Sports Medicine Department
Standard Operating Procedures

I. Detailed Job Description

Position: Certified Athletic Trainer

Statement of Position, Scope, and Responsibility:
The athletic trainer is responsible for the prevention of athletic injuries, and the maintenance of the health, well being, and recuperation and rehabilitation following injury or surgery of all student-athletes of The Haverford School. The athletic trainers report to the Director of Athletics, and under the supervision of, and in direct contact with the Team Physician, Dr. Brian Bullock, the Team Orthopedic Surgeon, Dr. David Rubenstein, and consulting Sports Medicine physician, Dr. Bradley Smith, with the aim of fielding healthy players for practices and competition. The athletic trainer will communicate with the head coaches and parents as necessary when a player is injured as to the student-athlete’s status and progress. The athletic trainer is responsible for the ordering, upkeep, and inventory control of all sports medicine modalities and supplies for use during the school year. The modalities, equipment, and supplies used in the athletic training room, as well as the general cleanliness of the athletic training room are the responsibility of the athletic trainer.

II. Event Coverage

A. Practices

All practices for the following sports must have coverage by a Certified Athletic Trainer (AT): football, soccer, water polo, basketball, wrestling, baseball, and lacrosse.

B. Games

1. All home games/meets/matches for all sports must have coverage by an AT.
2. An AT will be required to travel to all “away” varsity football games. If there is not more than one game/meet at home, one AT will travel with varsity level teams in the following sports: soccer, basketball, wrestling, baseball, and lacrosse.
3. All ice hockey games designated as “home” games, or in Haverford’s designated ice time slot will be covered either by one of the ATs or by a contracted substitute.
4. All Haverford School sponsored events and tournaments involving competition among other schools will be covered by one or both of the ATs.
III. Injury & Treatment Documentation
   A. Reportable Injuries: Any injury requiring treatment (taping, wrapping, padding, bandaging), rehabilitation, consultation with a physician, or follow-up evaluation is considered “reportable”. All reportable injuries will be documented by the addition of a record in the student’s medical file in the Magnus Health database used by the school.
   B. All treatments administered by an AT will be documented by the addition of a treatment entry in the Sports Medicine database by way of a Google form, accessed by signing in using the Athletic Training room computer.

IV. Medications
   The following medications may be administered by an AT according to standing orders provided by Dr. David Rubenstein and Dr. Bradley Smith: Tums, Chewable Pepto-Bismol, Benadryl and Epi-pen (for allergic reactions only).
   Also, any student needing emergency prescription medication including Glucose, Epipen, or an inhaler is required to bring this medication to the Health Office along with a doctor’s prescription for emergency use. Prescriptions will be kept on file with the school nurses in the school Health Office. The athletic trainers are not permitted to administer this medication without a current, unexpired physician’s prescription.

V. Continuing Education
   The athletic trainers are responsible for remaining active in professional organizations such as the National Athletic Trainers’ Association, the Eastern Athletic Trainers’ Association, or the Pennsylvania Athletic Trainers’ Society. They must maintain at least the minimum continuing education requirements, as specified by the NATA-Board of Certification to remain a Pennsylvania licensed and nationally certified athletic trainer.

VI. Head Injuries
It is the policy of The Haverford School Sports Medicine staff that a student-athlete will NOT be permitted to return to activity (practice or a game) on the same day that a concussion (of any intensity or duration) is experienced, or suspected to have taken place. If a student-athlete suffers a concussion during any athletic event – game or practice – he must be removed from the event immediately, and referred to one of the athletic trainers. As long as the student-athlete is experiencing any concussion signs and symptoms, it is advised that he NOT engage in any physical exertion, including running, weight lifting, and Physical Education classes, until directed to do so by his physician or by one of the athletic trainers. Furthermore, it is The Haverford School’s policy that a student-athlete is required to stay out of school for at least one day after the concussion occurs. In some cases, it may be necessary to make modifications to the student-athlete’s academic demands, such as allowing extra time for assignments and exams, and minimizing the amount of reading that is required. This will be determined on a case-by-case basis, under the direction of the student-athlete’s physician, and will be communicated through the student-athlete’s advisor and/or learning support center. The Haverford School athletic trainers refer student-athletes with head injuries to one of the physicians on the physician referral list (provided at time of injury, and on file in the Athletic Training Room), unless the family has a relationship with a physician who is trained in concussion management. No return-to-play decision will be considered until the athlete is completely free of concussion symptoms at rest. Upon satisfactory return to baseline on an ImPACT test (when available), the athlete will begin a graduated program of activity. This
program will begin with light jogging and progress to more intense running, to weightlifting, to non-contact sport-specific activity, and then to full activity. If, at any time, the athlete experiences symptoms, the activity is terminated for that day, and will not resume until the symptoms are absent again. For more information, consult the more comprehensive “Head Injury Policy” document, which is on file in the athletic training room, and is posted on the sports medicine page of the Haverford School website. These guidelines are in accordance with the latest consensus statement: “Consensus statement on concussion in sport from the 5th International Conference on Concussion in Sport held in Berlin, October, 2016”

VII. **Hot Weather Guidelines**

A. Guidelines for practice cancellation/modification

1. If the temperature is between 80-90 degrees and the humidity is under 70%, watch those athletes who tend toward obesity.
2. If the temperature is between 80-100 degrees and the humidity is under 70%, athletes should take a 10-minute rest every hour, and tee shirts should be changed when wet. All athletes should be under constant and careful supervision.
3. If the temperature is between 90-100 degrees and the humidity is over 70%, it would be wise to suspend practice. A shortened program conducted in shorts and tee shirts could be established.
4. If the temperature is over 100 degrees, practice should be cancelled.

B. Alternatively, hot weather conditions will also be monitored using Wet Bulb Globe Temperature reading. These guidelines are as follows:

   1. WBGT < 75°: full uniform, no alterations to activity
   2. WBGT between 75° – 76.9°: Remove helmet when not active in drill; 50 min work / 10 min rest per hour
   3. WBGT between 77° – 78.9°: Remove Helmet and shoulder pads when not active in drill; 45 min work / 15 min rest per hour
   4. WBGT between 79° – 80.9°: No Equipment 45 min work / 15 min rest per hour
   5. WBGT > 81°: NO outside practices

C. Hydration and Weight Loss guidelines

1. Hydration
   a. All teams will be given water and/or Gatorade for games, meets or matches. The coolers and bottles will be prepared and placed outside the Athletic Training Room. Athletes are encouraged to take drinks at every opportunity during games and practices. All coolers and bottles must be returned to the Athletic Training Room upon completion of the event.
   b. Pre-season Football camp: All football athletes are required to drink 2 8-oz. cups of Gatorade immediately before and after every practice session during the pre-season training camp. In addition, athletes are required to weigh-in before and after every practice session to help monitor hydration levels.

2. Weight Loss Guidelines:
   a. Football: Each athlete’s body weight will be monitored by an AT through weigh-ins before and after every practice during pre-season camp.
   b. Wrestling: The athletic training staff is certified by the National Wrestling Coaches Association to utilize a weight-management program for each
wrestler. A hydration test is performed by urine sample and light spectrometry before a body fat assessment is performed with skinfold calipers. The data is then entered into the TrackWrestling website, which will then calculate the minimum wrestling weight as well as the weight-descent plan for each wrestler. **The Haverford School Sports Medicine Department does not condone the use of rubber suits or any other gear or food supplement intended for rapid weight loss.**

c. Crew: The procedure used for wrestling will also be used for members of the crew team seeking to row in the lightweight boat. The TrackWrestling website will be used to calculate the safe minimum body weight for members of the crew team. The data for those who qualify will be entered into the PSRA website.

VIII. Prioritization of Treatments
When several athletes are waiting for treatments or other attention from the ATCs, priority will be given in the following order:
1. Students before faculty/staff
2. Athletes with games/matches before those with practices
3. Varsity, in-season athletes before all others
4. Taping/wrapping before rehabilitation treatments
5. Rehabilitation treatments before new evaluations
6. Evaluation of new injuries after everything else

IX. Lightning Policy
All decisions regarding the suspension, postponement or termination of a game, meet or contest involving a league member school will be the responsibility of the home school. As a league it is agreed that the home school’s athletic trainer and athletic director will make all lightning related decisions. The following steps are recommended to avoid a lightning hazard:
1. Host school should obtain a weather report and be aware of any potential for lightning on the day of the scheduled event.
2. All game/meet officials should be informed of the league’s lightning policy.
3. If the host school’s athletic trainer is not available, any lightning decision is the responsibility of host school’s athletic director or their designee.
4. In the event of a temporary postponement, all participants and spectators must leave the playing area. The host school is responsible for providing safe areas away from any danger for all participants and spectators. These safe locations will be communicated before the game, if lightning is a possibility.
5. This policy should also be applied to indoor pool events.
6. Team practices will follow the same procedures as those for games.
7. A sports air horn should be used to provide a campus wide alert in the event of lightning. When a decision has been made to halt activity, the standard signal should include three long bursts followed by a five-second count followed by three additional bursts. To signal the resumption of play, the operator should use a single burst.
8. When a game, meet or practice has been interrupted due to lightning, the required wait time is 30 minutes from the last visible sign of lightning before returning to the field, to ensure the cessation of the lightning storm.
9. Any decision regarding the *cancellation or postponement* of a game, meet or contest to another day will be the collective responsibility of the host school’s athletic trainer, athletic director and the game officials. In the event that the visiting school’s athletic director is available, he/she should be included in any final decision.