

Ohio House Health Committee
HB 484 (Carfagna, Abrams) Athletic Training
Proponent Testimony
Tuesday, May 19, 2020

Chairman Lipps, Ranking Minority Member West and Committee members, thank you for the opportunity to testify today in support of HB 484 (Carfagna, Abrams) Athletic Training. I am Mark Merrick an Associate Professor and Director of the Athletic Training Division of the OSU College of Medicine School of Health and Rehabilitation Sciences. I am also the Past President of the Commission of Accreditation of Athletic Training Education (CAATE), which is the body that establishes the national education standards for athletic training.

For a bit of background on license athletic trainers in Ohio:

- Currently, Ohio requires a minimum of baccalaureate degree
- Must pass the national Board of Certification (BOC) exam
- State licensure exam administered by the OTPTAT Board
- Licensed ATs are required to have 25 CEUs
- Currently there are over 2,000 licensed athletic trainers in Ohio
- All regulatory oversight and disciplinary actions are determined by the OTPTAT Board

However, beginning in 2022 the national education standards by CAATE require all entry level ATs to have a master's degree. As part of the CAATE leadership that created the national standard, which has been under development since 2012. I would like to share with you the rationale, curriculum and training that athletic trainers receive in their classroom and clinical experience.

As the accrediting body of higher education curriculum, CAATE seeks to assure accreditation excellence across the AT education continuum to enhance clinical practice. We work to ensure the curriculum of our AT students prepare them for real life emergent care experiences. In 2012, the national discussion began to review the current curriculum in preparation to migrate from a bachelor's degree to a master's degree for entry level athletic trainers. The announcement was made in 2015 in preparation for the implementation of the freshman students entering in 2017 would be graduation with a master's in 2022. In Ohio, we currently have approximately 24 higher education athletic training programs.

The national education standards required by CAATE include a curriculum of knowledge and skills built around competencies in eight distinct content areas:

- Evidence-Based Practice
- Prevention and Health Promotion
- Clinical Examination and Diagnosis
- Acute Care of Injury and Illness
- Therapeutic Interventions (including Pharmacology, Therapeutic Exercise, and Therapeutic Modalities)
- Psychosocial Strategies and Referral
- Healthcare Administration
- Professional Development and Responsibility

Programs include formal instruction in basic and applied sciences including; human anatomy, human physiology, chemistry, biology, physics, statistics and research design, rehabilitation, exercise physiology, and kinesiology/biomechanics. In addition, students are required to participate in a minimum of two years of academic clinical education with a variety of different patient populations that address the continuum of care.

Clinical Examination and Diagnosis

ATs are trained to follow an evidence-based model to conduct examinations and assessments of injuries and illnesses to form relevant related diagnosis with the understanding of the injury pathology and any comorbidities of the affected individual. ATs are required to obtain a thorough patient history. Then the AT is able to provide a clinical diagnosis as it relates only to the physical injury being examined. ATs are taught to interpret signs and symptoms of injuries, illnesses, or other conditions that require referral to ensure appropriate care; and can establish plan of care.

Therapeutic Intervention and Rehabilitation

Under therapeutic intervention and rehabilitation, ATs are trained in rehabilitation and reconditioning injuries, illnesses, and general medical conditions with the goal of achieving optimal activity level based on core concepts using the applications of therapeutic exercise, modality devices, and manual techniques. Moreover, ATs are trained in the use of non-opioid pain management therapies including, but not limited to, the following:

- Manual therapy: joint mobilizations, manual muscle techniques, massage, muscle energy techniques
- Therapeutic exercise: range of motion, isometric, isotonic, isokinetic, and balance/proprioceptive exercises
- Therapeutic modalities: cryotherapy, cupping, dry needling, electrical stimulation, laser, thermotherapy, and ultrasound.

This education positions the AT as a resource to provide more non-opioid pain management, as an alternative to opioid medication and could be utilized to treat more patients in response to our current public health crisis due opioid addiction.

Prevention and Health Promotion

ATs have always been trained and are known for their expertise in prevention of injuries, which includes promoting healthy behaviors such as diet and exercise, proper sleep, stretching, hydration, etc. to minimize the risk of injury and illnesses. With more focus on wellness within health care, ATs are an underutilized resource to assist their patients, especially younger patients to adopt healthy habits early on. An example is the role ATs have played in promoting the effects of traumatic brain injuries (TBI), including physical, mental, academic and social to the community and public that they serve.

HB 484 will provide a long overdue update to the athletic trainer scope of practice act that reflects the advancement of clinical practice, training and education of athletic trainers. Thank you Chairman and member of the Committee. I am happy to answer any questions you may have on this important legislation.