Licensed athletic trainers: A traditional, unique, and proactive approach in Wisconsin sports medicine

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As the sports medicine world continues to evolve with new advances and philosophies, one constant key element continues to provide knowledge to a wealth of resources. The field of athletic training and the certified athletic trainer (ATC) is part of the sports medicine and complete health care team. The profession of athletic training got its start in the early 1900s when it was recognized that there was a need for someone, other than a coach, to take care of injuries that were being suffered in college football. In fact, the number of deaths and severe injuries were so high in this era that President Theodore Roosevelt threatened to abolish football on college campuses. Hence the National Collegiate Athletic Association (NCAA) was born, and larger colleges and universities across the country slowly began hiring athletic trainers.

The National Athletic Trainers’ Association (NATA) was founded in 1950 with a membership of 200. Today, the NATA has over 30,000 members dedicated to improving the health and well-being of the physically active worldwide.

The athletic trainer has evolved from working mainly in the traditional college and professional sports setting to working in a clinical-based setting. Under the direction of a licensed physician, and in cooperation with other health care professionals, the ATC provides health care to athletes and the physically active. Athletic training is recognized as an allied health care profession by the American Medical Association, and athletic training programs are accredited by the Commission of Accreditation of Allied Health Education Programs (CAAHEP).

Athletic Training in Wisconsin

Athletic training in Wisconsin got its start in the 1930s. Walter Bakke became one of the first athletic trainers in the state when he was hired by University of Wisconsin-Madison in 1936. By the mid 1960s, most of the private and public colleges and universities in the state employed athletic trainers. During the 1970s, most of the colleges and universities began educating interested students to become certified athletic trainers through internships. In 1980, University of Wisconsin-La Crosse became the first institution in the state to develop an athletic training education program that was approved by the NATA.

In Wisconsin, athletic trainers are now officially licensed by the Department of Regulation and Licensing and the professional credential is now abbreviated LAT. Working under a specific scope of practice, LATs in Wisconsin are found in traditional athletic training rooms, hospitals/clinics, industry, health clubs, professional sports, and as physician extenders. Each of these settings utilizes the expertise of the LAT and athletic training methodology as an effective way of treating injuries/illnesses. Each state has its own association, which helps provide additional governmental support at the state level. Athletic training methods produce excellent overall outcomes, with best results in functional outcomes returning individuals quickly to their pre-injury status. With the passage of athletic training legislation, the LAT can now evaluate, treat, and be reimbursed for specifically diagnosed athletic injuries. In order to utilize the full services of LATs in Wisconsin, it is important to understand the education process, key domains, utilization and reimbursement, and outcome study results regarding patient satisfaction.

Education

The educational requirements for becoming a LAT are quite extensive. The National Athletic Trainers’ Association Board of Certification (NATABOC) is responsible for a
complex certification examination. The examination consists of written, written simulation, and oral/practical sections. To sit for the exam, a candidate must, at minimum, have a bachelor's degree with coursework inclusive to risk management and injury prevention, pathology of injuries and illnesses, nutritional aspects, assessment and evaluation, acute care, therapeutic modalities, therapeutic exercise, general medical conditions and disabilities, pharmacology, and psychosocial intervention. It is interesting to note that nearly 70% of the ATC’s in the United States have earned a master’s degree and many have achieved doctorate status.

**Domains of Licensed Athletic Trainers**
The daily routine of a LAT can best be described by listing the practice domains as defined by the fourth Role Delineation Study of the NATA/BOC.

**Prevention**
- Health assessments such as pre-participation physicals with physicians
- Taping, wrapping, bracing, and supports
- Education of athletes, parents, coaches, workers, and supervisors in injury prevention

**Recognition, Evaluation, and Assessment**
- Review injury descriptions by understanding biomechanics and muscle physiology
- Utilize skills in assessment and evaluation
- Test the injured by applying the appropriate functional or sport specific testing
- Continue to monitor the injured and allow for proper medical referral

**Immediate Care**
- Establish a medical plan of action based upon injury situation
- Administer first aid

**Treatment, Rehabilitation, and Reconditioning**
- Follow through rehabilitation programs approved by physicians
- Develop and implement short- and long-term rehabilitation goals
- Utilize function and proprioception with traditional rehabilitation methods
- Monitor the readiness to return to physical activity
- Monitor the successful achievement of short- and long-term goals

**Organization and Administration**
- Maintain accurate medical records
- Establish emergency plans
- Construct budgets
- Act as coordinators, facilitators, and/or department heads in the rehabilitation setting

**Professional Development and Responsibility**
- Develop and implement educational and research programs in order to prevent injury
- Conduct continuing education programs for coaches, supervisors, athletes, and parents
- Maintain competence through continuing education to provide quality athletic training services

**Reimbursement of Athletic Training Services**
Since the passage of state licensure for athletic trainers in Wisconsin, the door has opened for endless possibilities in the utilization of the LAT. Over the past few years, the NATA has taken steps to help establish reimbursement for athletic trainers nationwide. Athletic trainers have their own CPT evaluation and re-evaluation codes and can utilize the general physical medicine codes. Athletic trainers can also utilize the appropriate revenue codes for their facility. In addition, the state membership is actively working with health insurance companies for a response regarding payment for athletic training services. The overall positive responses from insurance companies have been tremendous, with only a handful of denials. Consequently, LATs are beginning to be reimbursed for services in the clinical setting.

**Physician Extender**
Physicians in Wisconsin are beginning to recognize the full potential of the LAT with their patient populations. Over the years, physicians have recognized the importance of the LAT in traditional settings, such as college and professional sports athletic training rooms. Today, they are realizing the significance of using the LAT and the special skills of assessment, management, and rehabilitation with their patients. Physicians are employing or can work directly with the LAT in a physician extender model. This model enables the LAT to assist with the evaluation, treatment, and follow-up care provided as part of the physician visit. Outcome studies at the national level prove that patients utilizing athletic trainers demonstrate a significant reduction in re-injury rates, restricted workdays, and lost work time, and they have a 98% or greater patient satisfaction rating.

In order to utilize the unique skills of a LAT in your area, physicians can contact allied health facilities in their region and ask for the LAT or athletic training services.
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