailed in the Licensed Athletic Trainer Protocol, approved by the Alabama Board of Athletic Trainers and the State Board of Medical Examiners. Such authority shall include the following areas:

- I – Prevention II – Recognition & Evaluation III – Management, Treatment, Disposition
IV – Rehabilitation V – Organization & Administration VI – Education & Counseling

I have reviewed the details of each area of practice contained in the following pages of this Consent Form with the above-named athletic trainer.

I understand that I, the physician, am the ultimate authority for the management, treatment, and disposition of athletic injuries. By signing this consent form, I authorize the above-named athletic trainer to assist or carry out any other instructions or procedures that I determine to be warranted or necessary in the practice of athletic training.

Physician's Information

Athletic Trainer's Information

Team/Consulting Physician's Signature

Athletic Trainer's Signature

Physician's Address

Business Address

City, State, Zip Code

City, State, Zip Code

Business Telephone Number

Business Telephone Number

Physician's NPI Number

Date

Date



ALABAMA BOARD OF ATHLETIC TRAINERS LICENSED ATHLETIC TRAINER PROTOCOL

I. PREVENTION

- A. Organization and implementation of preparticipation physical examinations/screening procedures
- B. Physical conditioning of athletes
- C. Fitting and maintenance of protective equipment
- D. Application of taping and special pads and braces
- E. Control of environmental risks
- F. Identification and correction of common risk factors and causes of athletic injuries
- G. Development and implementation of preventative maintenance rehabilitation programs

II. RECOGNITION AND EVALUATION

Conducts a thorough initial clinical evaluation of injuries and illnesses commonly sustained by the competitive athlete and formulates an impression of the injury/illness for the primary purpose of:

- A. Administering proper first aid and emergency care
- B. Making appropriate referrals to physicians for diagnosis and medical treatment (physician evaluation should occur within a 72-hour time frame from the initial athletic trainer injury encounter)

III. MANAGEMENT, TREATMENT, AND DISPOSITION

The physician is the ultimate authority for the management, treatment, and disposition of athletic injuries. Working under the direction and supervision of the physician, the licensed athletic trainer serves the following roles:

- A. Provides appropriate first aid and emergency care for acute athletic injuries/illnesses
- B. Refers injured/ill athletes for appropriate medical intervention
- C. Documents injuries and treatment progress in athlete's medical record
- D. Develops and implements a plan of care for athletic injuries under the direction and supervision of a physician

- E. Utilizes therapeutic modalities and rehabilitation techniques as approved by a physician
- F. Performs wound care, including removal of staples and sutures upon physician order
- G. Applies casts after reduction of fracture by physician; changes or removes casts upon physician order.

IV. REHABILITATION

- A. Rehabilitation of athletic injuries shall be performed under the referral of the physician
- B. Under physician direction, develops and implements comprehensive rehabilitation programs, including determination of therapeutic goals and objectives, selection of therapeutic modalities and exercise, methods of evaluating and recording rehabilitation progress, and develops criteria for progression and return to competition
- C. The licensed athletic trainer shall rehabilitate an athletic injury for no more than thirty days without re-evaluation by the physician and referral for continuation of the rehabilitation program. Preventative care after resolution of the injury is not considered rehabilitation.

V. ORGANIZATION AND ADMINISTRATION

Plans, coordinates, and supervises all administrative components of an athletic training program including those pertaining to:

- A. Health care services (physical examination and screening, first aid and emergency care, follow-up care and rehabilitation)
- B. Financial management
- C. Athletic training room management
- D. Personnel management
- E. Public relations
- F. Athletic event/venue coverage

VI. EDUCATION AND COUNSELING

- A. Provides health care information and counsels athletes, parents, and coaches on matters pertaining to the physical, psychological, and emotional health and well-being of the athlete
- B. Interprets the role of the licensed athletic trainer as a health care provider, promotes athletic training as a professional discipline, and provides instruction in athletic training/sports medicine subject matter areas.