ON THE INSIDE:
Management of a Severe Cervical Hyperflexion Injury
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VOLUME TWELVE
NUMBER TWO
SUMMER 1977
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FROM THE PRESIDENT'S DESK

Dear N.A.T.A.

I am looking forward to seeing you at our twenty-eighth Annual Meeting in Dearborn, Michigan. This should be one of our most successful meetings. The Hyatt Regency Hotel is brand new and one of the most beautiful hotels in the country. The theme of the meeting will be "Back to the Basics". All speakers will be Certified Athletic Trainers discussing basic training concepts, theories, and techniques. Please use the pre-registration form you received in the mail, and pre-register early. Each year our annual meeting continues to grow and is an excellent source of professional education for the athletic trainer.

A hearty congratulations to all the state licensure committees which have developed and are reporting favorable progress. The Governor of Georgia has signed an Athletic Training license in that state. Congratulations to all the athletic trainers of Georgia, who worked so hard for this accomplishment. Many members of the association have become involved with these committees and are realizing the rewards which go along with becoming involved with their professional association. Many of us are all too willing to let someone else carry the load. Now there is an opportunity for everyone to help advance our profession of Athletic Training.

Another excellent means of contributing to the profession is to write an article for this Journal. Many of us have knowledge which can be shared with others. We realize it takes time and effort to write and probably re-write an article for this journal. Many times a paper is returned to the author to be rewritten. That is why there has been a tremendous increase in the quality of this Journal. Many authors feel discouraged and are unwilling to rewrite their paper which has been rejected. I understand the feeling. The first paper which I submitted and which I thought was great was rejected. An immediate reaction when this happens is one of anger. The best thing to do is to rewrite, and send it in again. Most of the articles in this Journal have been revised and rewritten under the advisement of the editorial board.

Many athletic trainers are developing and presenting workshops in athletic training. The N.A.T.A. approves only those workshops which are designed primarily for the professional education of the athletic trainer. Student workshops and workshops for coaches and others are not approved by N.A.T.A. It is a violation of the N.A.T.A. Code of Ethics to advertise N.A.T.A. approval of a workshop, unless that approval has been received through the N.A.T.A. Professional Education Committee. This approval is given on an annual basis.

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JUNE, 1977


19-24 - 8th Annual Miami University Sports Medicine Workshop (Basic). Contact: Ken Wolfert, Millet Hall, Miami University, Oxford, Ohio 45056.


26-29 - Seminar on Sports Medicine: Maine Maritime Academy, Castine, Maine. Contact Len Tyler, Coordinator, Summer Programs, Maine Maritime Academy, Castine, Maine, 04421.

JULY, 1977


8-9 - District 9 Meeting: Atlanta Townehouse Motor Inn, 100 10th Street, N.W., Atlanta, Georgia. Contact Mr. T.K. Wall, Box 47, University of Tennessee, Knoxville, Tennessee, 37916.


20-22 - Southwest Athletic Trainers Association Annual Convention and Injury Clinic (District 6), Waco Convention Center, Waco, Texas. Contact T.C. "Skip" Cox, Baylor University, P.O. Box 6427, Waco, Texas, 76706.

27-29 - Post Graduate Sports Medicine Course: Rainbow Sports Medicine Center, University Hospitals of Cleveland, 2103 Adelbert Road, Cleveland, Ohio 44106.

AUGUST, 1977


Athletic Training will be happy to list events of interest to persons involved in sports medicine, providing we receive the information at least two months in advance of publication. Please include all pertinent information and the name and address of the person to contact for further information. This information should be sent to Jeff Fair, Athletic Department, Oklahoma State University, Stillwater, Oklahoma, 74074.

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July 11-14
Emporia State College, Emporia, Kansas.

July 11-14
Eastern Illinois University, Charleston, Illinois.

July 11-14
Vanderbilt University, Nashville, Tennessee.

July 11-14
University of Southern Mississippi, Hattiesburg, Mississippi.

July 18-21
Northern Arizona University, Flagstaff, Arizona.

July 25-28
Lock Haven State College, Lock Haven, Pennsylvania.

July 25-28
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This article was submitted by Ray Baggett, A.T., C., coordinator for the Student Trainer's Corner.

One area in the education of the athletic trainer that often is lacking is that of counselor education. The student may have many hours in psychology, explaining different emotional conditions. However he may have no courses in counselor education, explaining how to deal with different problems in human growth and development. The author has worked with trainers who had a great amount of technical knowledge, but their efficiency was markedly reduced by their inability to get along with people. On the other hand the technically inexperienced athletic trainer may be perceived as being superior by the athletes and staff if he can effectively interact with them. The signs in some training rooms “No Loafing”, “Keep Out Unless You’re Injured,” in many instances may be doing gross injustice to the athletes as they indicate to the athlete his lack of acceptance as a person.

Some of the techniques and skills taught in counselor education will be correlated to athletic training.

It has been documented that in 50% of adults with physical disabilities, emotional factors determine the success of rehabilitation. In children the figure may run as high as 75% (1). A powerful intimate psychodynamic relationship develops between the athlete and the athletic trainer, because the athletic trainer is a helping, caring, loving, touching (laying of the hands) person who interacts with the athlete frequently in psychological as well as a physical contact transactions (2). The athlete sees the doctor who plays a vital role in his recovery, but it is the athletic trainer who sees the athlete in the most intensive relationship and provides the visible proof of the possibility of restoration of his return to competition (2). Among the many traits that successful trainers possess, those of being considerate, tactful, and understanding, rank high. Athletes often have special problems that require understanding, sympathy, and tact on the part of the trainer. A firm belief in athletics, and in his own ability to contribute will aid the trainer in solving or ameliorating such problems. The athletic trainer who interacts with his athletes as equals rather than underlings, will be an asset to the team and staff.

Psychological conditioning is very important in the conditioning or reconditioning of the athlete. The athletic trainer can contribute much to the athlete’s emotional stability and to the psychosocial-maturity of the athlete. Frequently the athlete’s psychological attitude has a direct bearing on his physical performance. The trainer must seek
to develop accepted psychological behavior in the athlete. Participation in athletics occurs principally as an effort on the part of the individual to satisfy various psychogenic needs (3). It is within the realm of rehabilitation that the athletic trainer deals with motivation. His skills help to develop response and attitudes that cause the athlete to want to participate in therapy, to enable him to return to competition as soon as possible. The athletic trainer is using counseling skills in working with his charge. The most effective way of helping the athlete cope with his dependency is to convince him that his secondary gains (sympathy and attention) are not gratifying as the state of health and independence he can attain with increased functional capacity (2). Reconditioning athletes requires counseling as well as therapy skills. The athlete who is highly motivated must be restrained; the malingerer need prodding, with the other athletes falling somewhere in between the high achiever and the malingerer.

The trainer with his close personal contact with athletes is often faced with other problems. Athletics develops tension and the trainer is in an excellent position to eradicate or prevent such tensions. He has to be adept in handling situations that require knowledge of the psychological makeup of individuals and the proper method of handling such situations (4).

The emotional climate of the athlete prior to the contest is important for successful competition. The counsel of the athletic trainer with a word of encouragement, or small joke relieves this tension. His counsel is often helpful with the athlete who has lost, is doing poorly in school, has personal problems, etc. The right word to the athlete often can resolve a possibly unpleasant situation (5). Nonjudgemental relationships are also important for the athletic trainer much as they are for the counselor (2). Johnson, Hutton, and Johnson (6) found that a group of athletic champions was characterized by extreme aggression, lack of strict control of the emotions, high and generalized anxiety, a high level of intellectual aspiration, and exceptional feelings of self-assurance. Emotional control is one area the trainer can help these athletes function more effectively. The athlete who is slightly injured many times is seeking sympathy and help from other causes. It is the alert athletic trainer that can pick up these signals, and thus be able to effectively deal with them. Thus the athletes, many times written off because of their emotional problems and conflicts with coaches and team members, may be saved with a little basic knowledge in how to work with people. Empathy is one of the most important qualities the athletic trainer will need in such circumstances. A willingness to listen often goes a long way toward solving many of the problems that arise. Patience and understanding are the keys to establishing and promoting desirable relationships with the athletes (5), (7).

One of the objectives of the athletic trainer is that of injury prevention. Injury prevention is psychological as well as physiological (5). The athlete...
with a negative attitude or one of anger is more apt to sustain injury than is the normal. When the athlete loses his grip on his emotions, he loses some of his skill, coordination, and reserve which leads to injury. Howell (8) notes a specific relationship between the voluntary motor system and emotion. Kinesthetic skills and performances are affected by the state of emotion existing at a given time. Often the discouraged or apathetic athlete is accident prone. It has been long observed that these athletes stand an excellent chance of injury (9).

The athletic trainer and the counselor must possess a stable personality in what is frequently an unstable world. They must control their emotions to the point only be able to better relate to the athletes and clients, but also so they may become a model to emulate by their students. To respond to an athlete with an emotion similar to the athlete’s, often results in an increase in tension between the two, with a feeling of dislike between the two. The athletic trainer must condition himself to respond to irritability and tranquility, to obstinacy with patience, and to anger with tolerance (5).

The athletic trainer will be in the background much of the time with the coach being the authority figure, the motivator and the disciplinarian. However, it is amazing the number of coaches who are unable to effectively deal with athletes as people. Thus the counseling skills of the athletic trainer are further taxed in helping to develop a healthy coach-player-team relationship.

It is the athletic trainer who must guide and counsel the athlete over the rough spots in athletics. The outstanding all-conference fullback who is switched to the position of tackle in his senior year to bolster the line requires a great amount of adjustment on his part. His adjustment to this conflict is a must for the individual’s mental health as well as the success of the team. A great deal more conflict, adjustment and behavior modification is required of the athlete who has sustained a serious injury. He must work at a slow steady pace until healing takes place, and the athlete is ready to return to competition. These athletes need constant understanding, encouragement, and reassurance. Everyone wants instant health, especially the young. By example and encouragement, the athletic trainer keeps the athlete optimistic and enthusiastic about his return to competition. The athletic trainer is the father-confessor of the team (10).

The trainer must give constant encouragement and emotional support to the athlete as he struggles to regain his original anatomical tone and integrity and the resulting performance efficiency (11).

The establishment of rapport, or the relationship of sincere confidence between the athletic trainer and athlete is one of the most important factors in the establishment of an effective team trainer. The effective athletic trainer must be a person to whom an athlete can talk (12), (13).

In the college environment, the guidance of the athletic trainer may be particularly comforting to the athlete, as this is the first time he has been away from home for any length of time. athlete has problems adjusting to college and athletics.

The athlete can be helped by the athletic trainer in decision making by the trainer’s counsel (6). The decision must be the athlete’s, however poor it may seem, but the athletic trainer can help him keep his thoughts in proper perspective.

The athletic trainer and the school counselor many times function in the same role the athletic trainer views his athlete as that of the psychologist interested in the mental efficiency of the individual. The mental hygiene of athletics endeavors to help athletic leaders and athletes ward off distracting influences of mental stress in an intelligent fashion. (12).

Athletic teams are organized of groups of individuals. To make athletic teams efficient organizations for competition against ever-changing situations under stress, the trainer has to know about the capacities and limitations of these individuals. He must know about differences among athletes, and how one can best do one task while another is best at a different job; about the abilities of athletes who have those abilities changed and modified by athletics. Athletic training demands that those effectively engaged in this profession, which contributes to the growth and development of athletics, be acquainted with the motives and personalities of athletes (12).

The athletic trainer must possess more than knowledge of the care and prevention of athletic injuries. He must know what human nature is like, and how to work with it. He needs to take the view of the psychologist to try to understand why the athletes act the way they do. The possession of a great amount of psychology is surpassed by the basic understanding of human nature (12).

In addition to this basic understanding, other specialized areas peculiar to athletics are the psychology of athletic injury, mental fatigue or the athlete who is burned out, psychology of emotions, and psychology of will power.

With the many counseling demands on the athletic trainer, courses such as human growth and development, techniques of counseling, etc. are essential for the complete education of today’s athletic trainer. Successful counseling of athletes involves certain skills and techniques that can be acquired through counselor education.

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**Jobst-Jet® Air Splints**: for emergency splinting and pressure bandaging of fractures and sprains, and to stop venous bleeding.

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Jobst has published an informative brochure dealing with the treatment of sports injuries. This brochure is available without charge to trainers, physical therapists, coaches and other persons responsible for the health and well-being of athletes. Jobst’s Sports Therapy System offers total flexibility for treating sports injuries and returning the athlete to competition as quickly as possible. Write for Jobst Sports Therapy Brochure today.

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Rehabilitation of Low Back Pain in Athletes

by Phillip B. Donley, R.P.T., A.T., C.
West Chester State College

Edited by Rod Compton, A.T., C.
East Carolina University

In most cases, low back pain in athletics is not due to serious, long lasting pathology. Strains of the psoas, erector spinae group and quadratus lumborum account for a large majority. Low back pain due to these structures can be overcome with short periods of rest, a modality to relieve pain, and support for activity.

The athlete who has recurrent attacks of pain, with or without other signs of neurological and neuromuscular changes, requires a more detailed approach. This athlete

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must be referred for medical evaluation.

All too often the athlete returns from medical evaluation with a non-specific diagnosis, i.e., low back pain, chronic low back pain, mechanical low back pain, etc. When a specific diagnosis is made, such as spondylolisthesis, disc herniation, disc rupture, spondylolysis, degenerative disc, etc., it is easier for the trainer to formulate a treatment regime. With or without a specific diagnosis, an evaluation must be made by the trainer to serve as the basis for measuring future progress.

The information to be gained from an evaluation by the trainer is:

1. History: Even though the physician and the athlete dropped bits of information from time to time, a systematized consideration of the history will often reveal important clues for assisting in the rehabilitation.
2. Structural deviations: A quick check of skeletal alignment may reveal some underlying cause of a low back disorder.
3. Flexibility: Both static and dynamic range of motion should be measured. It is often the mechanical imbalance caused by muscle shortness that creates low back syndromes.
4. Strength: The body’s ability to hold its flexible segments in balance is largely due to the strength of the supporting muscles. This is especially true in an area like the low back. Strength in the hips, as well as the back musculature, must be measured.
5. Analysis if performance traits: In general, the trainer concerns himself with the mechanics of the sport and this is proper. However, an analysis of other habit patterns, which the athlete had developed and is using the other 20-22 hours a day, must be considered. It is often these other habits which set the stage for unnecessary wear and tear. Once the structures have been weakened, the trauma of strenuous activity may trigger acute signs and symptoms.

I. General Evaluation:
A. Sacral Base: Check the athlete standing in shoes and shorts or other brief clothing (females in a two piece swim suit.)
   1. level of iliac crests (Figure 1)
   2. level of posterior superior iliac spines (Figure 2)
   3. level of trochanters of femurs (Figure 3)
   4. level of heads of fibulas (Figure 4)
B. Trunk Flexion: Observe the degree of motion and smoothness of the curve. Encourage the athlete to slowly drop the head first, then the shoulders and then the trunk. Movement should stop at the first sign of pain.  
1. side view (Figure 5)  
2. back view (Figure 6)  
C. Lateral Flexion: Observe the degree of motion to both sides and the smoothness of the curve. Remember that the vertebrae are rotating when this movement occurs. A limitation in rotation may cause an uneven curve. (Figure 7).  
D. Right and Left Rotation: Perform slowly. There should be no pelvic movement. Start the rotation with cervical rotation and work down. Notice that there is normally some flexion with rotation. (Figures 8 and 9)  
E. Prone Position:  
1. Palpate for point tenderness: Try to find the one most tender site and note its level.  
2. Using the heel of the hand, gently press on the spinous processes to ascertain the degree of “give” at each level and any associated pain. In normal cases, the motion increases from L5 to L1.  
3. Sacroiliac test: Anterior tilt is a gentle test and if pain results it is significant in that there may be anterior tilt of the ilium on the sacrum. (Figure 10)  
4. Hip extensor strength: Weakness in this area often causes an anterior tilt of the pelvis.  
5. Hip internal rotation flexibility and strength.
F. Supine Position:  
1. Hip external rotation flexibility and strength.  
2. Sacroiliac compression and spring tests: These are gentle tests and the painful side usually indicates the side of the lesion. (Figure 11)  
3. Straight leg raising: This test is designed to elicit sciatic nerve involvement. The neck must be flexed at the time to insure proper tension on the cord.  
4. Hip flexor flexibility: If the iliopsoas muscles, in particular, or along with the rectus femoris, are tight, they pull the pelvis into an anterior tilt. Passive flexion of the right hip checks the left hip flexor flexibility. (Figure 12)  
5. Hamstring flexibility: A common cause of lordosis and lordotic strain is short hamstrings.  
6. Lumbar extensor flexibility: As both knees are forced, passively, to the chest, palpate the effects on the lumbar curve. It should flatten and reverse to some degree.  
7. Hip abductor and adductor strength: Weakness unilaterally will cause an unnatural gait that can cause a lateral tilt to the pelvis with resultant back pain.  
8. Abdominal strength: Carefully watch the mechanics of the sit-up with the feet unsupported. It should be a slow, steady increase in curvature beginning with flexion of the neck.
Sit-ups in a rotated position should begin in the rotated position first. Limitations may be due to weakness or decreased flexibility or both. (Figure 13 and 14)

9. **Trunk lateral flexion**: Quadratus lumborum action is evaluated. (Figure 15)

**G. Side Lying and Seated Positions**:
1. Lateral Sit-ups: Requires leg fixation.
2. Hip flexor strength: Psoas strain may be revealed by pain at either the proximal or distal attachment. (Figure 16)
3. Posterior tilt of the sacroiliac: If this encourages or causes pain, the ilium may rotated posteriorly on the sacrum. (Figure 17)
4. Hip adductor strength: This can be checked in the sidelying position if you are unsure of the results in the supine position. (Figure 18)
5. Hip abductor strength: This can be checked in the sidelying position if you are unsure of the results in the supine position. It is also easier to check the effects of the tensor fascia lata in this position by checking abduction with the hip in a few degrees of flexion.

**II. Physical Modalities**:

Rehabilitation is often more than exercise. The use of physical modalities can enhance the program if used properly. Your objectives should be:

1. relieve the pain
2. decrease the muscle spasm
3. improve nutrition
4. encourage local and general relaxation

**A. Ice - Uses**:
1. Acute spasm
2. Before active stretching and provided strains and sprains have healed sufficiently to tolerate stretching.
3. Chronic low back pain before pre-exercising stretching.
4. After exercise to decrease the pain and prevent latent soreness.

**B. Heat - Uses**:
1. Chronic low back pain before exercises.
2. Before articulation or exercises.

**C. Electrical stimulation - Uses**:
1. Acute stages, subthreshold tentanizing.
2. Chronic stages, subthreshold (Transcutaneous nerve stimulation TNS), pulsed, surged, or tetanizing.

**D. Ultra Sound**:
- Paravertebral do not use over laminectomy site
- Quadratus lumborum action is evaluated.
- Paravertebral - do not use over laminectomy site

**E. Massage**:
- If it includes finger tip pressure, as in acupressure, or the type of friction designed to release scar tissue and other adhesions.
- Care must be exercised in all stretching to insure movement occurs only in the intended joints. All too often inadequate stabilization leads to movements which are so general that they encourage movement in already hyperflexible segments on either side of the tight joint(s). The result is increased hyperflexibility which can be a source of back pain.

**B. Strengthening**:

The following muscle groups should be strengthened:

1. trunk flexors
2. hip extensors
3. hip abductors
4. hip adductors
5. trunk lateral flexors
6. hip rotators
7. trunk rotators
8. trunk extensors

**C. Dynamic stabilization and balanced strength**:

There must be a consistent strength balance so that the pelvis is not shifted excessively off center during static or dynamic positions. To achieve this the trainer must carefully monitor the rehabilitation to insure there is no inequity in opposing muscle groups.

**D. Correct body mechanics**:

The trainer, coach, and athlete must work together to improve the habit patterns in sports skills. Some common errors which can lead to low back pain are:

1. Weight carried on the heels: Very common and is especially evident when the athlete fatigues. A position in which the athlete has the body weight shifted forward, an "alert" position, is best.
2. Forward knee locked in ex-
tension when throwing or moving into extension during release and follow through. This transmits the force of im-
3. Limited rotation of trunk in swinging skills, i.e., batting, golf, tennis, throwing. The result is more trunk flexion, usually with the knees straight, resulting in low back stress.
4. Limited knee flexion in landing, as in gymnastics. The gymnast usually has excellent motion and strength in the hips and low back but the punishment of landing in locked knee and hip positions transmits the force to the low back.
5. Overextension beyond the base of support: This places undue stress on the sacral base. It is common in athletes caught out of position or those who never seem to be in a good position to deliver a force. They never seem to have their center of gravity under control and are, therefore, forever reaching and stretching to make the proper play.
6. Improper weight training exercises and loading: Such exercises as bent over rowing, excessive loading for elbow curls and bench press and overhead press encourage poor positions and low back strain.
IV. Support For Rest and Activity -
Objectives:
1. hold for adequate healing
2. check against unwanted motion
3. change habit pattern by restriction of unwanted motions
A. Types of support:
1. Braces:
   a. rigid
   b. semi-rigid
   c. flexible
2. Wraps
3. Tape
V. Mechanical Adjustments for Daily and Athletic Activities
A. Shoes: Often the athlete does not wear the proper shoes for the activity. They simply wear the most convenient shoe. If the athlete has a severe lordosis you may want to try a shoe similar to the “Earth Shoe” in which the heel is lower than the ball of the foot.
B. Beds: A firm, uniform bed that accommodates to body contours instead of sagging in the middle is best for both prevention and treatment of low back pain.
C. Standing: The athlete should avoid prolonged periods of standing. They should shift to stagger their feet or place one foot on a stool. They should sit down after every 10-15 minutes of standing.
D. Sitting: Most athletes spend too much time sitting in the same chair. They should get up every 30-40 minutes and move about. In class they should move around in the chair. Car seats are not conducive to good posture for prolonged periods, especially bucket seat. They destroy the lumbar curve when sat in for prolonged periods, because of their reserve curve. On long trips, athletes should stop the car every hour to walk and stretch.
E. Standing and Walking: Today’s athletes live in sneakers. They have no arch or counter. They were not designed for standing or shuffling along. Encourage use of a well constructed shoe with a firm counter, an arch, and laces to adjust the tension on the instep. Athletes should wear low heels that are made of rubber, not leather, and certainly not with metal taps which tend to transfer the shock of heel strike to the skeletal system rather than to dissipate the force as rubber heels do.

This presentation is designed to present an overview for the rehabilitation of low back disorders. Each case is an individual matter which must be evaluated, regardless of the diagnosis, so that rehabilitation progress can be properly monitored.

For most low back problems, a treatment regime aimed at relieving the acute pain, following by instruction in proper body mechanics and temporary support, will provide sufficient management. If the warning signs of increased pain, neurological involvement and/or increased dysfunction occur, prompt referral for medical evaluation is a prerequisite of proper management.

Restoration of normal flexibility, functional strength, and proper body mechanics at rest and during activity, are the objectives of a treatment program. Close attention to progress will provide encouragement for both the athlete and the trainer. Positive results are the usual outcome.

A general outline of evaluative procedures and body parts to be exercised, has been presented. As you can see, it all takes time. It cannot be accomplished during the rush hour for pre-practice or pre-game taping. Nor can it be accomplished during activity sessions which require the trainer’s full attention. It must be scheduled when the athlete and trainer can take the time to concentrate on all the ramifications. Finding the time to perform such detailed procedures is a major problem, however, if the trainer will learn and practice the techniques of evaluation, he can become quite proficient and can perform the evaluation in a minimum of time.

Selected Bibliography

My wrist fracture has healed nicely and the work has really piled up. I would like to thank all those who expressed concern for my injury. Growing up sure can be hard sometimes!

**Mouthguard Poster**

We have received so many requests for reprints of the mouthguard poster that was printed several years ago that we decided to rerun it in this issue. It may be a little hard hitting at first, but it has been very effective in getting athletes to wear their mouthguards.

If anyone has an idea for possible posters, please feel free to send them in to the Journal.

**A Call for Articles**

We need good, informative articles for our Journal. We rely on our membership for the vast majority of our articles. Please, if you have a good article send it in to Clint Thompson. Clint and the Editorial Board will check it over and help you get it into shape. Only trainers know what other trainers would like to see, so let's hear from you now! For further information check the "Guide to Contributors" in the back of this issue.

**Support Your Advertisers**

As you may have noticed the Journal has gained many new, high-quality advertisers. They are helping us out by supporting our publication. Please support them by buying the products whenever possible and letting them know you saw them in the NATA Journal.
Take it from “Ducky” Drake...
“Arno Pro-Comfort Trainers Tape is the best tape your money can buy.”

If you’re like me, you’re concerned about protecting your athletes from foot and leg injuries.

So I suggest you try Arno Pro-Comfort™ Trainers Tape. It’s a highly conformable tape that’s stronger than most, because the backing is made of unbleached cloth that’s woven with extra-thick threads. The thick threads act like shock absorbers to prevent medial and lateral splits while increasing the longitudinal strength of the wrap. The result is an excellent support for the ankle. And you’ll find that for some applications you’ll need less tape and underwrap.

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You’ll be pleased to know that Arno Trainers Tape is competitively priced. Sure, you can buy some tapes for less money, but you can also pay more for some. What counts is the value of the product and the protection it offers the athlete. If you’re concerned about foot and leg protection, try Arno Pro-Comfort Trainers Tape. Once you do, you’ll feel like I do—that it’s the best tape your money can buy.

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Arno Adhesive Tapes, Inc., Athletic Products Division
Tape Division, P.O. Box 301, Michigan City, Indiana 46360
Current Literature


"So You've Been Asked to be the Team Physician," Shaffer, T. The Physician and Sportsmedicine. 4:57, December, 1976.


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COSTS LESS THAN CLOTH.
CONFORM

Because it's the only tape on the market made with rubber fiber inside fine cotton thread, CONFORM has several advantages over cloth:

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It's lower because of CONFORM's exclusive weaving process. Plus, no cotton backing is used.

CONFORMABILITY
Totally conformable to body contours. CONFORM supports the ankle. Conventional cloth adhesive tapes immobilize it.

CONSISTENT, EASY UNWIND
through the scientific design of the back cloth and the evenly spread mass.

STRENGTH
In years of actual use, CONFORM has stayed untearable under all types of game and practice conditions. Why? Because the elastic-back cloth works together with the aggressive adhesive mass to develop a tensile strength in multiple layers far greater than the sum total strength of the individual layers. Yet, it's designed to easily hand-tear in taping.

ANKLE TAPING TIME
CONFORM molds easily to all body contours and applies smoothly at all angles. It has to be torn only once or twice while being applied. This saves tape yardage and time:

<table>
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<th>CONFORM</th>
<th>Conventional</th>
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<tr>
<td>1 ankle</td>
<td>15-20 sec.</td>
<td>60-90 sec.</td>
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<td>10 ankles</td>
<td>2-3 min.</td>
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<td>30 ankles</td>
<td>7-10 min.</td>
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<td>60 ankles</td>
<td>15-20 min.</td>
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<tr>
<td>90 ankles</td>
<td>17-23 min.</td>
<td>1½-2½ hrs.</td>
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(Taping time may vary slightly depending on skill of person taping and the technique used. Durations indicated include only time actually spent in taping).

METERED STRETCH
It stretches to a certain point, then stops. You control the amount of support or pressure applied to the taped area by taking the stretch out for more support, or leaving the stretch in for less support. You can't do this with conventional tape.

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Everything you need to know about proper conditioning can be stated in less than 1,000 words!

By a process of trial and error, determine the amount of resistance that you can use for approximately eight repetitions in each of twelve exercises.

Then perform three weekly workouts with at least forty-eight hours between workouts. Using one set of each of the twelve exercises, and performing as many repetitions as momentarily possible without jerking or throwing the weight.

Both lifting and lowering movements should be smooth, slow and steady . . . and a brief pause should be involved at both ends of all movements.

When it becomes possible to perform twelve repetitions in any exercise, the resistance should be increased by approximately five percent in that exercise.

Workouts should be performed at approximately the same time on each training day, and should follow a meal by at least two hours.

A good choice of exercises to be used while training with conventional equipment would be . . . squats, standing presses, behind-neck chinning, bench presses, regular chinning, parallel dips, standing curls, triceps curls, stiff-leg deadlifts, shoulder shrugs, wrist curls, calf raises . . . and the exercises should be performed in that order.

If Nautilus equipment is available, a far better choice of exercises would be provided by performing one set on each of the following machines, in the order listed . . .

<table>
<thead>
<tr>
<th>Hip and Back Machine</th>
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<tr>
<td>Compound Leg Machine</td>
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<td>Leg Curl Machine</td>
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<td>Double Shoulder Machine</td>
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<td>Pullover/Torso Arm Machine</td>
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<td>Double Chest Machine</td>
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<tr>
<td>4/Way Neck Machine*</td>
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<tr>
<td>Rotary Neck Machine*</td>
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<tr>
<td>Neck and Shoulder Machine*</td>
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* should be performed only twice a week.

Exercises should be added occasionally, but another exercise should be dropped when one is added, so that the program is never longer than outlined above.

At least one but not more than two of the weekly workouts should be performed in either
a "negative only" or "negative accentuated" fashion, to the extent that such styles of training are possible with the available equipment. "Negative only" means lowering a resistance that has not been raised by the same muscles . . . "negative accentuated" means raising the resistance with two limbs, and then lowering it with only one of the same limbs. Such training is difficult or impossible with a barbell . . . but can be performed on the listed machines without help in all cases.

A normal, reasonably-balanced diet should be followed . . . and careful attention should be given to the fat contents of the body in order to assure that fatty tissue is not being added. So long as the skin-fold thickness in the area of the waist is not becoming thicker, or is being reduced gradually . . . the diet is not providing too many calories; but if the skin-fold thickness increases, the caloric intake should be reduced gradually until the trend is reversed. Sudden, large-scale changes in caloric intake should be avoided.

Supplemental protein or other substances are not required and will probably add fatty tissue if a normal diet is being consumed. Meals should be at regular hours and of normal quantity.

Every effort should be made to show progress in the form of the ability to perform more repetitions with a given resistance . . . or the same number of repetitions with more resistance. But the style of performance of exercises should not be changed in order to allow more resistance or repetitions.

If in doubt about proper speed of movement, then perform the exercises more slowly than you have been doing them. If you are unable to pause and hold any position during an exercise movement, then the weight is too heavy and you have been lifting it by throwing it rather than by muscular contraction of the muscles that you are trying to exercise.

At the start of training, a rest-pause of approximately three minutes should be used between the different exercises . . . and over a period of three months or more, the period of resting between exercises should be gradually reduced; until, eventually, you will be resting a minute or less between exercises. But do not let the workouts degenerate into a race against the clock . . . do not start another exercise until you can do so without being restricted by your rate of breathing, which should remain fairly high throughout the workout, but which should not become so high that it makes proper performance of the exercises impossible.

Any sort of jerking or sudden movement should be totally avoided, and do not attempt to determine how much weight you can handle for a single, maximum-attempt repetition. Instead, judge your progress on the basis of how much resistance you can use for ten repetitions performed in good form.
Lives Saved

Dave Geske, a sophomore student trainer at Fargo North High School, Fargo, North Dakota, recently saved the life of a high school football player after a very serious skiing accident. Geske recognized the symptoms of internal injury and after exploratory surgery, physicians found a ruptured spleen.

****

South Florida trainer Tony Jonaitis is credited with having saved the life of an 80 year old spectator in the Jacksonville Coliseum, Jacksonville, Fla. He gave resuscitation to a victim of a heart attack.

A Timely Reminder . . .

Your contributions and continuing support to the NATA Scholarship Fund are always welcome and are necessary so that the endowment goal of $500,000 can become a reality. Please remember that our program of financial assistance is a four-fold one that offers scholarships, loans, grants and part-time employment. Organizational support from the NATA to the Fund continues, but your individual contributions are vital to the Scholarship Fund's ultimate success. All contributions are tax deductible. Won't you consider now the importance of your participation in the NATA Scholarship Fund? Make your checks payable to Scholarship Program, and mail them to this address: NATA, Chairman - Grants & Scholarship, 3315 South Street, Lafayette, Indiana, 47904.
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CERTIFICATION

Persons wishing to be certified as an Athletic Trainer by the N.A.T.A. must fully qualify under the Procedures for Certification prior to taking the Certification Examination. The examination is given four times yearly. It is administered one day prior to the annual convention in June at the convention site, the third Sunday of January (on a regional basis), the second Sunday of March (on a regional basis), and in early August, (applications are processed at the same time as for the annual convention).

Persons desiring to take the examination may obtain application materials from N.A.T.A. Board of Certification, Post Office Box X18, Ann Arbor, Mich. 48107 provided the individual meets the membership requirement. The application must be requested in writing ninety (90) days prior to the date of the examination.

No applications will be furnished to the applicants less than sixty (60) days prior to the examination date in order to assure that the application deadline of six weeks prior to the examination may be met. All August applications must be processed with the same deadlines as for the June annual convention site.

If further information is required, contact Lindsay McLean, Chairman, NATA Board of Certification, 1000 S. State Street, Ann Arbor, Michigan, 48104.

BACK PAIN IN ATHLETES

A comment by the Committee on the Medical Aspects of Sports of the American Medical Association and the National Federation.

Serious disabling injuries of the back are unusual in an athlete who has a normal spine. Contusions of the muscles, strains of the ligaments, and even fractures of various aspects of the lumbar vertebrae ordinarily heal with no persistent disability. If disability persists, the physician will search for some underlying defect in the spine or its juncture with the sacrum.

Congenital defects of the spine which do not produce obvious external signs are not ordinarily recognized during childhood. During adolescence heavier stresses are placed on the spine by the individual’s greater size and weight and possibly more strenuous activities. When the adolescent becomes active in athletics, back pain or spasm of the back muscles may appear for the first time.

But not all back conditions are congenital. Spondylolysis and spondylolisthesis are examples of back problems which are congenital or are acquired by youngsters. In either case, it is not always necessary to exclude these youngsters even from contact sports as long as adequate precautions are taken. Nevertheless, coaches and athletic trainers should be wary of the athlete who seems to be having continual or recurring back pains and refer him to the team physician for examination.

The examination prior to the season may uncover back anomalies. Any history of frequent back symptoms demands a careful evaluation,
AN OPEN LETTER: ALL MEMBERS N.A.T.A.

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Zip Code __________________________
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including x-rays, before the candidate is allowed to compete. On medical examination any obvious or apparent spinal abnormalities or muscle spasm should call for x-ray examination. Significant limitation of forward or side bending or pain produced on straight leg-raising provides functional evidence of possible disorders. In severe or chronic cases it may be necessary to encourage such youngsters to participate in a selected non-contact sport after the appropriate diagnosis is made.

HELMET TESTING

MISSION, KS. — The National Operating Committee on Standards for Athletic Equipment (NOCSAE) announced a change in policy concerning the testing of various football helmet models to determine if they pass the NOCSAE Football Helmet Standard. Commencing January 1, 1978, athletic equipment manufacturers and reconditioning firms must make their own arrangements for conducting the NOCSAE Football Helmet Standard tests. Effective January 1, NOCSAE will no longer arrange for testing of athletic equipment for certification purposes by Wayne State University. Each firm will be solely responsible for determining if the newly manufactured helmets or originally certified reconditioned models meet the established NOCSAE Standard.

The National Operating Committee on Standards for Athletic Equipment was formed in 1969. The purpose of the group was to conduct and foster research relating to athletic equipment with the intent of establishing sound safety standards. At its inception, the immediate concern of NOCSAE was the establishment of a safety standard for football helmets since none was in existence.

The NOCSAE Football Helmet Standard tests are based on research begun in 1971 at Wayne State University, Detroit, Michigan. The project was directed by Volct Hodgson, Ph.D., director of the Gurjian-Lissner Biomechanics Laboratory at Wayne State. The 1974 helmet models were the first to undergo the NOCSAE tests.

Because test equipment was not available for manufacturers when the NOCSAE Test Standard was developed, Wayne State University conducted the initial NOCSAE tests on all helmet models submitted by the manufacturers for testing. Manufacturers and reconditioning firms eventually purchased the testing equipment and began to conduct the appropriate NOCSAE tests as a quality control check on their equipment.

Since adequate time has been provided for manufacturing and reconditioning firms to acquire the testing equipment, effective January 1, 1978, NOCSAE has adopted the policy that the physical testing of all football helmet models will be conducted by the manufacturers or reconditioners either by use of their own testing equipment or by arrangements with a testing laboratory which has the proper equipment to conduct the complete NOCSAE tests. It also should be noted NOCSAE is not organized to enforce any standards which may from time to time be adopted by the industry. The athletic equipment firms (manufacturers and reconditioners) will be responsible for any surveillance and administration required with respect to the observance of the NOCSAE Standard.

NOCSAE will continue to provide a forum for individuals and organizations considering problems relating to athletic equipment and attempting to develop adequate safety standards. All safety standards developed through NOCSAE research will be made available for adoption by any interested organization, firm or individual. Likewise, NOCSAE will be receptive to safety standards developed by other groups interested in athletic safety and, if proven adequate, NOCSAE will recommend the standards.

NOCSAE will continue to conduct research to improve the NOCSAE Football Helmet Test Standard. In addition, investigations and tests will be conducted on other athletic equipment with the intent of establishing and improving safety standards. Through research, and with the cooperation of all groups interested in athletic safety, NOCSAE will continue to develop recommended safety standards.

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Rod Stephen, P.O. Box 1676, 78296, phone collect: 512/533-7118.
Book Reviews

Athletic Training and Physical Fitness

by: Jack H. Wilmore
List Price: $14.95
256 pages - Illustrated
Allyn and Bacon, Inc.

The author of this text has ordered the presentation of his material into three sections. The first section deals with the physiological foundations of physical training. More specifically, some basic anatomical and physiological considerations are reviewed as well as acute and chronic adaptations to exercise. The first section also highlights the fundamentals concerning exercise effects on each of the major systems of the body. The physical alterations of the body resulting from a single bout of exercise are discussed. Also the basic factors involved in the alterations of the body resulting from a long term program of physical training are explored.

The second section of the book discusses each of the individual components constituting the foundations of physical training. Such topics as strength, power, and muscular endurance are reviewed. Speed, agility, neuromuscular coordination and flexibility and their relation to athletic performance are investigated. A discussion of cardiovascular endurance, its assessment and relation to performance in athletics is presented. Section two to the text concludes with a discussion of body build and composition and detraining and off-season training programs.

In the third and final section special consideration in physical training are explored. Here the author deals with such topics as environmental factors and athletic performance, ergogenic aids, the female athlete and growth and the aging process. He concludes the last section of his book by highlighting physical activities for health and fitness and expounding on some general guidelines for an exercises program.

Included in the appendices of this book are a series of strength exercises, warm-up and flexibility exercises and some field tests for assessing physical fitness which are very useful. This book presents one of the most concise overviews of the physiological principles and practices of the conditionings process this reviewer has seen to date. It would serve as an excellent textbook for a conditioning class as well as a valuable reference. This reviewer highly recommends this text to all practitioners in sports and physical education.

Sports Medicine

by J.G.P. Williams
P.N. Sperryn
List Price: $45.00
538 pages - Illustrated
The Williams & Wilkins Co.
Baltimore, Md. 21202

This text represents an accumulation of information from an international panel of contributors distinguished in all disciplines relevant to sports medicine. The editors have attempted to compile the information so as to present a complete and concise overview of the interaction between sport and medicine. They are extremely successful in developing this relationship for they accept the concept of sports medicine as an integrated multidisciplinary field embracing the relevant areas of clinical medicine and the appropriate allied scientific disciplines.

The organization of the text provides for a systematic review of such topics as sport in society, biomechanics and physique, sports cardiology, nutrition, doping, and team medical care. There are also chapters dealing with sport injury, first aid, and musculo-skeletal anatomy. The relationship of athletic injury to age is discussed as is that of sport to disability.

The social, psychological, physiological, and environmental aspects of sport are all reviewed by the editors of this text. It is clear this volume represents an all encompassing approach to the study of sports medicine. The quality of the contribution and editing provide for an excellent text valuable to any sports medicine practitioner.

Don Kaverman, A.T.C., Northwestern University
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Potpourri

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Has anyone seen the printed outlines of splints placed on 3-M corrugated cartons? Minnesota Mining and Manufacturing has developed an idea to provide lost temporary splints and a useful disposal of shipping cartons. These cartons can be used by emergency groups such as ski patrols, rescue squads, or athletic training rooms. Check with your local hospitals to see if you can't stockpile a few lower leg and arm splints.

Fire on Ice

The following is an excerpt of an article in the November-December, 1976, issue of The American Journal of Sports Medicine.

"Hockey is recognized as being one of the fastest and most demanding sports in the world, with a reputation for roughness and physical risk. The risk factor should be defined as the probability of the participant's sustaining injury. Because of our growing concern for the physical safety of both male and female ice hockey players at all age levels, this study was designed to: (1) examine the incidence of accidental and penalty-related injuries; (2) examine the nature and severity of the injuries; (3) analyze the physical risks; (4) identify the causative factors of risk; (5) recommend changes to enhance the sport's safety.

This paper has shown that injuries sustained by hockey players from paperweights to professionals in the greater Toledo area are varied, generally accidental, often violent, and frequently preventable. Ice hockey, a contact sport with intrinsic hazards, demands that a participant be willing to accept physical abuse. The number of injuries in the sport has increased in direct proportion to its popularity. The discussion of the mechanism and forces involved in such injuries leads to the recommendation that specific standards be established in hockey equipment to provide maximum protection and decrease substantially the risk factor."
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Wheelchair Sports

The Potpourri column of the January 1977 issue of Physical Therapy discusses a study on wheelchair sports.

"The University Hospitals of Cleveland is conducting the first scientific study of the effects of sports participation on wheelchair patients. Patients at the University Hospitals Myelodysplasia Clinic, members of the Cleveland Comets, a team of wheelchair athletes, and participants from the Jewish Community Center are cooperating in the venture. Participants will be psychologically tested at the beginning of the program and at 3-month intervals.

"Dr. Garry Gosky, pediatrician at Rainbow Babies and Childrens Hospital and Assistant Professor of Pediatrics and Adolescent Medicine at the Case Western Reserve University (CWRU) School of Medicine, initiated the program. Dr. Gosky hopes that the exercise program will help to relieve anger and frustration and rechannel energy into wholesome sports participation, school work, and other constructive activities. 'As the anger is dissipated,' he said, 'we hope that the mental state will improve. We want to find out how long this takes. Is it a rapid change, or a slow, gradual one?'

"Another member of the research team, Mrs. Naomi Glaser, a psychotherapist at the hospital and senior research associate at the CWRU School of Medicine, said, 'I've seen angry, hostile, obese youngsters lose weight, begin to smile, and become real people as the result of wheelchair sports.'"

Athletic Training Facilities and Personnel

Linda Levy and Greg Vergamini of Keene State College surveyed 103 high schools in New Hampshire. Forty-three (43) schools responded. The following observations were made:

- approximately 25% of all high schools have no training personnel
- the 'middle' sized school appeared to have fewer personnel and facilities, and less equipment than the other sized schools.
- amounts of school budgets seemed to follow no particular pattern when compared to the number of teams or total students involved. Each school had a budget comparable only to the program that each had established.

If anyone is further interested, I'm sure the authors would be glad to share their experiences.

Misinformation

In a column called Viewpoint in the January, 1977, issue of the Sports Medicine Bulletin, James Skinner, Ph.D., has made some interesting remarks concerning the "informed public." The following is a small excerpt of his column. As professionals in the area, how many of us contribute to this misinformation by failing to share in the publication of proper information?

"It is difficult to browse through a bookstore or to read a newspaper or magazine without encountering some popularization of facts about exercise, fitness, diet, weight control, health, etc. Unfortunately, many of these books and articles are written by persons who mislead the public (knowingly or unknowingly) into believing that this or that 'miracle' exercise, diet or health product will cure their problems. Judging from their popularity, they are obviously filling a public need for knowledge.

"Although this information should come from those who have studied and researched the topic, many scientists feel that it is not 'scholarly' to popularize their research or to present and publish it in non-scientific circles. Thus, by default they allow those who are less well-informed and/or less scrupulous to meet the public demand. There has always been a gap between researcher and practitioner, and even more so between researcher and the public. The public and often the practitioner have neither the training nor the interest to read scientific journals to find answers to their questions. Even if laymen do read a research article, the scientist by necessity is conservative in his tentative conclusions, an approach not of interest to the layman who wants only the simple truth and perhaps a cookbook recipe of what to do, how and when. As a result, the public cannot distinguish facts from fallacies in advertising by promoters of various programs who make everything look so easy and simple."
Muscle strains and pulls—injuries that occur most frequently in cold or inclement weather—may be greatly reduced by using the Jenkins’ Hot Seat.

Through a system of forced heated air, the Jenkins’ Hot Seat provides warmth to critical muscle areas of the players. The Hot Seat itself becomes warm and special vents provide additional heat to the feet, knees, legs, groin and shoulders.

The bench is designed to heat the body’s inner core . . . providing a warm supply of blood to the extremities. It keeps the players hands and feet from frigid conditions which directly aids the passing game and ball handling in football.

Tom Bostic, head coach of Pleasantville (N.J.) H.S., writes:

I feel this is a great innovation for cold weather football.

Your bench has a definite advantage over the space heaters now in use. First, it keeps the player’s whole body warm. This keeps them from becoming stiff while out of the game. . . .

I think it also helps the team psychologically. Since players need not worry about the cold, they can concentrate fully on the game and the opponent.

During the four years that the Jenkins’ Hot Seat was in development, prototypes were tested at Pleasantville H.S. “It has been a definite factor in our three Cape-Atlantic League championships,” says coach Bostic, whose teams have been remarkably free of serious injuries in past seasons.

The Jenkins’ Hot Seat is now available for all levels of competition. It’s light, compact and easy to carry. Can be used at home or away games. The Jenkins’ Hot Seat may keep your star in the game and not on the sidelines.

See the Jenkins’ Hot Seat at the N.A.T.A. convention, June 12-15.

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A Tennessee Tech football player (defensive end) suffered a severe cervical hyperextension injury with resultant fracture of the anterior superior aspect of the body of C-6 during an individual tackling drill. The injury occurred when he was hit with a forearm high on the posterior crown of his helmet, thus forcefully hyperflexing his neck.

At the time of injury, he did not exhibit any neurological signs of cord impingement and, in fact, continued to practice for some minutes before exhibiting signs of cervical muscle spasm, at which time he reported to the trainer. At no subsequent time did he show any neurological symptoms. The only sign that he exhibited was a rather generalized spasm in the cervical paravertebral extensor mechanism.

A check of the literature revealed this injury described in O’Donoghue (1) as follows:

“Flexion Injury with Resultant Fracture - As the flexion force is applied and the spinous processes separate, the bodies are forced together and a fracture of the body may occur. In fact, a fracture of the cervical body is more frequent than a complete tear of the posterior longitudinal ligament. If the fracture is not accompanied by a dislocation, the body may compress as much as 75%. The front part of the body will be down to 25% of its normal height, and the posterior part will maintain its normal height. Since the axis of rotation is at the articulations which are adjacent to the posterior portion of the body, the force is primarily applied at the extreme front. These cases are not often accompanied by cord damage since the neural canal is not impinged upon. The patient will have extreme forward flexion of the neck, severe pain, with the feeling of insecurity that accompanies severe ligament injury or dislocation.”

He was withheld from further practice, examined, and x-rayed by the team orthopedic surgeon the following day. He was immobilized in a cervical collar for three weeks. At the end of three weeks, he was reexamined for the third time, the second examination having taken place twelve days from the day of injury, and was cleared to return to participation using the restricting harness shown in Figures 4 and 5. He had no trouble restrengthening his neck muscles using a neck exercise machine* according to the accepted procedures.

*Nautilus Four Way Neck Machine

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Figure 4. Lateral view of hyperflexion harness.

Figure 5. Posterior view of hyperflexion harness.
Which Type Of Football Helmet Is The Safest?

Because epidemiological data reveal associations of cases with various characteristics of interest, not cause and effect, NAIRS would need at least twice the number of schools and colleges using the NAIRS system to have sufficient data to reflect on that question. In the interim, the following preliminary observations can be shared: (1) Current 1975 and 1976 data do not reveal any substantial and stable differences between types and brands of helmets in terms of neck fractures and significant concussions (i.e., kept the athlete out of participation at least one week); (2) The annual frequency of neck fractures and significant concussions was stable for these two years at about 5 per 10000 athletes and 6 per 1000 athletes, respectively, from our sample of nearly 50 schools and colleges.

In interpretation, it is very reasonable to assume that no unduly hazardous type of helmet was being utilized. If a particular mechanism or helmet characteristic is indeed operating within football which puts the athlete at unreasonable risk, and considering the extent of exposure to helmet-related mechanisms, we would expect to have found a much higher rate of significant injury associated with helmets in general or a type or brand of helmet in particular.

How Does One Get Into The NAIRS System?

NAIRS is designed to pool information uniformly from as many sports programs as possible to look at concerns such as the preceding question while assisting each program in keeping meaningful records of its own. To adopt the system, at least one person from the program, preferably a certified athletic trainer, should first attend an orientation session conducted by NAIRS staff or a NAIRS District/Cluster Coordinator. The NATA Convention in Dearborn is an ideal time — Monday evening, June 13, at 7:30 in the Regency Ballroom. Call Sayers “Bud” Miller or John W. Powell at NAIRS (814 865-9593) for other opportunities or clarification. Thanks to a CPSC contract, the cost to the institution will remain but $50.00 for male collegiate sports (all sports you wish to follow) and $50.00 for female collegiate sports (all sports you wish to follow). Data summary tables and athlete case reports are provided monthly to users.

The NAIRS Corner will become a regular section to answer questions concerning submitted data and problems encountered in participation in the study. Please send your inquiries to:

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How to Warm Up

Athletic and health minded individuals can now enjoy and reap the benefits of How to Warm Up, a newly released audio-visual guide for warming up the body prior to sports or other physical exercise. Available in 35mm color filmstrip/cassette or slide/cassette plus detailed Teacher’s Guide, this instructive package is available for sale or rental. It demonstrates the necessity for becoming aware of our individual physical and recreational needs and illustrates specific exercises which have been proven successful for warming up (and warming down!) the body.

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Why Warm Up? The precise reasons for the warm-up and an examination of wrong and doubtful practices is the thrust of this informative instructional 35mm color aid. Utilizing an A-V approach, this study of one phase of sports instruction is the key purpose of “Why Warm Up?” Filmstrip or Slides / Cassette and Guide.

The Foot in Athletics Often care of the foot is taken for granted or subordinated to areas of the body that get sports page headlines. This highly informative 35mm color program uses an audio-visual approach to provide an in-depth study of this vital area of the body. Filmstrip or Slides / Cassette and Guide.

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ATHLETIC TRAINER EVALUATION

By Joan Parks, M.S.
Riverside High School
El Paso, Texas

A successful trainer must possess many unique personal and professional qualities. With an increase in the number of students preparing to become athletic trainers, and more university programs designed for this purpose, there is also an increase in the need for ways for the supervising trainer to evaluate the student trainer. Up to now each supervising trainer has usually developed his or her own method of evaluating the students. Don Lowe, Head Trainer at Syracuse University, published his student trainer evaluation form, consisting of a 15 question summary to be completed by the head trainer. (1) He makes the point that a written evaluation leads to efficiency in that it shows the strengths and weaknesses of the students. However, his evaluation form covers very little on personality, which in my opinion spells the difference between the mediocre trainer and the truly effective trainer.

The purpose of this article is to present an athletic trainer evaluation form to be completed by the coach and the athletes of the team served by the student trainer. It is not designed to replace the supervising trainer's evaluation, but to provide additional information from the coach and athlete as a supplement to the supervisor's evaluation. Of course, it can be used directly by the supervisor as a guide for his or her evaluation.

The Athletic Trainer Evaluation form consists of five parts. Part I is used for information on the coach or athlete completing the form. Part II uses a six point scale to rate the trainer on 19 aspects of the personality traits of the trainer. The same six point scale is used to evaluate the skills and abilities of the trainer in Part III and an over-all rating of the trainer, both professionally and personally, in Part IV. Part V provides an opportunity for any additional comments concerning the trainer. This evaluation form was used initially in evaluating eleven student trainers enrolled in the graduate training program who were assigned to the Women's Intercollegiate Teams at Indiana State University. (June 1976)

References

Athletic Trainer Evaluation

The purpose of this questionnaire is to evaluate the effectiveness of the trainer by the coach and the athletes. The information will be used by the trainer and supervising trainer to assess the strengths and weaknesses of the trainer.

TEAM: _______________________

TRAINER: _______________________

1. Please answer these questions about yourself by placing an “X” in the appropriate box.
   A. Your status .......... ( ) a coach ........ ( ) an athlete
   B. Your sex (gender) ......... ( ) female ........ ( ) male
   C. Your age ( ) under 16 ( ) 16-17 ( ) 18-19 ( ) 20-21 ( ) 22-24 ( ) 25-29 ( ) 30-39 ( ) 40-49 ( ) 50 or older
   D. Do you feel athletic trainers are a necessary part of athletic competition? ................. ( ) Yes ( ) No

ATHLETES ONLY answer the following:
   E. Did you play in at least 60% of the athletic contests of your team? ................. ( ) Yes ( ) No
   F. How often during the season did you use the services of the trainer?
      ( ) Never
      ( ) only for minor problems (band-aids, etc.)
      ( ) for major problems (sprains, strains, concussion, etc.)
      ( ) daily (taping or exercises done almost every day)
II. Please rate the trainer on the following items by placing an “X” in the appropriate box. Use the meanings above the numbers as your guide.

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<th>Item</th>
<th>Rating 6</th>
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<th>Rating 4</th>
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<td>A. Gets respect from the athletes</td>
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<td>B. Gets respect from the coach</td>
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<td>C. Shows a personal interest in the athlete</td>
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<td>D. Shows a concern for the athlete's injuries</td>
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<td>E. Listens to problems</td>
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<td>F. Has an enthusiastic attitude</td>
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<td>H. Treats athletes without discrimination (favoritism)</td>
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<td>I. Has a sense of humor</td>
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<td>K. Is organized and on time</td>
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<td>N. Dresses appropriately and professionally</td>
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<td>O. Has good rapport with the athletes</td>
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<td>P. Has good rapport with the coach</td>
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<td>Q. Explains injuries, treatments, and rehabilitation</td>
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<td>R. Enforces training room regulations</td>
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<td>S. Stays within limits of training responsibilities (does not coach or play doctor)</td>
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III. Please rate the trainer on the following duties.

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<th>Duty</th>
<th>Rating 6</th>
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<td>A. Administration of first aid</td>
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<td>B. Emphasizes conditioning exercises</td>
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<td>C. Responds appropriately to emergency situations</td>
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<td>D. Realizes medical limits of training (refers to physician when necessary)</td>
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<td>E. Rehabilitation (reconditioning after injury using exercise and therapy)</td>
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<td>F. Taping techniques</td>
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<td>G. Prescribes home activities (exercise, ice, etc.)</td>
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<td>H. Uses professional training judgement in allowing an athlete to play</td>
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IV. Please rate the trainer according to your over-all feelings toward him/her.

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<td>A. Professional</td>
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<td>B. Personal</td>
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V. Please make any comments you feel would be helpful for the trainer.
The Four “S” Shoulder Wrap

There are numerous first aid bandaging techniques which are used for various shoulder injuries. Also, there are various harnesses that can be applied for immediate treatment. However, the harnesses are usually sized and/or fitted requiring the storage of the various sizes.

The four “S” shoulder bandage combines the benefits of four commonly used shoulder bandages. This combination is excellent for many shoulder problems and is simple to learn.

This bandage combines the effects of a shoulder spica (Figure 1), A-C leverage wrap (Figures 2-3), and the sling and swathe (Figures 4-6). A double length (11-12 yd.) 6” elastic bandage is used over the ice bag. It provides pressure and ice to the injury site; leverage from the forearm holding the clavicle down, a sling for the arm, and immobilizing the upper arm to the body.

Care should be taken that the bandage is not applied too tight, as the weight of the hanging forearm will tighten the wrap automatically.

Figure 9 shows how towels, or other material, can be placed under the forearm and/or arm. This may make a person with a dislocated shoulder more comfortable.

THE FOUR “S” SHOULDER WRAP

1. Spica Bandage 3. Swathe

Editor’s Note: Anyone wishing to have an idea, technique, etc., considered for this section should send it to Rod Compton, Sports Medicine Division, East Carolina University, Greenville, N.C. 27834. Copy should be typewritten, brief and concise, using high quality photos and/or illustrations.
MINUTES OF THE MEETINGS
of the
BOARD OF DIRECTORS

Sunday
January 30, 1977

The first session was called to order by Mr. Frank George, President, at 12:00 noon, with the following present:

MR. FRANK GEORGE, President
MR. OTTOD DAVIS, Executive Director
MR. WESLEY JORDAN, District 1
MR. RICHARD P. MALACRAE, District 2
MR. HERMAN BUNCH, District 3
MR. ROBERT WHITE, District 4
MR. WILLIAM PLENTJE, District 5
MR. CASHIER BIRDWELL, District 6
MR. WARREN LEE, District 7
MR. WILLIAM CHAMBERS, District 8
MR. TOM WALL, District 9
MR. LARRY SANDIFER, District 10
Also present was Mr. Bruce Melin

CALL TO ORDER:
Mr. George opened the meeting with prayer and then called attention to the agenda to be considered and the limited time available for discussion.

AUDIO VISUAL AIDS COMMITTEE
It was indicated by Mr. Davis that there was no report from the Chairman at this time but that they were making progress in relation to their bibliography and that, hopefully, it would be presented at the June meeting.

CERTIFICATION
Mr. George called attention to the material given the Board members, first calling attention to the proposed new Certified Trainer’s Plaque and the cost figures in connection therewith. Following suggestions and comments offered by various Board members the following motion was passed:

MOVED (by District 4, seconded by District 10 and unanimously carried) that the 1984 convention be held at Nashville.

Mr. George further called attention to the request of the Board members first calling attention to the proposed new Certified Trainer’s Plaque and the cost figures in connection therewith. Following suggestions and comments offered by various Board members the following motion was passed:

MOVED (by District 4, seconded by District 10 and unanimously carried) that the 1984 convention be held at Nashville.

EVALUATION
Mr. Jordan suggested the designation on the convention registration form a donation to the NATA Scholarship Fund. Expression of opinion indicated a mixed reaction, with some thinking it would be a good idea and others believing that matter should be left open.

MOVED (by District 1, seconded by District 2 and carried by a vote of 9-1) that the NATA Scholarship Fund in the amount of $2 be added to the registration form.

Mr. George called attention to the request for a posthumous award in relation to the President’s Challenge Cup. Following considerable discussion as to relative to the present examination procedure, the advantages of an additional examination and the cost and grading thereof.

MOVED (by District 3) that the Certification Committee be authorized to proceed to develop an alternate test form to be paid for with funds generated by the Certification Committee. Mr. White abstained from voting.

Attention was called to the request of District 8 relative to the words “pass an examination” in relation to the procedure for certification and that this be changed to “pass an NATA examination”. Following a brief discussion as to the actual meaning of the intended wording the following motion was presented:

MOVED (by District 8, seconded by District 5 and carried unanimously) to change the wording from “pass an examination” to “pass an NATA Certification Examination”.

Mr. Malacrae next brought up the matter of the meaning of the two years’ experience in Section 4, the Physical/Therapy Section, it being indicated that further inquiry would be made regarding this matter.

Attention was further called to clarification of the definition of “Actively Engaged” in relation to Section 9 of the Certification Procedures. After calling attention to the bylaw provision, by common consent it was indicated this involved an individual being engaged in athletic training as a major responsibility.

NATIONAL CONVENTION
Mr. Hoover presented a lengthy report on the present status of the convention arrangements for Dearborn, the matter of ticket sales, meeting room assignments, the usual matter of obtaining sufficient convention facilities due to the growth of the organization and the schedule of future convention dates, with various suggestions in relation to arrangements for the present forthcoming convention and subsequent conventions being presented to Mr. Hoover and with the following official action being taken:

MOVED (by District 9, seconded by District 8 and unanimously carried) that the 1984 convention be held at Nashville.

DRUG EDUCATION COMMITTEE
Mr. George called attention to the request of the Chairman of the committee of pursuance of the procedure that the Chairman of the Drug Education Committee also be the NATA Liaison Representative to the NCAA Drug Education Committee, with the recommendations of Mr. George and Mr. Davis that this not be done due to difficulties encountered in the past. By common consensus it was agreed that the President inform the Chairman of this Committee that this not be done.

ETHICS COMMITTEE
Mr. George called attention to the new Code of Ethics as previously furnished the Board for their perusal, then asking for comments or suggestions. By way of discussion, Mr. Plentje suggested the addition of a Section 7 to read “any trainer who, by his conduct or comments publicly discredits or lowers the dignity of a member of his profession would be guilty of a breach of ethics”.

MOVED (by District 9, seconded by District 10 and unanimously carried) to accept the Code as written, with the addition of Section No. 7 as proposed by Mr. Plentje as a part 1 to Article 1.

Mr. Birdwell called attention to item number fifty-eight of the agenda concerning Ethics violation results, with Mr. George explaining in detail the action taken at the previous meeting regarding this matter, and the general provisions concerning improper use of the NATA name, logo, trademark and/or insignia. It was the consensus that Mr. George write to Mr. Tow Diehm asking him to investigate the use of the NATA endorsement in connection with the Western Program.

GRANTS AND SCHOLARSHIPS
Mr. George indicated that few had responded to Mr. Newell’s Dollar-a-Month Club, he indicated that it was his preference to donate to the NATA Scholarship Fund. Mr. Jordan suggested the designation on the convention registration form of a donation to this club. Expression of opinion indicated a mixed reaction, with some thinking it would be a good idea and others believing that matter should be left open.

MOVED (by District 4, seconded by District 10 and unanimously carried) that the 1984 convention be held at Nashville.

MOVED (by District 9, seconded by District 8 and unanimously carried) that the 1984 convention be held at Nashville.

Mr. George called attention to the request of the President’s committee of pursuance of the
the advisability of doing this and it being indicated that the request, in this case, was being made in relation to one specific individual. A motion was made by Mr. White to make this award on a posthumous basis but, being no second to the motion, it was declared to be dead lack of a second.

HISTORY AND ACHIEVES

Mr. George indicated that no report had been received. Mr. George further indicated that as the Board proceeded on through the agenda he would relate some of the pertinent activities that were being done regarding the raising of funds. The matter of copyright of the Committee's publications was also briefly mentioned with the consideration of these matters resulting in no official actions to be taken.

HONOR AWARDS

Mr. Davis called attention to the letter from Mr. George. Submitting that those submitting award recommendations be sure that these arrived in the hands of the committee by the published deadline date.

INTERNATIONAL GAMES

Mr. Davis mentioned that no report had, to this point, been received, indicating that possibly something would be received by the June meeting, Mr. Flentje indicated that he had received a report as submitted by this meeting, with Mr. Malacrae indicating that there were some suggestions and recommendations that Mr. Davis do a review analysis of the Lafayette Mailing Service over the last three years and a projected cost analysis using the IBM computer in relation to Philadelphia and any other areas that he might come up with, presenting any information gained for consideration at the June 1977 meeting of the Board.

MEMBERSHIP COMMITTEE

Mr. George called attention to the specific membership problems presently being the determination of an efficient and necessary form by being properly certified, the provisions of Code 2 concerning the associate classification and the provisions of qualifying for actively engaged”. Mr. Melin indicated that his committee was in the process of giving detailed consideration to these and other matters and requested that any suggestions relative to the membership be sent to him for consideration by he and his committee. There followed a lengthy discussion as to the meaning of the “actively engaged” in relation to Code 2. Also discussed was the matter of compatibility between Membership and Certification. Dr. McClow expressed a panel to the question of the Board Mr. George should get together with the Chairmen of the committee and have him take appropriate action to correct the present deficiencies relative to the Honor Award.

PLACEMENT COMMITTEE

Mr. George indicated that no report had been received, he then also calling attention to item #6 on the agenda having to do with the Placement Committee Brochure. In this regard, Mr. Birdwell indicated that District 6 felt like the present brochure was duplication of a brochure from the Career Information Service Committee, indicating that his matter might be further studied with regard to the elimination of unnecessary printing and the subsequent saving of funds. It was the Board's suggestion to Mr. George that he obtain from the committee, a committee report relative to this matter and list it for each of the past three years, how many placement notices are sent out each year and to how many individuals.

PROFESSIONAL EDUCATION COMMITTEE

Mr. Malacrae indicated that the work accomplished by this committee at its last session, he then calling attention to the various requests presented. Mention was made of District 5 and unanimously carried that the Board approve the resignation of Dale Mallett, Washington State, from the committee.

MOVED (by District 2, seconded by District 7 and unanimously carried) that the Board approve the expenditures of NATA the approval of the educational curriculum at Slippery Rock and the report received due to the feeling that the committee had acted hastily in this matter.

MOVED (by District 4, seconded by District 7 and carried) that the Committee Chairmen be granted approval for the advertising of applicants for program courses for next summer.

MOVED (by District 2, seconded by District 6 and carried that the Board be present in order to have a planned conference involving Program Directors at Nashville, Tennessee next year, in order to have this self-supporting and if the pre-registration does not indicate sufficient interest, that it be cancelled.

MOVED (by Mr. Davis, seconded and unanimously carried) that Request No. 5 of the professional education committee be denied.

MOVED (by District 6 and unanimously carried that the Education Committee and the Certification Committee respond to the thoughts that curriculum should not be allowed to graduate apprentice trainers, with a report to be presented at the June 1977 meeting of the Board.}

COMPUTERS FOR NATA

Mr. Davis explained the present status relative to the procurement of a computer for the NATA, calling attention to costs, cost savings, various computer programs that could be used in handling NATA business and the like. Following a discussion of the matter the following action was taken: 

MOVED (by District No. 8, seconded by District No. 5 and unanimously carried) that Dr. Davis do a cost analysis of the Lafayette Mailing Service over the last three years and a projected cost analysis using the IBM computer in relation to Philadelphia and any other areas that he might come up with, presenting any information gained for consideration at the June 1977 meeting of the Board.

MOVED (by District 3, seconded by District 5 and carried) that the Board of Directors approve the reactivation of the membership status survey and provide adequate funding in the amount of approximately $100.

MOVED (by District 5, seconded by District 8 and carried that the Board approve the short-term courses and the procedure for obtaining the short-term course approvals.

MOVED (by District 3, seconded by District 5 and carried) that the Board approve the appeal proceedings as submitted for consideration.

PUBLIC RELATIONS

Mr. White briefly commented on the public relations concerning the Dearborn Convention, with Mr. George indicating that this report was merely informational in nature.

CAREER INFORMATION AND SERVICES

Mr. George called attention to the $225 budget request of the chairman for the printing of a brochure.

MOVED (by Mr. Flentje, seconded by Mr. Jordan and carried) that the request be granted.

RESEARCH AND INJURY COMMITTEE

MOVED (by Mr. Chambers, seconded by Mr. Birdwell and carried) that the resignation of the Chairman be accepted.

MOVED (by Mr. White, seconded by Mr. Birdwell and carried) that Mr. John Powell be approved as the new Chairman.

AMERICAN ACADEMY OF PEDIATRICS

Mr. Malacrae discussed the booklet that the Academy would like to produce for its members, with Gary Delorge and that the booklet was in need of revision and that he had sent several ideas to Dr. McClow. He concluded by indicating that this group was looking forward to having this booklet produced.

MOVED (by Mr. Flentje, seconded by Mr. Chambers and carried) that the report be accepted.

AAHPER

Mr. George called attention to the report in the material furnished, indicating that there was little to report and that the request be granted.

MOVED (by Mr. Flentje, seconded by Mr. White and carried) that the report be accepted.

AMERICAN COLLEGE OF SPORTS MEDICINE

Mr. George indicated that there was no report but that there would be a request for recognition in support of the NATA request for licensure.

MOVED (by Mr. Jordan, seconded by Mr. Lee and carried) that the report be accepted.

AMERICAN COLLEGE HEALTH ASSOCIATION

Mr. Davis indicated that no report had been received and that there would be no report until they held their annual meeting sometime in July.

MOVED (by Mr. Jordan, seconded by Mr. Lee and carried) that the report be accepted.

AMERICAN CORRECTIVE THERAPY ASSOCIATION

Mr. George called attention to the report submitted, indicating his feeling that no doubt this organization was going to request that the NATA align some of its programs with some of their programs. He indicated that there was no action to be taken.

MOVED (by Mr. Flentje, seconded by Mr. Sandifer and carried) that the report be accepted.

DISCUSSION further ensued as to the sending of a liaison representative to this organization's meeting to be held in July, with the suggestion being offered that when the time arrived that somebody close to the area of the meeting be sent to represent the NATA. No further action was taken at this point.

AMERICAN PHYSICAL THERAPY ASSOCIATION

Mr. George called attention to the recent increase in dues instituted by this organization and the change in membership classification.

MOVED (by Mr. Flentje, seconded by Mr. Lee and carried) that this brief report be accepted.

COMMITTEE ON COMPETITIVE SAFEGUARDS AND MEDICAL ASPECTS OF SPORTS

Mr. George and Mr. Davis commented on the meeting of this organization with the NATA held in January, indicating that the lengthy period of discussion concerned the release form for athletes to professional teams. Mr. Davis further expressed the hope that the Joint Commission would become more involved so far as a contact meeting with this organization is concerned and that more in-depth material would be forthcoming from each group.

MOVED (by Mr. Jordan, seconded by Mr. White and carried) that the report be accepted.

NATIONAL ASSOCIATION FOR GIRLS AND WOMEN IN SPORTS

Mr. George indicated that there are a number of women within NATA who are concerned about some of the things this organization is doing regarding what is called Athletic Training (Code of Ethics) and that this had likewise been discussed at the last Board meeting; he further indicating that it was not the intent of the NATA being involved in a fight between the NATA and this organization, with further indicating that it was the position of the NATA that a certified trainer should be able to handle men as well as women's sports. No further action was taken.

MOVED (by Mr. Flentje, seconded by Sandifer and carried) that the report be accepted.

NAIA

Attention was called to the letter received from this organization, with further indication that there was nothing required in the way of Board action.

MOVED (by Mr. Birdwell, seconded by Mr. White and carried) that the report be accepted.

NCAA FOOTBALL RULES COMMITTEE

Attention was called to the letter written by Mr. Jordan. Mr. Jordan likewise commented upon the difficulty of getting his players to use the prescribed hip pads and thigh pads, he then commenting upon his letter written to the Executive Secretary of the NCAA Rules Committee regarding this matter. Mr. Davis indicated that this matter had previously been referred to the rules committee but as of the present moment no reply had been received. It was indicated that there was nothing further to report concerning this committee.

FEDERATION OF STATE HIGH SCHOOLS

Mr. George indicated that no report had been received, with there being no further discussion regarding that organization or the matter of proceeding to a consideration of the next agenda item.

NCSAE

Mr. George called attention to the resignation of the NATA official representative, with the request that Mr. White assume this position.
MOVED (by Mr. Jordan, seconded by Mr. Malacrea and unanimously carried) that Mr. White be appointed official action being taken on this item.

Mr. Davis called attention to the packet of materials furnished regarding the annual meeting of the USOC, following which a discussion ensued relative to the attendance of the presently appointed representative to meetings of this organization. It was also noted that the invitation for who received the invitations for these meetings was likewise discussed with it being indicated by Mr. George that he would check into these matters. Then followed an extended discussion as to the procedures used by this organization for the selection of certified training directors, the dissemination of certified trainers around the country with the present system in use and possible avenues of approach concerning the solution of some of these problems, with no official action being taken on this item.

ETHICS COMMITTEE
Attention was called to the request of the committee chairman to have Miss Linda Treadway approved as a member of the Ethics Committee.

AD HOC COMMITTEE ON STATE LICENSURE
Board members submitted by various individuals relative to the present status of licensure in their respective areas, with no official action being taken but with directions made by Mr. Birdwell that the Board members keep on top of the issues and do everything they can to help achieve the NATA goals in this venture.

NATIONAL HEAD AND NECK INJURY REGISTRY
Mr. George called attention to the request of Dr. Torg, following which a discussion ensued relative to the feasibility of incorporating such a report in the constitution of the organization. With the final consensus of this being left in the hands of the local arrangements committee for final decision.

SPORTS SAFETY AND HEALTH CARE SOCIETY
Attention was called to the report from Mr. Miller, with Mr. George expressing his personal worries about it. Mr. Davis indicated that there was nothing to worry about in this respect.

MOVED (by Mr. Flentje, seconded by Mr. Malacrea and carried) that the report be accepted.

SCERRING SYMPOSIUM
Mr. Davis indicated that a check for $1,400 had been received as prepayment for certain expenses and then called attention to the June 4th letter outlining all the details concerning the symposium.

MOVED (by Mr. Flentje, seconded by Mr. Malacrea and carried) that the report be accepted.

1977 CONVENTION
It was indicated that this item has previously been extensively discussed at the opening of the meeting and that there was nothing further to add.

STATE ORGANIZATIONS
Mr. Malacrea called attention to his formal proposal regarding this matter, he proceeding to propose wording to the effect that "NATA goes on record that it encourages formation of State Societies or Associations where, in the opinion of the State Licensure Committee, such groups will be necessary for or enhance the professional status and the implementation of state licensing regulations regarding the profession of athletic training, with the record to further show that NATA feels that members of such societies or associations shall be independent in all respects from membership in NATA."

MOVED (by Mr. Malacrea, seconded by Mr. Jordan and unanimously carried) that the statement as above indicated be adopted.

SOUTH DAKOTA STUDY
The background information concerning this matter was called to the attention of the Board, it being the suggestion of Mr. Birdwell being no opposition to it. Mr. George takes it upon himself to write a letter to the individuals involved expressing the feelings of NATA regarding this issue.

TRAINER OF THE YEAR AWARD
A lengthy discussion ensued relative to the procedures used in the making of the last award, the concerns of the membership over the issues regarding eligibility and notification pertaining to the award, the commercial connotations involved.

MOVED (by Mr. Jordan, seconded by District 8 and carried) that Mr. Davis talk to the people involved regarding this matter and endeavor to work out with them some of the problems expressed by the Board members and that the matter be brought back to the Directors at the June meeting before any final decision is made.

VIE RECIE CONTRIBUTION
Mr. Birdwell indicated the feelings of his district regarding this matter, he indicating that the contributions had been taken up by the district and mailed to Mr. Recie, further expressing the feeling of his district that if other contributions were approved that this likewise should be approved. Further discussion indicated the feeling that the line relating to these matters should be drawn at this point and no further contributions officially recognized; after which discussion was dropped on the matter and the board proceeded to consideration of the next agenda item.

ATHLETIC TRAINING WORKSHOP IN JAPAN
Mr. George reported in detail on his participation in this workshop, indicating that it had been greatly appreciated and received with the only dark cloud being that those participating had been led to the belief that upon completion of the prescribed program they would automatically be accepted to NATA. Further discussion ensued relative to the issuance of invitations for these meetings was likewise discussed with it being indicated by Mr. George that he would check into these matters. Then followed an extended discussion as to the procedures used by this organization for the selection of certified training directors, the dissemination of certified trainers around the country with the present system in use and possible avenues of approach concerning the solution of some of these problems, with no official action being taken on this item.

MOVED (by Mr. Chambers, seconded by Mr. Flentje and carried) that a course credit again be offered to those individuals involved.

NAME CHANGE OF THE ASSOCIATION
Mr. Chambers indicated the feelings of his district regarding this matter, he indicating that he was presenting the matter in behalf of his district but did not believe he already had any formal vote or suggestions. Mr. Davis, in commenting, indicated that he had merit for later consideration but he felt that this was the appropriate time for seriously considering it. Following expressions both pro and con by several of the Board members, further consideration of the matter was dropped.

HENRY SCHMIDT LETTER
Mr. Davis indicated that the letter had been placed in the material of the board members, he indicating that the letter had been furnished on an informational basis only. There being no further comment, the Board proceeded to the next agenda item.

NCAA ALL-STAR HIGH SCHOOL GAMES
Mr. Davis indicated that this has already been presented to the Joint Commission and copies would be forwarded to the NCAA.

RELEASE OF INFORMATION TO PROFESSIONAL TEAMS
An extended discussion ensued relative to the procedures used by the various schools concerning the protection of the confidentiality of any information released with Mr. Davis indicating that he would like to see the Association develop another model form and have it appear in the minutes or in the Journal as a suggested form for college use. Following perusal and consideration of several forms submitted.

MOVED (by Mr. Sandler, seconded by Mr. Birdwell and carried) that the particular form as agreed to by the Board be diagramed out in the Journal, with a procedure for the setting up of committees, and there then following a discussion as to the advantage to the NATA of having all certified individuals on all committees.

ALTERNATE STARTING DATES FOR NATIONAL ORGANIZATION
Mr. George called attention to the letter received from Mr. Miller, indicating the feelings of his district as to whether or not the Board wished to establish alternate starting dates for the National Athletic Training Organization. There being no further discussion, the Board proceeded to consideration of the next agenda item.

STUDY GUIDE FOR THE NATIONAL CERTIFICATION EXAMINATION
Mr. Birdwell requested if any further action had been taken relative to the discussion at the Boston meeting, with Mr. George indicating that there was a provision in the Bylaws covering this matter. Mr. Birdwell then indicated that he did not desire to press the issue further.

INTERNATIONAL OLYMPIC COMMITTEE
Mr. Malacrea indicated that it was the hope that a formal report could be made at the June meeting of the Board.

CHIROPRACTIC-NATA STAND
Mr. Birdwell indicated the position of his District as being that the NATA take some stand on the matter, with the comment being made by Mr. George that, in the final analysis what the NATA should be doing is promoting and improving its own profession, at which point no further discussion ensued.

SIGNAL TO DENOTE SPEARING
Mr. Birdwell indicated the feeling of his district to be that a second request be made regarding this issue. Mr. Davis indicated that this matter had been processed through the Joint Commission, and this is where the matter stood at the present time. Mr. Birdwell indicated he did not desire to press the issue further.

COURSE CREDIT FOR CONVENTION ATTENDANCE
Mr. Chambers called attention to the pursuit of this during previous years and that each year there was a further increase in attendance.

MOVED (by Mr. Chambers, seconded by Mr. Malacrea and carried) that a course credit again be offered to those individuals involved.

ATHLETIC TRAINEE EDUCATION WORKSHOPS IN JAPAN
Mr. George indicated the details concerning this workshop, indicating that it had been greatly appreciated and received with the only dark cloud being that those participating had been led to the belief that upon completion of the prescribed program they would automatically be accepted to NATA. Further discussion ensued relative to the issuance of invitations for these meetings was likewise discussed with it being indicated by Mr. George that he would check into these matters. Then followed an extended discussion as to the procedures used by this organization for the selection of certified training directors, the dissemination of certified trainers around the country with the present system in use and possible avenues of approach concerning the solution of some of these problems, with no official action being taken on this item.

MOVED (by Mr. Chambers, seconded by Mr. Flentje and carried) that a course credit again be offered to those individuals involved.

NAME CHANGE OF THE ASSOCIATION
Mr. Chambers indicated the feelings of his district regarding this matter, he indicating that he was presenting the matter in behalf of his district but did not believe he already had any formal vote or suggestions. Mr. Davis, in commenting, indicated that he had merit for later consideration but he felt that this was the appropriate time for seriously considering it. Following expressions both pro and con by several of the Board members, further consideration of the matter was dropped.

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Mr. Davis indicated that this has already been presented to the Joint Commission and copies would be forwarded to the NCAA.

RELEASE OF INFORMATION TO PROFESSIONAL TEAMS
An extended discussion ensued relative to the procedures used by the various schools concerning the protection of the confidentiality of any information released with Mr. Davis indicating that he would like to see the Association develop another model form and have it appear in the minutes or in the Journal as a suggested form for college use. Following perusal and consideration of several forms submitted.

MOVED (by Mr. Sandler, seconded by Mr. Birdwell and carried) that the particular form as agreed to by the Board be diagramed out in the Journal, with a procedure for the setting up of committees, and there then following a discussion as to the advantage to the NATA of having all certified individuals on all committees.

ALTERNATE STARTING DATES FOR NATIONAL ORGANIZATION
Mr. George called attention to the letter received from Mr. Miller, indicating the feelings of his district as to whether or not the Board wished to establish alternate starting dates for the National Athletic Training Organization. There being no further discussion, the Board proceeded to consideration of the next agenda item.

STUDY GUIDE FOR THE NATIONAL CERTIFICATION EXAMINATION
Mr. Birdwell requested if any further action had been taken relative to the discussion at the Boston meeting, with Mr. George indicating that there was a provision in the Bylaws covering this matter. Mr. Birdwell then indicated that he did not desire to press the issue further.

INTERNATIONAL OLYMPIC COMMITTEE
Mr. Malacrea indicated that it was the hope that a formal report could be made at the June meeting of the Board.

CHIROPRACTIC-NATA STAND
Mr. Birdwell indicated the position of his District as being that the NATA take some stand on the matter, with the comment being made by Mr. George that, in the final analysis what the NATA should be doing is promoting and improving its own profession, at which point no further discussion ensued.

SIGNAL TO DENOTE SPEARING
Mr. Birdwell indicated the feeling of his district to be that a second request be made regarding this issue. Mr. Davis indicated that this matter had been processed through the Joint Commission, and this is where the matter stood at the present time. Mr. Birdwell indicated he did not desire to press the issue further.

COURSE CREDIT FOR CONVENTION ATTENDANCE
Mr. Chambers called attention to the pursuit of this during previous years and that each year there was a further increase in attendance.

MOVED (by Mr. Chambers, seconded by Mr. Malacrea and carried) that a course credit again be offered to those individuals involved.
Tear Out & Hang on Wall

Compliments of

NATIONAL ATHLETIC TRAINERS ASSOCIATION
TWO GOOD REASONS TO WEAR YOUR MOUTHGUARD

**PHOTO A**

PHOTO CREDIT: DR. GROVER W. SMITH

PHOTO B

COURTESY OF NATIONAL ATHLETIC TRAINGERS ASSOCIATION

**PHOTO A**

INJURY DESCRIPTION:
- AVULSED LATERAL WALL AND FLOOR OF THE LEFT MAXILLARY SINUS (Photo A)
- Luxated 3 TEETH (2 BICUSPID, 1 MOLAR), and ATTACHED ALVEOLAR BONE (Photo B)

**PHOTO B**

HISTORY:
1. WAS NOT WEARING MOUTHGUARD WHILE PLAYING HIGH SCHOOL FOOTBALL
2. HIT BY ELBOW WHILE PLAYING HIGH SCHOOL FOOTBALL

COURTESY OF EAST CAROLINA UNIVERSITY SPORTS MEDICINE DIVISION

**PHOTO A**

DESCRIPTION:
- AVULSED LATERAL WALL AND FLOOR OF THE LEFT MAXILLARY SINUS (Photo A)
- Luxated 3 TEETH (2 BICUSPID, 1 MOLAR), and ATTACHED ALVEOLAR BONE (Photo B)
Tear Out & Hang on Wall

Compliments of

NATIONAL ATHLETIC TRAINERS ASSOCIATION
Athletic Training, the Journal of the National Athletic Trainers Association, welcomes the submission of manuscripts which may be of interest to persons engaged in or concerned with the progress of the athletic training profession. The following recommendations are offered to those submitting manuscripts:

1. Eight copies of the manuscript should be forwarded to the editor and each page typewritten on one side of 8 1/2 x 11 inch plain paper, triple spaced with one inch margins.
2. Good quality color photography is acceptable for accompanying graphics as well as glossy black and white prints. Graphs, charts, or figures should be of good quality and clearly presented on white paper with black ink, in a form which will be legible if reduced for publication.
3. The list of references and citations should be in the following form: a) books: author, title, publisher with city and state of publication, year; b) articles: family names, initials and titles of all authors, title of article, journal title, with abbreviations accepted as per Index Medicus, volume, page year. Citations in the text of the manuscript will take the form of a number in parenthesis, (7), directly after the reference or name of author being cited, indicating the number assigned to the citation in the bibliography.
4. It is the understanding of the editor of Athletic Training that manuscripts submitted will not have been either previously published nor simultaneously submitted to another journal. The author accepts responsibility for any major corrections of the manuscript as suggested by the editor.
5. It is requested that each submitting author include a brief biographical sketch and acceptable photograph of themselves. Please refrain from putting paper clips on any photograph.
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