



# ATHLETIC TRAINING

THE JOURNAL OF THE NATIONAL ATHLETIC TRAINERS ASSOCIATION



**IN THIS ISSUE:**

Evaluating the Fitting of Football Shoes

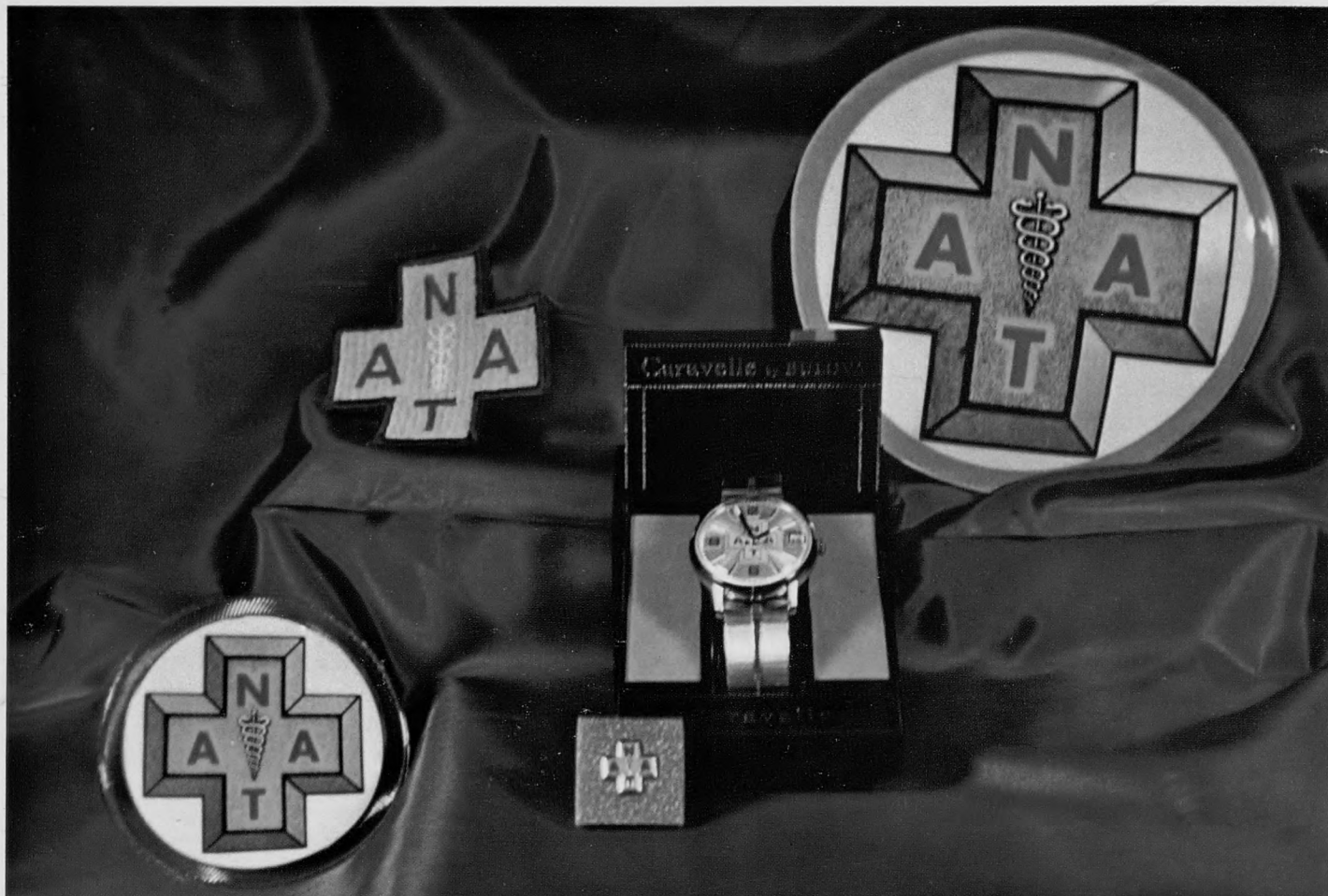
Schering Symposium: The Physical Rehabilitation  
of Selected Shoulder Injuries

A Survey on Athletic Injuries

The N.A.T.A. Presidential Candidates

By-Laws of the National Athletic Trainer's Association

VOLUME 13  
NUMBER 1  
SPRING 1978



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# ATHLETIC TRAINING

THE JOURNAL OF  
THE NATIONAL ATHLETIC TRAINERS ASSOCIATION

Volume 13

Number One

Spring 1978

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and Journal Committee Chairman**

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## FROM THE PRESIDENT'S DESK

Dear NATA Member,

The Board of Directors had just completed its Winter Board Meeting in Nashville, Tenn. The meeting was held in conjunction with the Professional Education and Certification Committee meetings and the Professional Preparation Conference. The committees accomplished a great deal and deserve the appreciation of all NATA Members. The Professional Preparation Conference was well attended and the program was excellent. Programs such as these contribute a great deal to the knowledge and expertise of the athletic trainer. Jack Redgren was responsible for the administration and Phil Donley was responsible for the program content of the conference.

The Board of Directors has nominated Bill Chambers of California and Eddie Lane of Texas as the candidates for President of NATA. They are two excellent candidates who have served on the Board of Directors and I'm sure will represent NATA well. All NATA Certified Members will receive a ballot. Please vote in this most important election. This is an NATA election in which the Certified Members are directly responsible for the outcome.

In an attempt to have more members involved with the decision making process, a number of items were discussed by the Board of Directors but were not voted upon. One of these items is the Actively Engaged clause, which states:

The NATA definition of "actively engaged" is as follows: A person who is on a salary basis (no fee) employed by an educational institution, professional athletic organization, or other bona fide athletic organization for the duration of the institution's school year or for the length of the athletic organization season and who performs the duties of athletic trainer as a major responsibility of his employment; or whose responsibility is the teaching in an NATA approved athletic training curriculum is actively engaged in athletic training.

Should actively engaged be a requirement for joining NATA as an associate member? Should actively engaged be a requirement to maintain associate membership? Another item which was discussed is should there be a new Section V added to the NATA Procedures for Certification to accommodate the graduates of NATA Approved Faculty-Trainer Programs? Please give a good deal of thought and discussion to these matters and let the Directors know how you wish them to vote.

The profession of athletic training has made great strides in the past. We must continue to do so. Two areas where a great deal of work needs to be done are placing faculty-trainers on the high school level and licensing athletic trainers. Both these goals can be accomplished if high school administrators can be convinced of the need and the worth of the athletic trainer and the same may be said of state legislators. It is up to us to convince these two groups and every athletic trainer should make the concentrated effort to do so.

Sincerely,

*Frank George*  
**FRANK GEORGE**  
President NATA

Annual Meeting — Clinical Symposium  
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## Editor's Comments

Rod Compton, A.T.C.  
Editor-in-Chief  
East Carolina University

### Read Your By-Laws

The NATA By-Laws are included in this issue. This completes a series of the three main governmental documents of the NATA within the last three issues. The Fall 1977 *Journal* had the Code of Ethics in the "Announcements" section. The Winter 1977 *Journal* contained the NATA Constitution. You should keep these available for reference in NATA matters.

### Late Billing for Dues

Mary Edgerley, from the new NATA office in Greenville, N.C., has asked me to let you know that all of the billings for your annual dues are now in the mail. They were late due to the conversion of offices and going to complete computer programming. Please remit your dues as soon as you receive your statement.

Also, very shortly you will be receiving a mailing containing information from the NATA on the 1978 Annual Meeting and Clinical Symposium in Las Vegas on June 12-15, 1978.

### Great Nashville Meeting!

A most sincere congratulations must go out to Phil Donley, Jack Redgren and all of the others who helped put on the Program Directors Meeting in Nashville in early January. It was well handled, as usual, and a most educational program. Sure makes you want to do it again!

### Committee Chairmen Addresses

Many times members want information on a specific area but don't know where, or who, to write. The names and addresses of the NATA Committees and the Chairmen are listed on page 40 for your reference. This will avoid the inappropriate persons(s) getting unnecessary mail and slowing down the answering of your inquiries.

There seems to be confusion as to members writing me for general NATA business or information. This probably is due to the NATA office and my office now being located in the same city. The only matters I handle are those involving the *Journal*. Any other matters should be handled by the NATA Office, P. O. Box 1865, 112 South Pitt Avenue, Greenville, NC 27834, (919) 752-1725, or the appropriate NATA officer. I love getting mail, but it can get out of hand!

### Keep Those "Tips" Rolling In

As you can see from this issue the membership has really been helpful in providing many "Tips From The Field". Keep on sending them in and we will publish them as soon as possible.

### Thank You Frank

June will mark the end of Frank George's term as our NATA President and the naming of a new one. We all owe Frank a great deal for the vast amount of blood, sweat, and tears he has dedicated to our professional organization. Speaking for the *Journal*, I want to thank him for all of his support, patience, contributions, etc., that he has given to his "Labor of Love". Maybe special arrangements could be made for a third term just for you, Frank! What do you think? Just kidding, Frank!

The photos and biographical sketches of the two presidential candidates, Bill Chambers and Eddie Lane, are included in this *Journal* for your information. Look 'em over and be sure, that, if you are eligible to vote, that you do so!

See you at the MGM Grand! Keep 'em healthy!

*Rod Compton*



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## Calendar of Events

### March, 1978

**11-12** - Annual Sports Medicine and Conditioning Seminar, Sea Tac Motor Inn, Seattle, Washington. Contact Keith D. Peterson, D.O., The Sports Medicine Clinic, 5409 17th Northwest, Seattle, Washington 98107.

**17-18** - District 4 Meeting, Holiday Inn, Merrillville, Indiana. Contact Gordon Stoddard, University of Wisconsin, Madison, Wisconsin 53706.

**17-19** - District 5 Meeting, Kansas City, Kansas. Contact Bill Flentje, Iowa State University, Ames, Iowa 50010.

**17-19** - Lubbock Sports Medicine Conference, Lubbock Memorial Civic Center, Lubbock, Texas. Contact Bill Grist P. T., Program Coordinator, 2412 50th Street, Lubbock, Texas 79412.

**19-23** - Sports Medicine Seminar, Kiawah Island, South Carolina. Contact Institute for Continuing Education, Box 1103, Richmond, Va. 23230.

**30-April 2** - Third Annual Dogwood Festival Conference (Sports Medicine and Orthopaedics), Atlanta, Georgia. Contact Ronald G. Peyton, Sports Medicine Education Institute, 20 Linden Ave., N.E. Atlanta, Georgia 30308.

### April, 1978

**7-11** - American Association of Health, Physical Education and Recreation National Convention, Kansas City. Contact AAHPER, 1201 16th Street N.W., Washington, D.C. 20036.

**29** - "Sports 1978: Medical, Psychological and Social Issues". For additional information write Health Sciences, UCLA Extension, P.O. Box 24902, Los Angeles, CA 90024 or call Marilyn Murray, program representative, at (213) 825-7186.

### May, 1978

**5-6** - Eighth Annual ECU Sports Medicine Conference. Contact Rod Compton, Sports Medicine Division, East Carolina University, Greenville, N.C. 27834.

**24-27** - American College of Sports Medicine Meeting, Capital Hilton, Washington, D.C. Contact G. R. Jenks, 1440 Monroe St., Madison, WI 53706.

### June, 1978

**12-15** - The Annual National Athletic Trainers Association Annual Meeting and Clinical Symposium, M.G.M. Grand Hotel, Las Vegas, Nevada. Contact N.A.T.A., 3315 South Street, Lafayette, Indiana.

**21-24** - The Art and Science of Sports Medicine, University of Virginia, Charlottesville, Virginia 22903. Contact Joe Gieck, Head Athletic Trainer, University of Virginia, Department of Athletics, Charlottesville, Virginia 22903.

*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.**

# "Tips from the Field"

## "USE THOSE TAPE CORES"

Heydon A. Moore, head trainer at Avon Old Farms school in Avon, Connecticut submits two good uses for the plastic cores left over from rolls of tape.

(1) These cores can be used to give our athletes small amounts of the balms we use. The core is filled with whatever salve is needed, taped at both ends and our athlete can carry it back to the room for use when the training room is closed.

(2) These cores can be easily cut with bandage scissors. (step 1) I use them to make artificial replacements for injured or torn fingernails or toenails. (step 2) I pad the injured nail with gauze and vaseline, (step 3) trim the plastic slightly larger than the original nail and tape firmly in place. (step 4) I have been using this trick for several years and have found it to be successful. ●



Step 1. Cut plastic core in half lengthwise and then each piece crosswise ending up with four (4) pieces.



Step 2. Trim the quarter section of the plastic core to a size slightly larger than the injured toenail or fingernail.



Step 3. Depending on the damage to the nail, i.e. Nail completely off or still in place, cover with an ointment such as vaseline or a medically prescribed ointment, then pad with either gauze or thin sponge rubber.



Step 4. Place plastic nail in position and tape firmly in place. The athlete can now resume activities.

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.●

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# Announcements

## Trainer of the Year

The second annual NUTRAMENT Trainer of the Year Awards, sponsored by NUTRAMENT® and Mizlou Television Network, was presented at halftime of the nationally televised Peach Bowl in Atlanta, Georgia on Saturday, December 31, 1977.

Winners in the four categories — Professional, College, Junior College and High School — were determined by ballots submitted by athletic trainers from the four divisions.

NUTRAMENT Trainer of the Year Award winners for 1977 are:

Professional Division - Otho Davis  
Head Trainer  
Philadelphia Eagles  
Philadelphia, PA

College Division - Lindsay McLean  
Head Trainer  
University of Michigan  
University of Michigan  
Ann Arbor, MI

Jr. College Division - Bill Chambers  
Head Trainer  
Fullerton Jr. College  
Fullerton, CA

High School Division - James Dodson  
Head Trainer  
Midland High School  
Midland, TX

Rob Bransom, Vice President - Director of Broker Sales for The Drackett Products Company, presented trophies to each winner plus a total of \$5,500 in scholarships. A \$1,000 scholarship was awarded to the College and Junior College winners with the monies donated in the name of the winners to be applied to the individual school's scholarship program. A \$1,500 award was given to the High School winner's school to be used to improve that school's training room facilities. In the

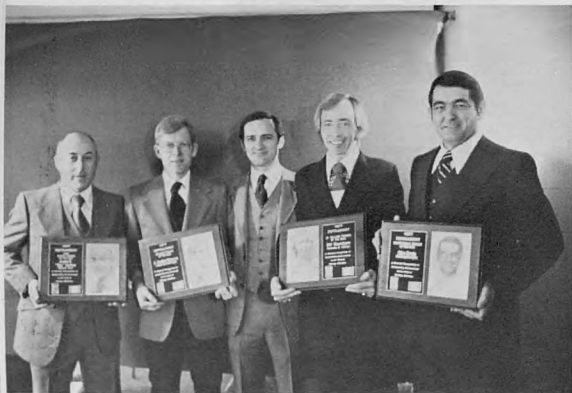
Professional category, \$2,000 was awarded to the National Athletic Trainer's Association Scholarship Fund in the name of the winning pro trainer.

## Sports Medicine Conference

The San Francisco Medical Society's Eighth Annual Sports Medicine Conference 1978. This

year's conference will be held at San Francisco State University and will offer Continuing Medical Education Credit for physicians as well as University Extension Credit for coaches, physical therapists, nurses, trainers and other interested individuals.

Further information is available by contacting James M. Glick, M.D., Conference Chairman, Sports Medicine Conference, San Francisco Medical Society, 250 Masonic Avenue, San Francisco, CA 94118.



L. to R. JAMES DODSON, LINDSY MCLEAN, ROB BRANSOM, BILL CHAMBERS, AND OTHO DAVIS

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### *District III Ride Board*

So that all members of District III can have an opportunity to attend the 1978 NATA Convention in Las Vegas we are sponsoring a District III ride board. The ride board will be coordinated by:

Pete Haberstroh A.T.,C.  
Graduate Assistant  
Box 13, Godwin Hall  
James Madison University  
Harrisonburg, Virginia 22801  
(703-433-6562)

Procedure for registration will consist of mailing Pete a stamped, self addressed postcard. (June Address)

State whether you will be driving and need riders or whether you are looking for a ride. Be sure to include your phone number. Deadline for registration will be May first so that you will have plenty of time to communicate with your fellow trainer and plan your trip. Any questions or problems please contact Pete.

See you in Las Vegas.

### *Oops!*

The biographical information on Thomas V. Pipes in the Fall 1977 (Vol. 12, No. 3) issue of the NATA Journal was an error in printing. Mr. Pipes wrote the article "The Acquisition of Muscular Strength Through Constant and Variable Resistance

Strength Training" on pages 146-151. The biographical sketch should read Thomas V. Pipes earned his B.A. and M.A. in exercise physiology from the University of California at Davis. Mr. Pipes is a Ph.D. candidate at the University of Southern California working in cardiovascular and neuromuscular physiology.

### *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: William E. Newell, Purdue University Student Hospital, West Lafayette, Indiana 47907.

### *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 7018, Ann Arbor, Michigan 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 after that date in order to assure that the application deadline of sixty (60) days 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, Post Office Box 7018, Ann Arbor, Mich. 48107.

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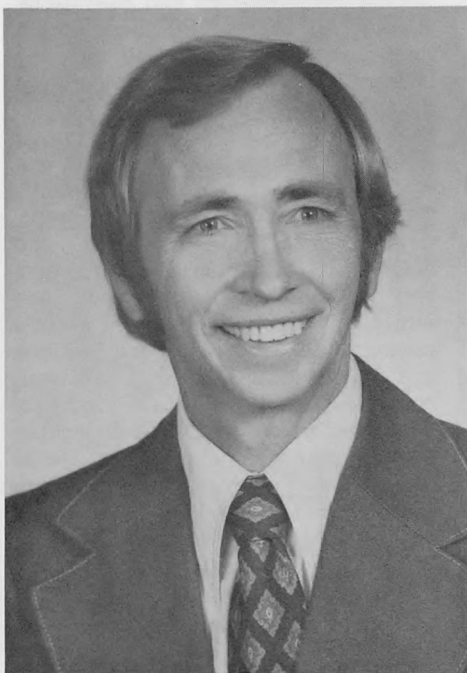
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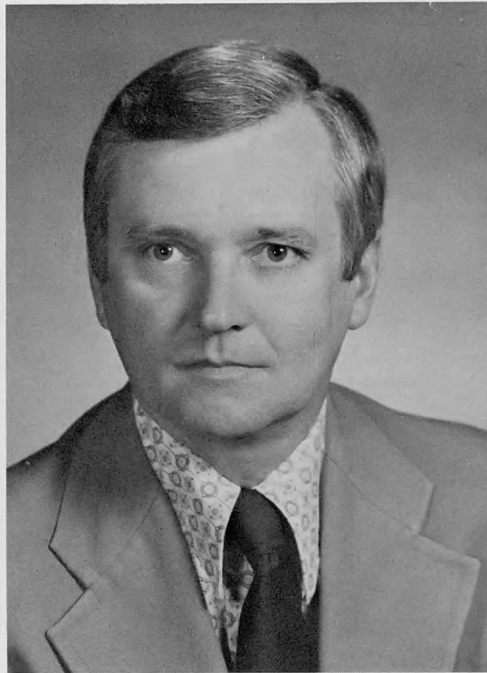


## Bill Chambers

Bill Chambers has been the Head Athletic Trainer at Fullerton Junior College, Fullerton, California since 1962. He attended the University of Oklahoma and is a graduate of the University of Missouri, completing a degree in Physical Education in 1961. He also holds a minor in physiology and hygiene. He is married, father of two. In addition to his responsibilities to the 12 sport intercollegiate program at Fullerton Junior College, he teaches courses in prevention and care of athletic injuries. He also teaches graduate courses, in extension, on medical supervision of athletes for McPherson College, McPherson, Kansas.

Mr. Chambers began his career serving as a student trainer at the University of Oklahoma for 4 years and University of Missouri for 3 years. He has been selected as a trainer for the East-West Shrine Basketball Game in Kansas City, 1960-1962, USA-USSR Track Meet, Los Angeles, 1966, British Commonwealth Games, Los Angeles, 1968, Pan Africa - USA International Games, Durham, NC, 1971 and the Pan American Games, Cali, Columbia, South America in 1971. He was also selected as the National Junior College Trainer of the Year in both 1976 and 1977.

Bill has been a member of the National Athletic Trainers since 1964 and was certified in 1970 when the organization began certifying members. Since 1964, he has served on the Board of Directors for 2 terms and been a member of both the ethics and publicity committee. He has been a National Program speaker 3 times; in 1964, 1971 and in 1977. He was the Convention Chairman in 1975 and will be chairman of the National Meeting this year in Las Vegas.



## Eddie Lane

Eddie Lane has been employed as the Head Athletic Trainer of the Dallas Independent School District, Dallas, Texas since 1973. He is married to the former Jane Bentley, and they are the parents of two children, Stephanie and Brad. He received a B.S. degree in physical education from Southern Methodist University in 1955 and a M.Ed. in 1956 from the same university. In 1952 he completed Medical Field Service School, United States Army and served as physical therapist in the 109th Field Hospital, Salzburg, Austria before being discharged as a corporal in 1953. Mr. Lane has been an officer in the National Athletic Trainers Association, as Director of District Six, 1972-76 and as vice president, 1975-76. He is also serving on the membership committee at the present time and has served on the ethics committee in the past. He is a member of the American College of Surgeons Local Trauma Committee and the Texas Sports Hall of Fame Health and Physical Fitness Developmental Committee.

Mr. Lane has lectured at many sports medicine clinics, beginning in 1956 at the Southwest Athletic Trainers Association Meeting in Abilene, Texas and most recently at the first Kelloggs Sports Clinic for Women in Dallas. He has been a speaker at NATA National Conventions twice. He has also lectured at both the Texas and Washington State High School Coaches Association Clinics. Other organizations to which he has lectured include: Texas Public Health Association; Green County, Missouri, Medical Society; Lane County, Oregon, Medical Society; and the American Medical Association. In 1975 He was awarded the "Sam Ketchem Outstanding Speaker Award" at the Swata Clinic in Waco, Texas. He has published articles in the *Texas* and *Washington Coaches*

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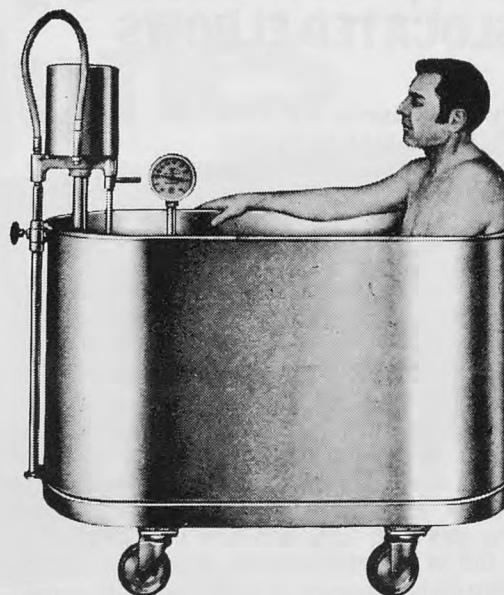
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### (BILL CHAMBERS continued)

In his home state of California he is serving his 14th term as chairman of the Southern California Athletic Trainers Association, a group he organized into an active part of District 8. Mr. Chambers is a member of the American College of Sports Medicine and a 15 year member of the Orange County Medical Association, Sports Injury Committee. He is also a charter member of the Sports Safety and Health Care Society.

Bill's contributions to his community include, acting as chairman for the Annual High School Wrestling Tournament the last 14 years and as a consultant to 25 area high schools that do not have the services of a full-time athletic trainer. He has also served on the Y.M.C.A. Physical Education Committee for 2 years, as well as, being a 4-H Club leader. He is active in church organizations and is a member of the Fellowship of Christian Athletes. ●

### (EDDIE LANE continued)

magazines dealing with many facets of athletic training important to the high school coach.

Eddie Lane has been a member of the National Athletic Trainers Association since 1951 and received his NATA certification in 1970 when the organization first started certification of members. He was selected in 1968 and 1972 as Athletic Trainer for the free style and Greco-Roman wrestling teams of the 19th and 20th Olympic Games. He is also the first certified Athletic Trainer to work with professional tennis on a full time basis, when he traveled the "World Championship of Tennis," tour in 1973. In addition, he was the first certified trainer to work with the United States Davis Cup Tennis Team, when they defeated Chile in Little Rock, Arkansas in 1973. He has also worked on a part time basis with professional football and basketball teams.

He began his athletic training career as a student trainer in 1943 at Waite High School in Toledo, Ohio. He was also a student trainer for Al Sawdy at Bowling Green State University, Bowling Green, Ohio and Wayne Ruby at Southern Methodist University, Dallas, Texas. He was the First scholarship student trainer at SMU. His athletic training career has taken him to North Texas State University where he was the first full time faculty athletic trainer for all sports. He has also been the head athletic trainer at Washington State University, Pullman Washington and Southern Methodist University. As the head athletic trainer for the Dallas Schools he is the first athletic trainer hired by them on a full time basis to develop and improve athletic training for their high school athletes.

In 1976 Eddie Lane received the National Athletic Trainers Association twenty-five year award and in June 1977 was inducted into the Citizens Savings Athletic Foundation Hall of Fame. ●

## "Tips from the Field"

### ELBOW FLEXION STRAP FOR DISLOCATED ELBOWS

By: Gary Harris, R.P.T., A.T.C.  
Head Athletic Trainer  
Morrilton High School  
Morrilton, Arkansas

We know that the acute dislocated elbow is considered a surgical emergency and should be checked immediately by a physician and X-Rays taken to rule out possible fracture. Elbow dislocations are treated in many ways. The methods of treatment vary according to the degree of injury and the attending physician.

However, when the athlete is permitted to return to the sport the coaches and trainers have a responsibility to protect the elbow from possible reinjury. The usual method of doing this is to tape the elbow in slight flexion as to prevent full or hyperextension. A problem occurs when the tape stretches, breaks or when improper taping techniques are employed. This is the forerunner of reinjury. There is a better way to solve the problem. This idea certainly is not new, but it does present a more effective and professional approach to this problem.

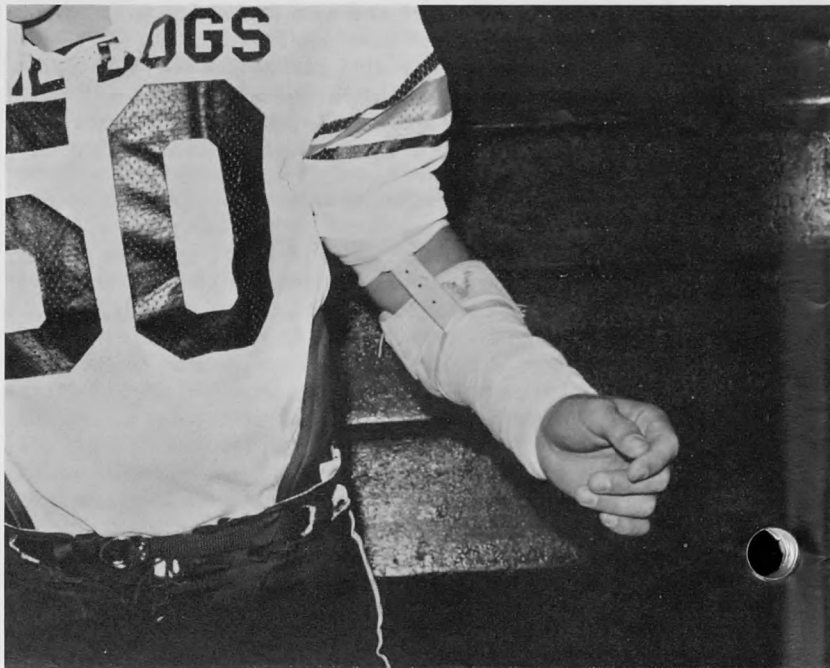
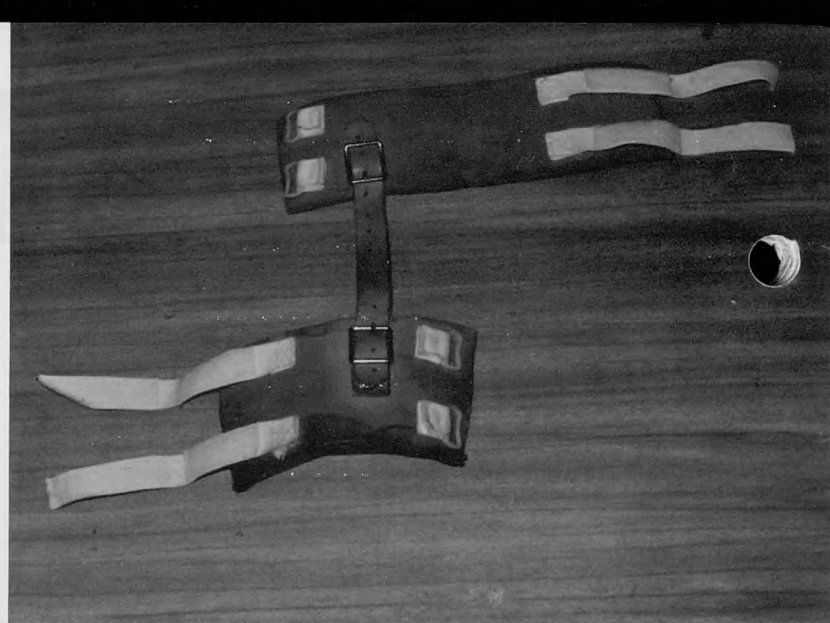
A heavy leather strap that is attached to wrist and bicep cuffs to allow full flexion but prevents extension at any desired angle. The strap is completely adjustable and the cuffs are made of heavy leather and padded with foam adhesive on the inside for comfort and to prevent irritation to the skin. The cuffs are secured around the wrist and biceps by Velcro straps. A metal buckle is attached to the cuffs for attachment of the strap. This allows the trainer to keep the exact angle of the elbow each time it is applied. Also, it can be used on other athletes as well.

Before application, the elbow may be taped and padded for support and protection as desired. After applying the strap, the cuffs and buckles are properly covered and padded to insure the safety of other athletes involved. This can be accomplished by using prewrap and Elastikon tape.

The strap was constructed by a certified orthotist, who works with leather in the making and sewing of braces and splints. It is suggested that all trainers locate and establish a rapport with an orthotist in their area. They can be a real asset when a piece of equipment needs to be made or altered. Orthotists are as creative as trainers are when faced with a problem with their patient's or athlete's needs.

The young man featured in the photos is an 18 year old high school defensive end who was injured during the fourth game of his senior year. He missed 3 weeks with his injury but was able to complete the regular season and 3 play off games which included the state championship game. It is felt that this strap played an important role in permitting this young man to continue his high school career.

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.●



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The Jenkins' Hot Seat was used by five N.F.L. teams during 1977: Philadelphia Eagles, Buffalo Bills, Chicago Bears, New York Jets and New York Giants. The response by players and staff has been overwhelmingly favorable.

Buffalo wide receiver Lou Piccone says: "The Jenkins' Hot Seat is essential to the total well-being of the athlete. It keeps the players' muscles loose and keeps them more actively involved in the game."

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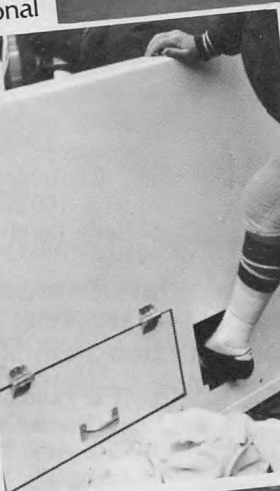
**The Jenkins' Hot Seat is a one-time investment.** The benches are constructed of heavy-duty, flame-retardant fiberglass. All metal parts are non-corrosive. They are built to last season after season. Even when the heating unit is not employed, you have attractive sideline benches that will enhance any playing field.



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# A Survey On Athletic Injuries

by

Gerald W. Slagle, A.T., C.  
The Pennsylvania State University

Throughout the country, there has been increasing interest in summer sports camps. The Pennsylvania State University has provided such opportunities for boys and girls in the areas of football, soccer, field, hockey, basketball, wrestling, swimming, gymnastics, baseball and track and field.

During the past three years, I have been involved in the treatment and prevention of injuries as athletic trainer for six football camps at Penn State. The purpose of the camps was to provide the participants an opportunity to improve their skills and to learn the techniques of football.

The boys were required to wear athletic supporters, shirts, shorts and shoes. Helmets and pads were not worn.

The six-day camps consisted of thirteen instructional (field) sessions. Single sessions, one and a half to two hours in length, were held on Sunday and Friday. Triple sessions, a total of six hours of instruction, were held on Monday, Tuesday and Thursday. A double session, a total of four and a half hours of instruction, was held on Wednesday.

Whenever people are engaged in physical activities, accidental injuries will occur. Throughout the country, many coaches, physicians, nurses and athletic trainers are becoming involved in summer sports camps. The purpose of this survey was to determine the types and frequency of athletic injuries that occur during football camps. The amount of time lost due to injuries was also determined.

The data was collected over a three year period from 1975 to 1977. During this period of time more than 2000 high school boys (entering grades 10 through 12) were involved. Each participant reported to the training room for treatment of an injury or illness, at which time I determined the nature of the injury and recorded it. For some of the injuries it was necessary for the participant to be seen by a physician. In some cases X-rays were taken to diagnose the injury.

Table 1 indicates the total enrollment of each camp, the number of boys treated and the percentage treated. The mean percentage of the boys treated for some type of injury or illness for all camps was 28.5%.

Table 2 summarizes the types of injuries that occurred over the past three years. The data shows that muscle strains were the most frequent type of athletic injury, accounting for 190 injuries (34.2%). The groin and low back were most commonly involved.

*Mr. Slagle received his Bachelor of Science degree from Penn State University in 1962 and a Masters of Education degree from the University of Pittsburgh in 1964.*

*For the past twelve years as an assistant athletic trainer and instructor at Penn State University, Mr. Slagle has worked with such intercollegiate sports as football, basketball and track.*

*During the past several years, Mr. Slagle has been employed as an athletic trainer for the summer football camps.*

**TABLE 1**  
**PERCENTAGE OF PARTICIPANTS TREATED IN CAMPS**

	Camp 1 1975	Camp 2 1975	Camp 1 1976	Camp 2 1976	Camp 3 1976	Camp 1 1977
Number in camp	253	476	285	265	350	385
Number treated	91	103	83	77	90	112
Percent treated	36	22	29	29	26	29
Mean; All Camps: 28.5%						

Sprains ranked number two as the most frequent type of injury, accounting for 142 injuries (26%). Sixty-one ankle sprains were recorded while thirty five knee sprains occurred.

Contusions were the third most frequent type of injury with 100 injuries (18%). The most common areas of the body involved were the knee, thigh, shoulder and lower leg.

Twenty-one head and neck injuries (3.8%) were sustained.

There were eight fractures, four involving the fingers.

Only four dislocations were recorded, two of the finger (PIP) and one of the thumb and elbow.

Illness was the largest problem in the OTHER category. This consisted of upset stomachs, colds and sore throats.

**TABLE 2**  
**FREQUENCY OF INJURIES SUSTAINED IN CAMP**

	Camp 1 1975	Camp 2 1975	Camp 1 1976	Camp 2 1976	Camp 3 1976	Camp 1 1977	Total
STRAINS	23	35	39	31	34	28	190
Foot	4	1	3	3	3		14
Archilles		2	3	2			7
Toes				1			1
Lower Leg		2	1		1	5	9
Quadriceps	2	6	5	4	4	1	22
Hamstrings	3	5	4	2	2	3	19
Groin	1	6	7	5	9	3	31
Hip Flexors	1	5	1	2	2		11
Low Back	5	4	3	4	8	6	30
Abdomen			2				2
Shoulder	2	1	4	4	2	5	18

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**TABLE 2**  
**FREQUENCY OF INJURIES SUSTAINED IN CAMP**

	Camp 1 1975	Camp 2 1975	Camp 1 1976	Camp 2 1976	Camp 3 1976	Camp 1 1977	Total
Wrist	1	1	3	2		1	8
Arm	3	1		2		1	7
Neck	1	1	3		3	3	11
SPRAINS	27	28	26	19	17	25	142
Ankle	9	11	13	10	5	13	61
Knee	8	10	6	2	4	5	35
Finger	6	3	4	4	7	5	29
Thumb	4	4	3	4	1	2	17
CONTUSIONS	18	19	6	14	16	27	100
Foot	1	1	1	3	2	1	9
Lower Leg	1	1			2	6	10
Knee	3	2		4	1	4	14
Patella	2	2	2	1		4	11
Thigh	4	3	2			4	13
Hip	2	1				2	5
Elbow	2				2	1	5
Upper Arm	1	1			1		3
Forearm					1		1
Wrist	1			2	1		4
Hand		1			1		2
Sternum	1	1		2		2	6
Shoulder		5		2	5	1	13
Ribs		1					1
Sacrum			1				1
Nose						2	2
FRACTURES		1	2	1	2	2	8
Finger		1	1	1	1		4
Ankle		1					1
Elbow					1		1
Clavicle						1	1
Nose						1	1
DISLOCATIONS	2	1			1		4
Finger		2					2
Thumb		1					1
Elbow					1		1
HEAD-NECK	2	4	1	3	4	7	21
OTHER	19	15	9	9	16	23	91
Shoulder Subluxation		1				1	2
Shoulder Separation		1			1		2
Dental		1	1			3	5
Heat	1						1
Sunburn	5	3	3		3	2	16
Illness	10	5	3	5	8	3	34

**TABLE 2**  
**FREQUENCY OF INJURIES SUSTAINED IN CAMP**

	Camp 1 1975	Camp 2 1975	Camp 1 1976	Camp 2 1976	Camp 3 1976	Camp 1 1977	Total
Bee Sting		1				1	2
Laceration	3	1	2	2	3	7	18
Cramps						2	2
Poison Ivy		2		2		4	8
Infections					1		1

Table 3 shows the percentage of each type of injury that occurred in the camps. Muscle strains made up 47 percent of all the injuries that occurred in the first camp of the year 1976. The mean incidence of strains during the three year period was 34.8%. In that same camp, sprains made up 31 percent of all the injuries. The mean incidence of sprains for the three year period was 26%.

**TABLE 3**  
**PERCENTAGE OF EACH TYPE OF INJURY SUSTAINED IN CAMPS**

	Camp 1 1975	Camp 2 1975	Camp 1 1976	Camp 2 1976	Camp 3 1976	Camp 1 1977	Mean %
Strains	25	34	47	40	38	25	35
Sprains	30	27	31	25	29	22	26
Contusions	20	18	7	18	18	24	18
Fractures		1	2	1	2	2	2
Dislocations	2	1			1		1
Head-Neck	2	4	1	4	4	6	4
Other	21	15	11	12	18	21	16

**TABLE 4**  
**NUMBER OF PARTICIPANTS MISSING PRACTICE DUE TO INJURY**

Days Missed	Camp 1 1975	Camp 2 1975	Camp 1 1976	Camp 2 1976	Camp 3 1976	Camp 1 1977	Nature & Frequency of Injury
4	1	6	5	0	0	1	Sprain (6) Head Inj. (2) Fracture (2) Contusion (1) Shoulder (2)
3	2	1	0	0	2	2	Sprain (1) Head Inj. (2) Contusion (2) Shoulder (1) Strain (1)
2	2	3	2	4	3	6	Sprain (6) Head Inj. (3) Fracture (1) Contusion (2) Strain (8)
1	6	4	7	6	6	2	Sprain (8) Head Inj. (3) Fracture (2) Contusion (3) Strain (8) Illness (3)

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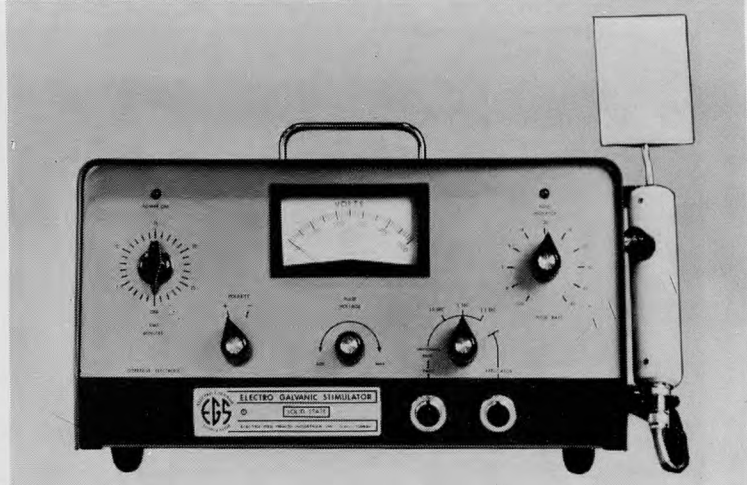
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Table 4 gives a breakdown of the number of participants missing practice due to an injury or illness. Also included are the type and frequency of the injury. Sprains of the knee and ankle were found to be the cause of more missed practices. The second most common cause for missed practices was strains of the groin and shoulder. Of the 2000 participants, only 71 missed one or more days of practice. In all six camps, only 13 athletes missed four or more days of practice. This was less than one percent of the participants.

Table 5 indicates the percentage of boys that missed one or more days of practice. The mean percentage of all camps is 3.7%.

**TABLE 5**  
PERCENTAGE OF PARTICIPANTS MISSING PRACTICE

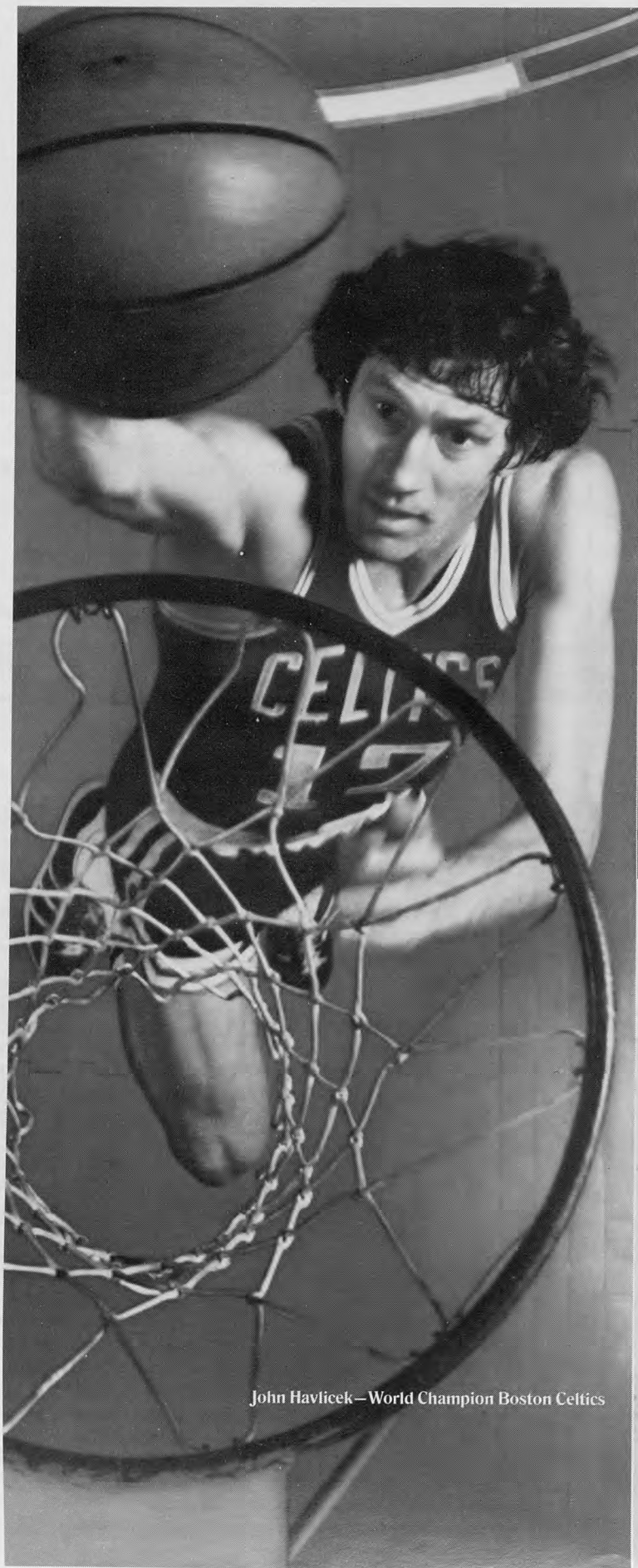
	Camp 1 1975	Camp 2 1975	Camp 1 1976	Camp 2 1976	Camp 3 1976	Camp 1 1977
Number of participants missing one or more days of practice	11	14	14	10	11	11
Percent of participants missing one or more days of practice	4	3	5	4	3	3
Mean; All camps:	3.7%					

**Summary.** The following basic observations and findings can be made from the survey of athletic injuries occurring in summer football camps at Penn State University.

1. The mean number of all boys treated for some type of injury or illness was 28.5%.
2. Muscle strains made up the largest percent of the injuries that occurred. Approximately 35% of the injuries were in this category.
3. Sprains were the second most common cause of injury with 26%.
4. Contusions ranked third which made up about 18% of all the injuries.
5. From the more than 2000 participants, only 71 boys missed one or more days of practice due to injury or illness. This was less than four percent of the participants.
6. The most common cause for missed practices was sprains of the ankle and knee.
7. Strains of the groin and shoulder were the second greatest cause for missed practices.

This study was a survey of athletic injuries that have occurred in the Penn State football summer camps. The intention of this survey was to collect data on the different types of injuries that might occur. If coaches, physicians, nurses and trainers become aware of the data, they can prepare for the needs of such camps if their school implements this type of educational program and they have been given some responsibility for the medical care. In addition, this survey was a preliminary study into athletic injuries occurring in summer football camps. It is hoped that this study will serve as a starting point for further investigation and will offer some guidelines for future studies. ●

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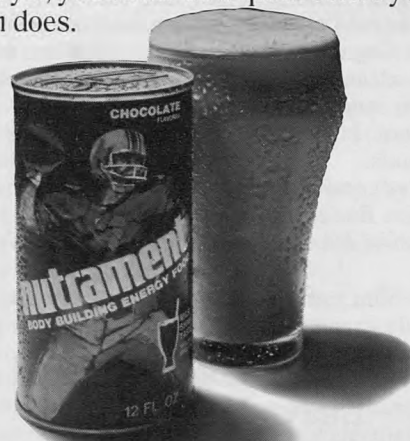
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## Physical Fitness Values

According to the April, 1977, issue of "Physical Fitness Research Digest," the following conclusions and implications regarding physical fitness are at least reasonably well supported by research evidence:

- A. *Mental Achievement.* More studies produced positive relationships between physical-motor traits and mental achievements than results in nil or negative results. It may be contended that a person's *general learning potential for a given level of intelligence* is increased or decreased in accordance with his degree of physical fitness.
- B. *Personal-Social Status.* Positive relationships have been shown between physical and motor traits and personal-social status. Positive relationships have been shown between physical and motor traits and personal-social characteristics, as evaluated by psychological inventories, peer status indicators, teachers' assessments, and self-concept instruments.
- C. *Coronary Heart Disease.* An overwhelming majority of studies on adults from several countries supports an inverse relationship between the amount of physical activity in their daily lives and the incidence of coronary heart disease. Regular physical activity does not invariably prevent a heart attack but will make its occurrence much less likely; further, in the event of an attack, it tends to be less severe and the likelihood of survival is greater.
- D. *Risk Factors Associated with Coronary Heart Disease.* Utilizing circulatory-respiratory endurance regimens of exercise, with appropriate intensity and dosage continued regularly over a period of time, the following results have been achieved with adults: reduction in serum cholesterol and triglyceride levels; development of collateral circulation around coronary artery restrictions; improvement in myocardial vascularization; increase in red blood cells and blood volume; improved fibrinolytic capability; and reduction in blood pressure.
- E. *Peripheral Vascular Disease Improvement.*
- F. *Other Organic Conditions.* In addition to coronary heart attacks, there are indications that diabetes, ulcers, and other internal conditions are more frequent in sedentary individuals than active individuals.
- G. *Fat Reductions.*
- H. *Tension Reduction.*
- I. *Improved Mortality.*

## Draw One Beer . . . And Leave It At That?

One beer a day may be the most a person can drink over a period of years, according to Ulf Rydberg, MD, assistant professor of alcohol and drug research at Karolinska Institute, Stockholm.

He and Staffan Skerfving, MD, told a University of North Carolina seminar that a 70 kg (150 lb) person has the following "safe" drinking limits: 250 ml (9 oz) of beer,

20 ml (2/3 oz) of 100-proof distilled spirits, 40 ml (1 1/3 oz) of dessert wines, or 70 ml (3) 1/3 oz) of red or white table wine.

The guidelines, he warned, do not apply to alcoholics. The Swedish researchers calculate the "safe" amounts by determining the quantity of alcohol that causes physical damage and then adding a safety margin to take into account people who are very sensitive to alcohol. Dr. Rydberg spoke at Chapel Hill, NC.

(Arch Intern Med—Vol 137, Jan 1977)

## Fractures

In an article in the August 15, 1977, issue of *Modern Medicine*, Dr. D. W. Grimes discusses problems related to fracture healing. Open fractures, formerly thought to heal more slowly because of the loss of hematoma, now is believed to heal slowly due to comminution, periosteal stripping, related trauma, or concurrent infection. In discussing closed fractures the following concepts were aired.

It is generally considered that the larger and more shattered the bone the longer it will take to heal. Good circulation is paramount to prompt osseous union; therefore, the vascular system must be intact. Comminuted fractures with their characteristic devitalized fragments, provide the best illustration of this principle. In a multiple fracture the more proximal site will usually heal faster at the expense of the distal sites.

Compression is also an aid to osseous healing. This allows closed apposition and interlocking to reduce the need for osteocytes to bridge a large gap in the fracture site. Excessive bone shortening occasionally results from compression, however, and care should be exercised.

New reparative bone is destroyed by infection. Prophylactic antibiotics, early surgery, adequate debridement, and antibiotic irrigation have all helped improve healing in many contaminated fractures.

A bone can refracture. The old saying, "A bone is twice as strong as it was before it was broken" is not true. Several months are required to get a strong, reliable union in any tubular bone. Strenuous athletic activity during this healing period is dangerous in all midshaft fractures of long bones.

Occasionally the bone adjacent to an old fracture site will break rather than at the old fracture site. This is usually caused by deossification of the adjacent bone during the necessary immobilization while the fracture is healing. Isometric exercises during this healing phase will help prevent this type of osteoporosis. Early range of motion and physiologic rehabilitation are indicated in most fracture care.

## Scoliosis Screening

The American Academy of Orthopaedic Surgeons has approved a Scoliosis Screening Program. The Scoliosis Research Society has prepared the program which will demand the involvement of orthopaedic surgeons. This program should have high community service potential. It should relate very closely to the high school athletic trainer. If interested you should contact an orthopaedist in your area.

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## Axioms on Athlete's Heart Syndrome

The following are some of the axioms presented in the April, 1977, issue of *Hospital Medicine*:

1. Sustained strenuous physical activity or athletic training for long periods of time (months or years) is characteristically associated with an enlarged heart. Such enlargement involves all four chambers of the heart.
2. Cardiac enlargement in endurance athletes, which may be demonstrated by radiography, involves an increase in the size of the cardiac cavities (dilatation), as well as an increase in the mass of heart muscle (hypertrophy). The degree of enlargement varies with the severity of exercise, duration of physical activity, age of the subject, as well as other factors.
3. The weight of the athlete's heart rarely exceeds 500 gm., which has been described by Linzbach as the "critical heart weight" (normal heart weight is 300 gm.). In contrast in pathological hypertrophy the weight of the heart may exceed 1000 gm.
4. The increase in heart muscle mass is the result of the hypertrophy of myocardial cells. There is an increase in the number of myofilaments which increases the diameter of the fibers, and there is as well, an increase in the number of sarcomeres which increases the length of the fibers. In adult subjects there is no multiplication of cardiac cells (hyperplasia) in exercise cardiomegaly. Exercise cardiomegaly is described as "physiological" heart hypertrophy.
5. Blood volume per unit of body weight is greater in the exercise-trained individual than in the non-trained individual.
6. The muscular performance of the endurance athlete is superior to that of the nonathlete for many reasons, among which is a greater maximum cardiac output (35 liters per min. in the athlete as compared with 25 liters per min. in the non-athlete). The basis for this greater output is a greater range in heart rate in the athlete (from a resting level of 50 beats per min. to 190 beats per min. during the most severe exercise) and also a greater range in stroke volume (from a resting value of 110 ml. to a maximum of about 200 ml.). In the non-athlete, heart rate increases from a resting value of about 75 beats per min. to a maximum of 190 beats per min. and the stroke volume ranges from 75 ml. at rest to about 130 ml.
7. Discontinuation to athletic activity by champion athletes for many years tends to reverse the bradycardia, but the size of the heart does not entirely revert to normal.
8. The importance of jogging or other mild athletic activity on the heart and on the coronary circulation in the prevention of coronary disease is not clearly understood at the present time. More careful and controlled studies are necessary to evaluate the effect of these activities on the coronary circulation.
9. There is no statistical evidence that the enlarged heart of the champion athlete is more prone to heart attacks than the heart of a nonathlete. There is little evidence to suggest that the moderate cardiac hypertrophy in the athlete leads to any degree of coronary inadequacy either at rest or during exercise.

# EVALUATING THE FITTING OF FOOTBALL SHOES

by:

Denis F. Isrow, Ed.D.  
Robert O. Ruhling, Ph. D., FACSM  
John M. Alvarez, M.Ed.

If the shoe fits, wear it; but if the shoe does not fit — what then? If you are an athlete, you will probably still wear it! Intercollegiate football is steadily becoming a faster and quicker moving sport for the athlete than ever before. Any sport in which legs and feet are used to gain footing to produce speed needs a strong foundation. This foundation in football is the cleats, or football shoes, worn by the athlete. Bramwell and others (1) and Torg and Quedenfeld (5) voiced criticism of the types of football shoes worn, as well as of the turf on which the game is played. Nothing has been mentioned on whether or not the measuring of feet to determine a proper fit of shoes has been performed.

In order to fit every American, shoes are made in more than 300 sizes and widths. The shoes range in half sizes by groups from an infant's size 0 to a man's size 16. There are 12 widths ranging from AAAAA to EEEE, though not all sizes are made in all widths (3). The most neglected area in fitting of athletic equipment is the shoes. In football, the knees and ankles receive much stress and strain because of pressure applied to the foot. Neither the trainers, nor the coaches, nor the equipment managers have placed enough criticism nationally on this particular problem to cause a change in the attitude towards properly fitting shoes. In fitting football shoes, most sizes are available, but not all widths can be located because of the poor selection of widths stocked by sporting goods dealers. This makes the equipment manager's job almost impossible because he is able to obtain only fixed-width sizes such as E and EE. Some athletes are then forced to be sized into improperly fitting football shoes. It is on the premise that more lengths and widths should be obtainable by sporting goods manufacturers and dealers that this study was conducted.

The purpose of this study was to compare the differences in sizes of football shoes requested by members of the University of Utah Varsity

Football Team, assigned by the equipment manager, and determined by an objective foot measuring instrument.

## Procedures

From among all the athletes trying out for the University of Utah Spring Football Team in 1975, 81 male subjects volunteered for the study. Subjects ranged in age from 18 to 25 years. None of the subjects was involved in any type of shoe fitting test prior to, or at the time of, data collection.

*Dr. Isrow is Head Athletic Trainer North Dakota State University, Fargo and has been there since 1963. He is a member of the National Athletic Trainers Association.*

*Dr. Ruhling is Director of the Human Performance Research Laboratory at the University of Utah, Salt Lake City and has been there since 1972. He is a Fellow of the American College of Sports Medicine.*

*Mr. Alvarez is Head Athletic Trainer at the University of Utah, Salt Lake City and has been there since 1972. He is a member of the National Athletic Trainers Association.*

Initially, each subject responded to a questionnaire which was designed to determine any injury problems which the athlete had which might affect the outcome of this study. In addition, the following information was secured: height, weight, position, right and left shoe lengths and widths, and football shoe make worn. Answers to these questions gave indications of the athlete's ability to fit his own shoes.

*The authors would like to acknowledge the assistance of Mr. Jim Syndergaard, Equipment Manager, University of Utah in helping to obtain information used in this study.*

*Sincere appreciation is extended to those members of the 1975 University of Utah Spring Football Team who served as subjects in this study.*

The University of Utah equipment manager was then consulted. The only shoe widths obtainable through the sporting goods companies via the sporting goods dealers were either E or EE. All sizes issued by the equipment manager to the athletes were duly recorded. It was noted that he used a free-lance measuring technique for fitting the shoes.

To obtain objective foot size measurements, an instrument was required. The Brannock Device was selected because of its reliability as a foot measuring instrument and the fact that it is the most widely used foot measuring instrument in the United States.

One week after spring football started, all athletes who were out for the spring season and who had volunteered for the study were measured with the Brannock Device with four judges as witnesses. Each subject placed his right foot on the measuring instrument at which time the length was recorded. The width anterior metatarsal sliding gauge was adjusted to the previously recorded length to determine the width size which was also recorded. This same procedure was employed for the left foot. The athlete was always sitting during the administration of the test because when one stands up the foot will spread out and the size will vary with the amount of weight placed upon the foot. The large toe was usually the index for the length of the foot, but in some cases, the second or third toe was longer and therefore was used as the index for length. Each length and width size was reported, checked, and verified by the panel of four judges.

All sizes were recorded by length and width for both the right and the left foot, e.g., 9 E. Lengths and widths were measured and converted to inches. Area (square inches) was calculated as length times width. Mean areas for each foot for each subject were then calculated for each measuring technique, i.e., athletes' questionnaire, equipment manager's foot measurement test, and the foot measuring instrument.

TABLE 1. Areas (square inches) for Right and Left Foot Measurement Test Phases

Test Phase	MEASUREMENT TEST (mean $\pm$ SD)			
	Athletes' Questionnaire	Equipment Manager's	Foot Measuring Instrument	F-ratio
Right Foot Measurement	45.35 $\pm$ 5.58	49.31 $\pm$ 2.69	43.98 $\pm$ 3.40	37.28*
Left Foot Measurement	45.34 $\pm$ 5.57	49.31 $\pm$ 2.69	43.23 $\pm$ 3.01	48.93*

\* Significant at the 0.05 level.

Right foot areas and left foot areas were analyzed using the one-way analysis of variance technique. Significant F-ratios were analyzed using the Tukey Method of Multiple Comparisons (2). The probability of committing a Type I error was set at 0.05. The data were processed on the Olivetti Underwood Programma 101-Calculator located in the Statistical Laboratory, Milton Bennion Hall, University of Utah.

## Results

Mean areas for the right foot measurements and for the left foot measurements for each measuring technique appear in Table 1. Since the two F-ratios were significant (see Table 1), Tukey tests were performed and the following was noted. The right foot area measurements obtained from the foot measuring instrument and from the athletes' questionnaires were significantly ( $p < 0.05$ ) smaller than the measurements obtained from the equipment manager's foot measurement test. In addition, the left foot area measurements obtained from the foot measuring instrument were significantly ( $p < 0.05$ ) smaller than the measurements obtained from either the athletes' questionnaires or the equipment manager's foot measurement test. Finally, the results revealed that the left foot area measurements obtained from the athletes' questionnaires were significantly ( $p < 0.05$ ) smaller than the measurements obtained from the equipment manager's foot measurement test.

## Discussion

In both phases of foot measurements tests (right and left), statistical evidence suggests that the foot measuring instrument provides



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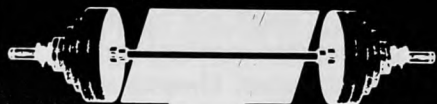
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for a more systematic method of determining proper shoe sizes. Between the two phases, however, group means indicated that while minimal differences existed between the athletes' questionnaire test and the foot measuring instrument test, there was considerable difference between the equipment manager's test and the other two tests.

In the athletes' questionnaires, it was noted that some athletes had to guess at their shoe size. In the equipment manager's test, statistical evidence suggests that significance was dependent upon his inability to offer many widths!

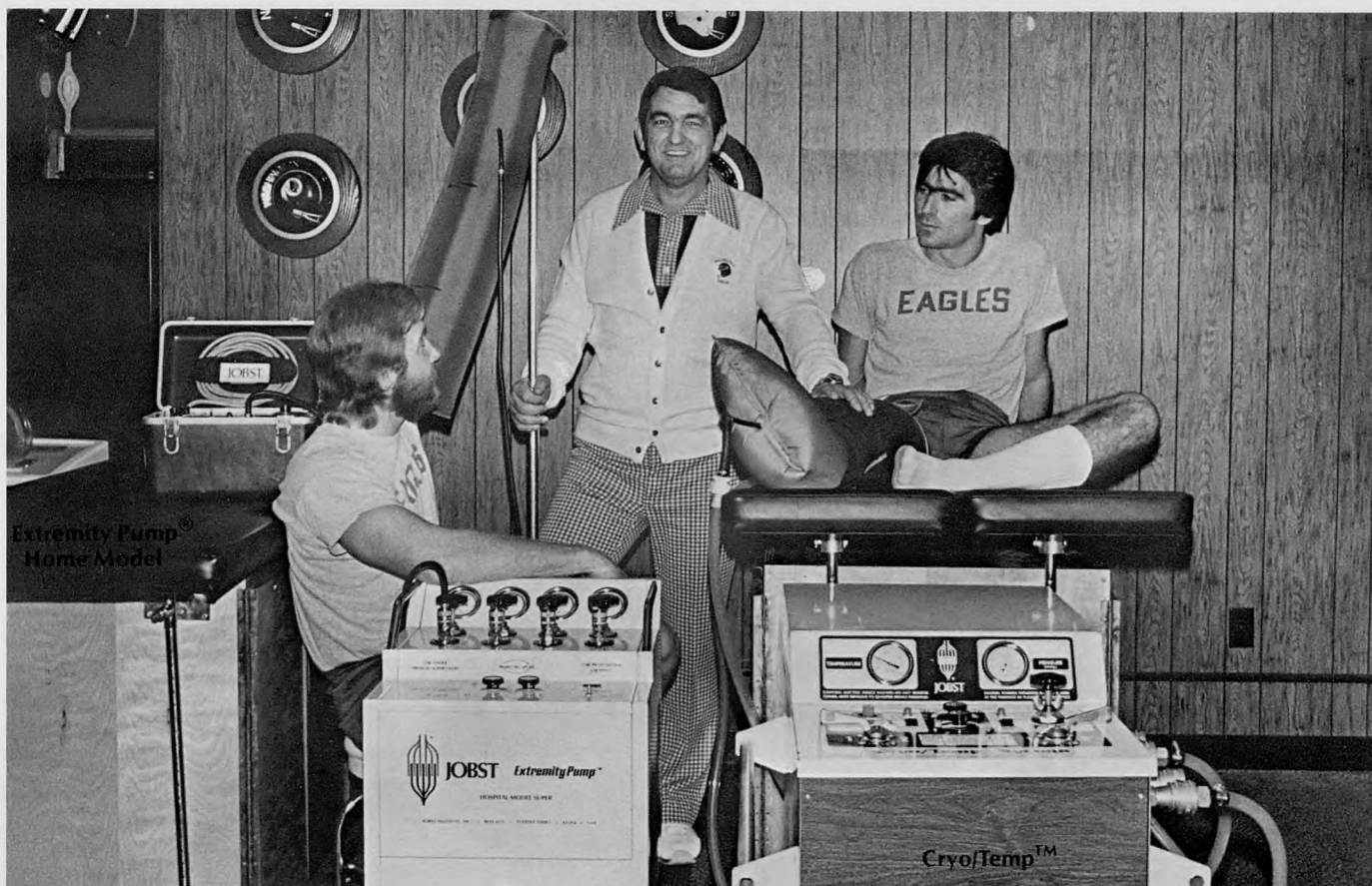
Results from using the foot measuring instrument revealed that each foot was measured to the individual's exact size, as compared to the athletes' questionnaires and the equipment manager's test, which utilized only one foot size for the fitting of both feet. As Isrow (4), stated, the differences between foot sizes can range anywhere from one-half to two complete sizes. The average size difference is usually one-half size. This difference does not affect fitting as does one full size or larger. The full size difference, or larger, should be corrected by the use of two different shoe sizes.

### Conclusion

Based upon the data generated by this study, it is only possible, then, that in order to achieve a properly fitting football shoe, a foot measuring instrument of some kind should be used which is modified to an athletic company's football shoe.

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(Left to right: Tom Ehlers, line backer, Otho Davis, trainer, Vinc Papale, receiver, Philadelphia Eagles)

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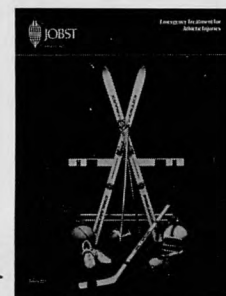
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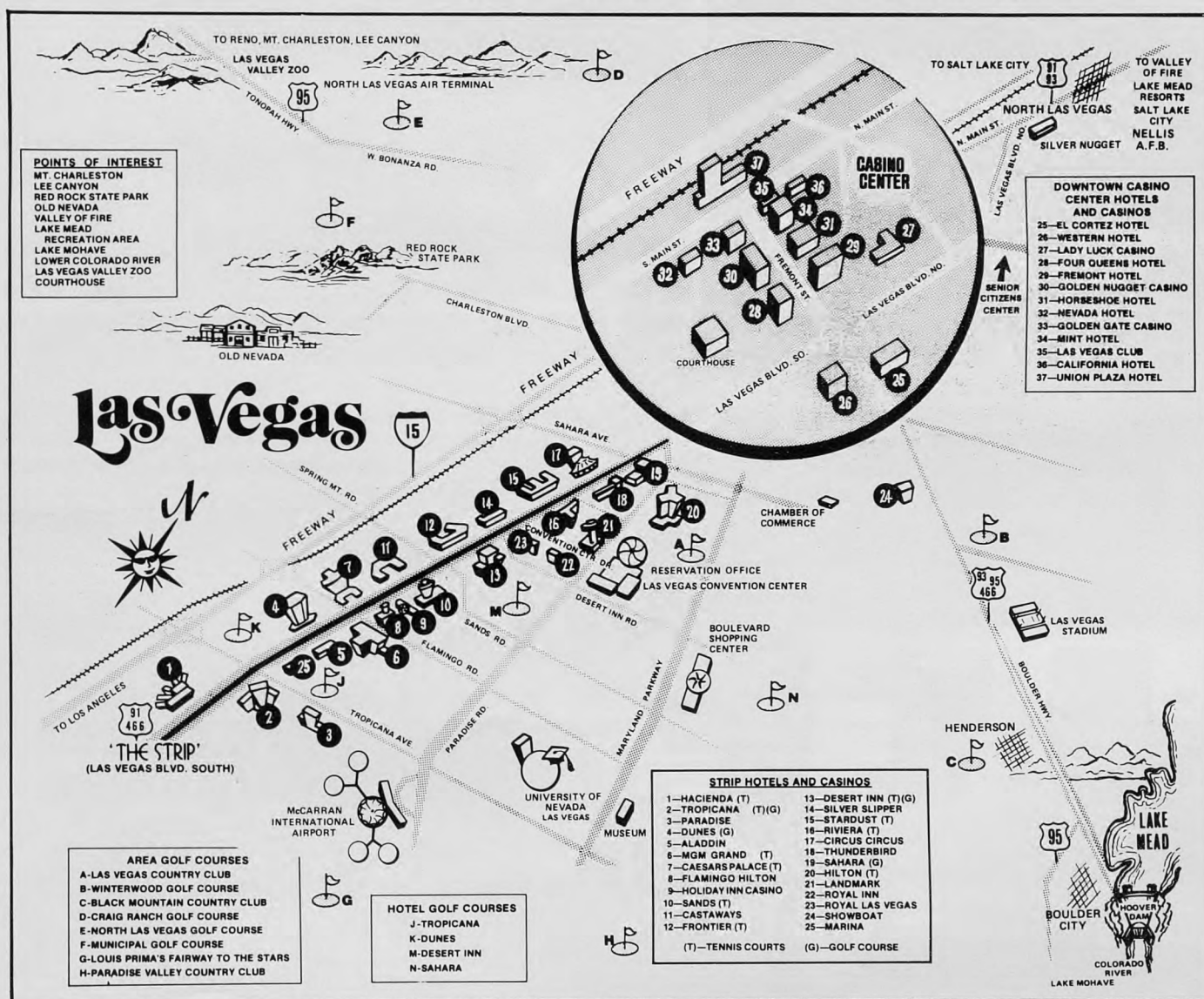
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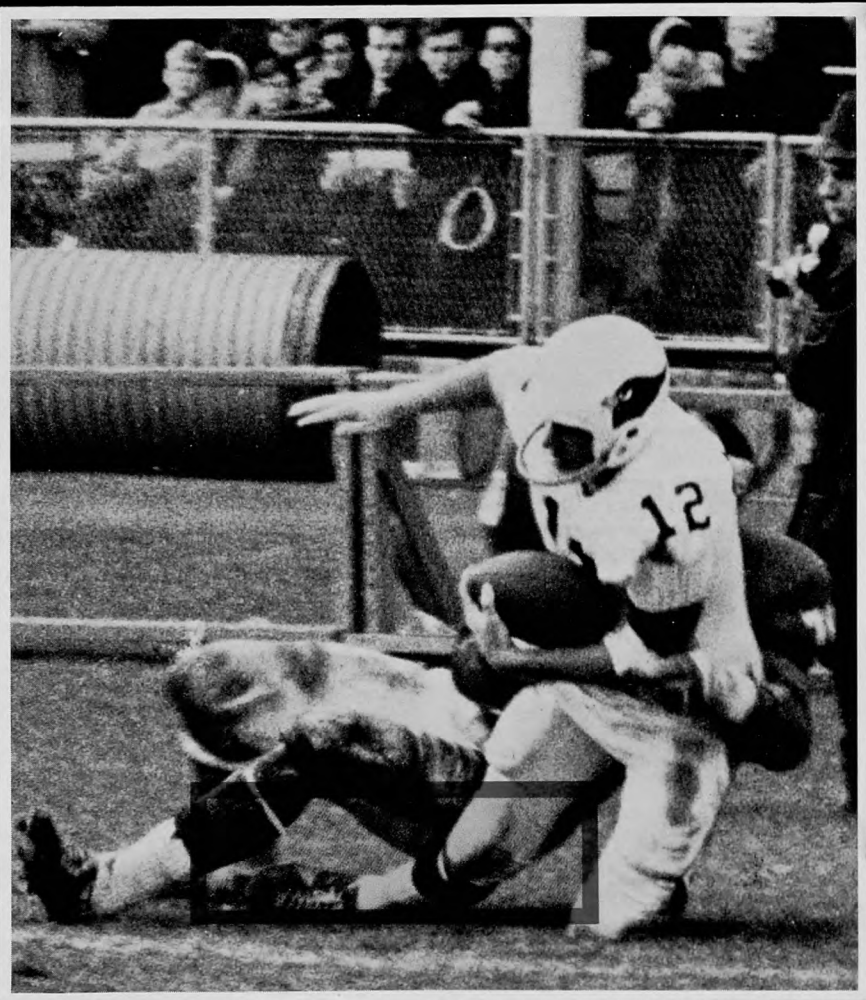


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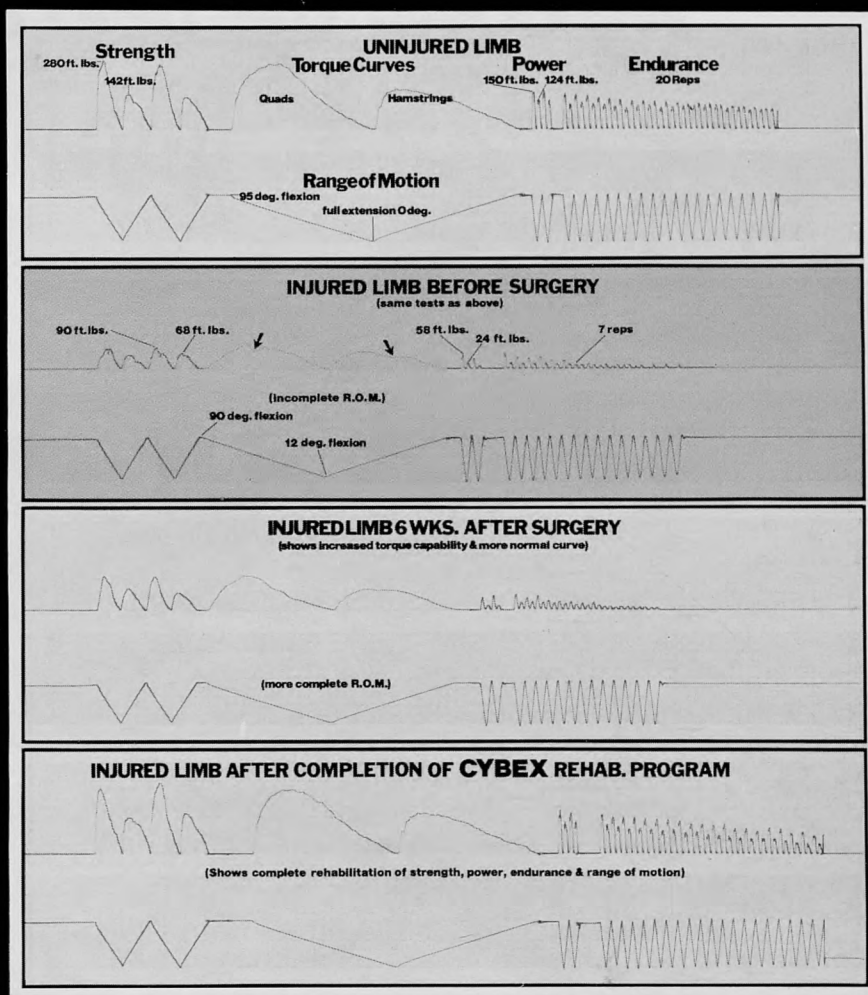


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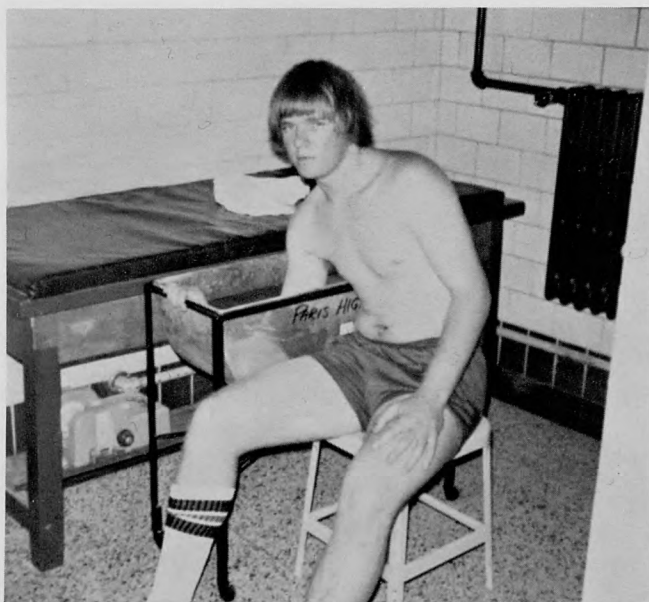
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## "Tips from the Field"



### "ICE IMMERSION KNEE TANK"

by

James Tovel, M.S., A.T., C.  
Trainer  
Illinois Benedictine College  
Lisle, IL 60532

In most knee injuries, the associated muscle spasm presents a problem in the rehabilitation process. The knee is usually presented in about thirty degrees flexion with the muscle spasm preventing extension. Treatment of the injury is facilitated if the entire joint can be iced at the same time.

This idea, borrowed from Bob Spackman, Head Trainer at Southern Illinois University, is an easy way to apply ice immersion to the entire knee and its surrounding musculature.

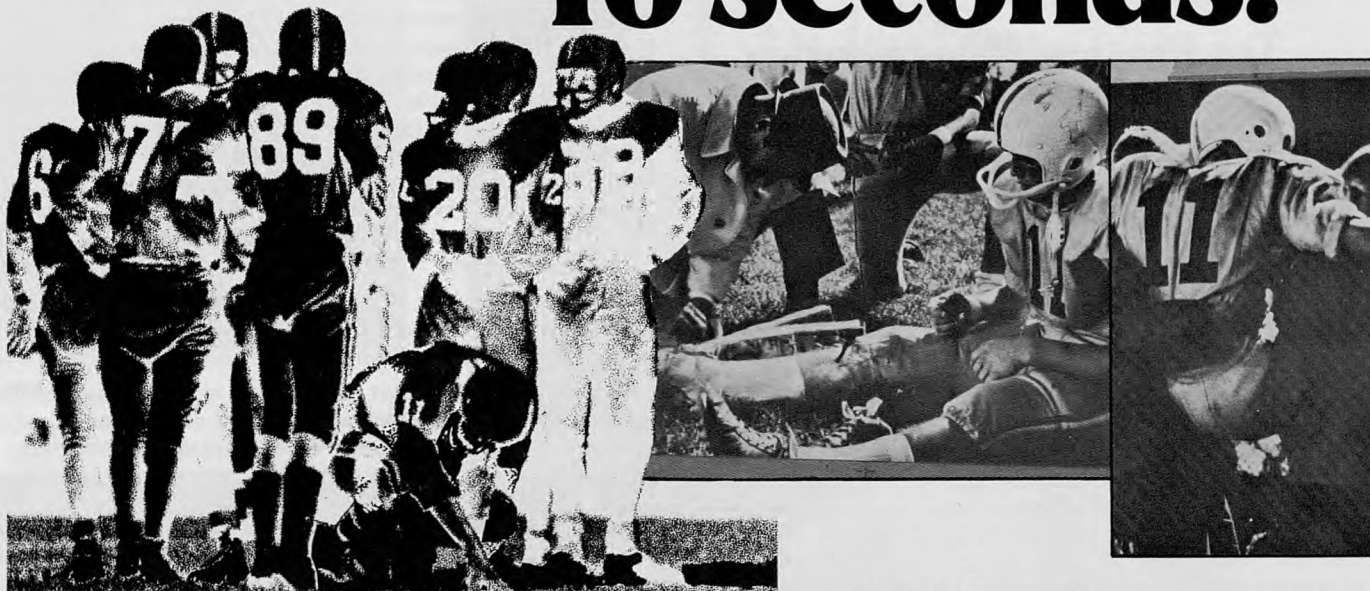
The apparatus is an inner tube testing tank placed in an angle iron frame which was built to be the same height as the treatment table.

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Of course the tank can be used for elbows, hands, and ankles as well as knees. ●

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. ●

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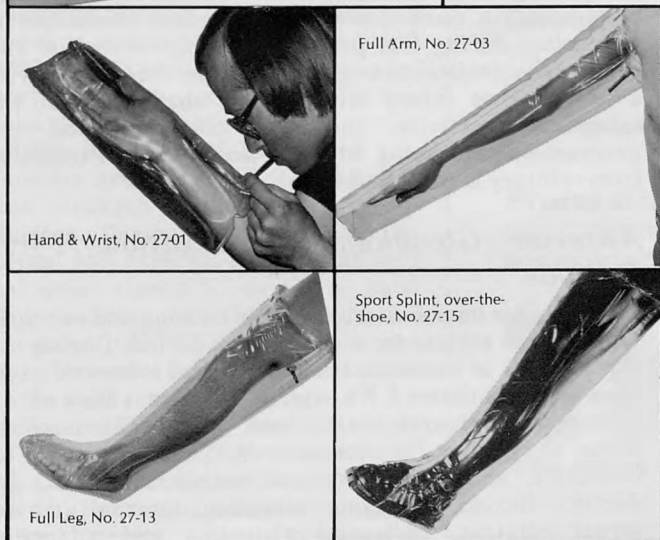
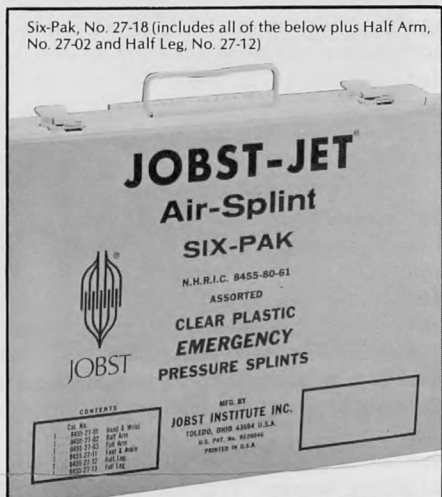


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# Schering

*The 1977 Schering Symposium on the Shoulder*

## The Physical Rehabilitation of Selected Shoulder Injuries



by  
Gordon Stoddard, A.T., C.  
University of Wisconsin  
Madison, Wisconsin

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

The physical rehabilitation of shoulder injuries has been updated in the past few years by the use of such new, modern modalities as the Cybex, Orthotron, transcutaneous nerve stimulator, etc. Regardless of what modalities or equipment are available to the athletic trainer or athletic therapist, the objectives of shoulder rehabilitation remain relatively the same.

Objectives specific to shoulder rehabilitation are:

- (1) to regain optimum range of motion and power of movement.
- (2) to mobilize the shoulder in flexion, extension, abduction, adduction, and internal and external rotation.
- (3) to facilitate neuromuscular patterns of movement in the scapulohumeral rhythm.
- (4) to restore strength and size of the musculature as compared to normal or bilateral development.
- (5) to return the individual to active, functional participation safely and with minimal restrictions.

The extent and depth of the rehabilitative process for shoulder injury or conditions is generally associated with categories of trauma involved. The basic categories are the acute, traumatic, non-surgical; the post-surgical; and the over-use syndrome.

### *Acute, Traumatic, Non-Surgical*

Injuries which fall into this category are:

1. first or second degree sprain of the acromioclavicular joint
2. first or second degree sprain of the sternoclavicular joint
3. first episode luxation of the glenohumeral joint
4. subluxation of the glenohumeral joint
5. partial tears of the glenohumeral capsule
5. partial tears of the rotator cuff musculature
7. contusions to the shoulder complex
8. cervical and brachial plexus stress syndrome.

Rehabilitation of the acute, non-surgical shoulder injury generally follows a distinct pattern. A period of immobilization is followed by mobilization accomplished in several phases. Range of motion, progressive resistance exercise, functional evaluation and protection from recurrence when returning to complete active participation are important considerations. Normal shoulder function usually will return more readily to the athlete who is

allowed to continue to attempt near-normal activity permitting near-normal function, but not interrupting or interfering with the healing process. Prolonged immobilization, when unnecessary, will often lead to contracture, atrophy and some loss of scapulohumeral rhythm. The progression rate through the range-of-motion sequence and into the progressive resistance stage generally depends on the degree and extent of the trauma, the success of initial and follow-up therapy, and individual response to pain and discomfort.

It has been observed that during the initial period of immobilization and rest, transcutaneous nerve stimulation can be a valuable adjunct in providing pain relief (FIGURE 1). Treatments with this modern modality are administered two or three times daily for a duration of from thirty to sixty minutes, depending upon the degree and site of injury. Gentle range-of-motion exercises are carried out, including Codman's passively and actively, to maintain rhythm.

### *Acromioclavicular Sprain*

#### *First Degree*

An acromioclavicular immobilizer or sling is utilized for two to seven days. Some athletes will need immobilization beyond one week because of the movements involved in particular sports, i.e. gymnastics, wrestling, swimming, etc.

Range-of-motion exercises during and after the immobilization begin with Codman's scapulohumeral rhythm movements. Medial to lateral movements are followed by movements in a sagittal plane, forward and backward, then in gradually increasing circles, and finally clockwise and counter-clockwise directions. As the individual improves, large circles are encouraged and wider swings are performed. A weighted object is added to the movements as limitations are overcome. Our routine for Codman's is one set of thirty repetitions of each movement two or three times daily. The Codman's routine is followed by basic, active, range-of-motion movements from backlying or standing positions. Ten to fifteen repetitions of each movement, twice daily, are carried out. Abduction, flexion, extension, horizontal abduction and adduction, and elevation movements are emphasized.

Basic shoulder exercises are used to stimulate strength, muscle endurance and power. However, if the period of immobilization is minimal and range-of-motion is restored in a relatively short period of time, progressive resistance exercise is often not extensive.

#### *Second Degree*

Immobilization for the second degree sprain usually is a minimum period of three weeks. Transcutaneous nerve stimulation in combination with standard modalities is supportive during this period. The range-of-motion and progressive resistance sequence remains the same as with a first degree injury with special observance of the amount of activity, individual tolerance and the progression rate being adjusted accordingly. Protection from reinjury is paramount.

### *Anterior Glenohumeral Luxation, First Episode*

A shoulder immobilizer, preferably a sling and swath, is worn by the athlete for a three-week period. During the three weeks of immobilization, static and isometric exercises are administered. No external rotation is allowed.

During the fourth week, heat, plus transcutaneous nerve stimulation, is administered. This is followed by Codman's, active assistive and active abduction, adduction, flexion, extension, elevation, internal and external rotation, horizontal abduction and adduction



Figure 1.



Figure 2.

movement from prone and back-lying positions (FIGURE 2). In addition, a towel or wand exercise is introduced utilizing bilateral hand and arm support in active movements when tolerated. During the range-of-motion phase, the girth of the biceps and forearm are measured. Goniometric and strength measurements in abduction, flexion, extension, and internal and external rotation, as well as grip strength, using a hand dynamometer, are evaluated and recorded. (FIGURE 3). Periodic and specific evaluation follows at two or three week intervals.

When 75% of normal range-of-motion is accomplished and/or 160° of elevation and abduction is achieved, progressive resistance exercises begin. The progressive



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resistance routine depends, in part, on what equipment is available. The Cybex, Orthotron, Mini-Gym, Universal Gym, flexible tubing, wall pulleys, Nautilus, and free weights can be utilized in the rehabilitation process in many combinations.

#### Phase I

- A. Orthotron, speed #3, daily, 3 x 10 repetitions, flexion, extension, abduction, adduction (FIGURE 4).

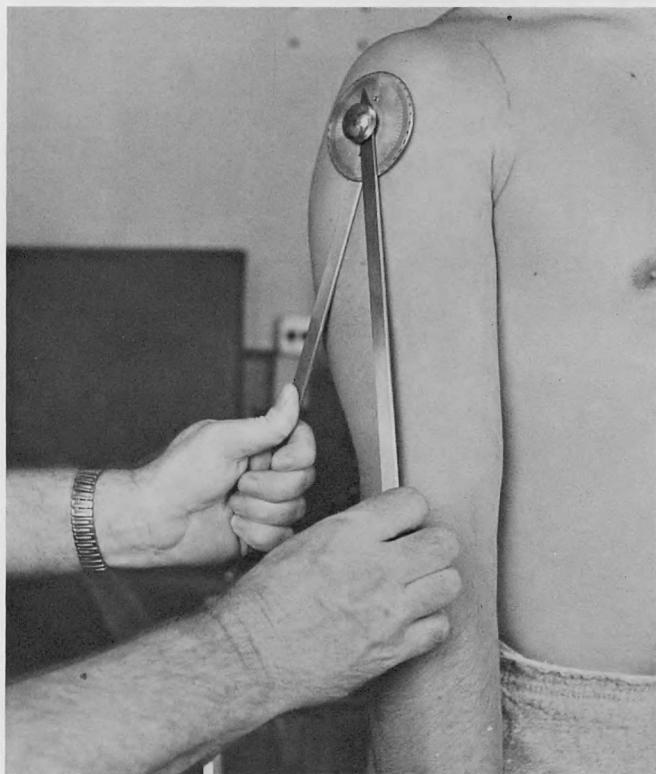


Figure 3.

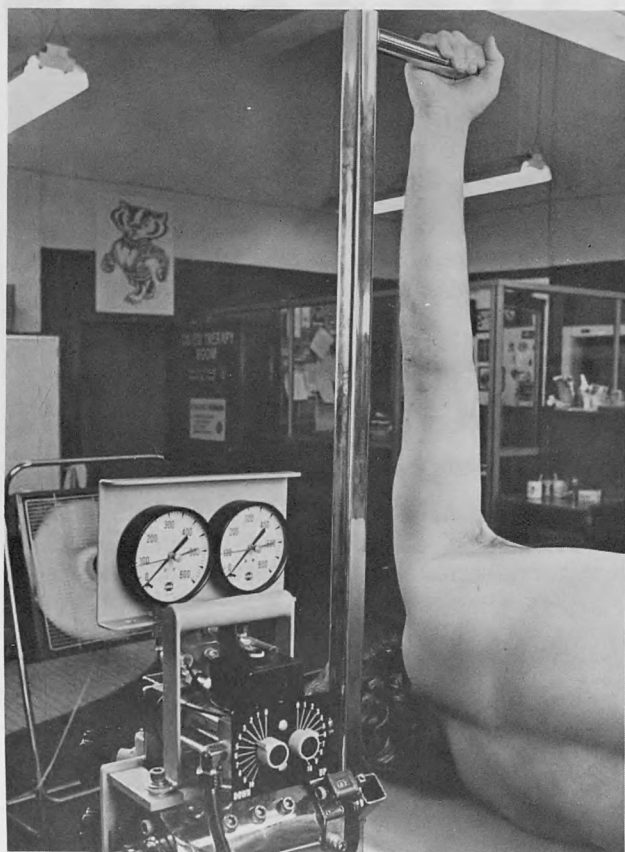


Figure 4.

- B. Flexible rubber tubing to tolerance. Concentric, as well as eccentric contraction, horizontal abduction and adduction, internal and external rotation, from a standing or back-lying position, 3 x 15 repetitions daily.

Phase II — Begins when Orthotron readings have stabilized

- A. Orthotron speed #3, two days a week  
 B. Free weights, Universal Gym, Nautilus program, two days a week  
 1. Bench press — 12 repetitions warm-up with light weight  
    4 x 15 repetitions with heavy weight to tolerance.  
 2. Nautilus double-shoulder — 3 x 12 repetitions each exercise  
 3. Seated, abduction raise with dumbbells, 3 x 12 repetitions  
 4. Shoulder shrugs — 2 x 10 repetitions  
 5. Barbell curls — 3 x 10 repetitions  
 6. Seated, forearm supination with dumbbell, forearm resting on thigh — 3 x 10 repetitions.

#### Phase III

- A. Orthotron speed #7, #9, power and endurance — three sets of endurance repetitions two days a week, functional speed emphasis  
 B. Flexible tubing, increase resistance  
 C. Free weights, Nautilus, Universal Gym, three days a week  
 D. Begin skipping rope, punching a punching bag, and throwing.

Functional, active rehabilitation is complete when the following are accomplished:

1. full range-of-motion
2. bi-lateral strength development
3. restoration of power and endurance
4. a smooth coordinated scapulohumeral rhythm
5. functional movements are normal in jumping rope, throwing a ball, etc.

Progression time through the rehabilitation phase following first episode anterior glenohumeral luxation is unpredictable. Shoulder rehabilitation and return to competition following a non-surgical injury is based on individual tolerance, motivation, apprehension, and the cooperation of the athlete with the rehabilitative team.

### *Glenohumeral Subluxation*

Rehabilitation of glenohumeral subluxation is accomplished with the same sequential pattern as the luxation. Frequency and number of episodes will dictate the progression. However, this author has found that subluxation, basically, is treated as is luxation in prognosis and predictability of reoccurrence.

The athlete who has been subjected to subluxation or luxation of the glenohumeral joint must be protected from reoccurrence when returning to competition, especially when involved in collision-type sports.

A shoulder restraint limiting external rotation and abduction is essential. The Duke Wyre support, the West Point harness or custom-fitted cuff restraints will suffice. Proper fit and periodic maintenance checks are essential.

The other acute, non-surgical injuries to the shoulder are treated on an individual basis. Return to competition depends on the extent of the trauma, the individual's tolerance, return of range-of-motion, and the nature of the individual's sport. Partial tears of the glenohumeral capsule or rotator cuff musculature present problems similar to subluxation in the rehabilitative process. The return of motor function, strength, size, and protection from reoccurrence dictate the rehabilitative time and procedures for those athletes who have brachial plexus problems.

## Post-Surgical Shoulder Rehabilitation

Post-surgical rehabilitation of the shoulder is affected by the orthopedist's choice of procedure, the limitations created and the dynamic result desired. A period of immobilization is followed by a multi-phased, active assistive, and active resistive program of mobilization.

The post-surgical program includes range-of-motion exercises utilizing Codman's for scapulohumeral rhythm, basic active range-of-motion exercises from standing, back-lying and prone positions, towel exercises, shoulder-wheel routines and finger wall-climbing. Complete range-of-motion is normally expected in six to eight weeks after surgery. However, in some surgical procedures, complete external rotation is not desired or dynamically possible because of the limitation created by the procedure itself. Comparable criteria to first episode luxation in assessing range-of-motion is used to determine when progressive exercise will begin following surgery. The progressive resistance process is facilitated by utilizing various forms of resistance and different kinds of equipment, as mentioned in the non-surgical considerations.

Evaluation of progress should be periodic and specific. Goniometric measurements, recordings of strength, power and endurance, and functional capabilities should be observed.

This author has the privilege and honor of working closely with Dr. Wm. G. Clancy, Jr. who heads the Division of Sports Medicine at the University of Wisconsin. Dr. Clancy prefers the Bristow procedure to repair a reoccurring anterior subluxation or luxation of the glenohumeral joint. The tip of the coricoid process is used as a bone block. With the conjoined tendon still attached, it is placed at the anterior, inferior lip of the glenoid. There is usually not only a labrum defect, but also a significant bony defect in the area. In addition, the subscapularis tendon is divided and the lower one-half is placed beneath the conjoined tendon which is attached to

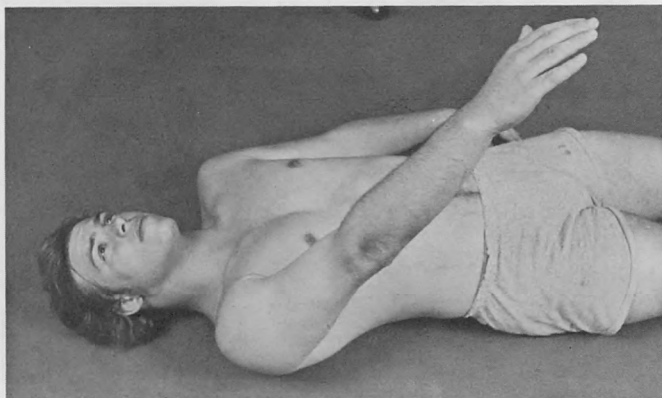


Figure 5.



Figure 6.

the tip of the coricoid process, thereby creating a dynamic stabilization. A limitation is created with this procedure of approximately - 10° to - 15° of full external rotation.

The rehabilitative process for the Bristow procedure is directed by the sports medicine team at the University of Wisconsin as follows:

### Post-Surgical Rehabilitation Progression Schedule

#### Second Week — Immobilization

Static contractions: 100 times daily

Supination of forearm

Abduction

Adduction

#### Third Week — Begin mobilization process

1. Girth measurements: Forearm and biceps

2. Codman's scapulohumeral exercises

a. Circular movements, clockwise, counter-clockwise

b. Horizontal abduction, adduction

c. Flexion and extension — 30 repetitions of each movement two or three times daily

3. Goniometric measurements

a. Abduction

b. Flexion

c. Extension

d. Internal rotation

e. External rotation

4. Return to sling immobilizer

#### Fourth Week

1. Remove sling immobilizer

2. Codman's with light weight, two or three times daily

3. Range-of-motion exercises for shoulder, twice daily (FIGURE 5)

a. Lying on back

1) With palm down take straight arm straight up overhead. Do not bend elbow. (forward flexion)

2) With palm facing body, take straight arm out to side to 90° at shoulder. Do not bend elbow. (abduction)

3) With arm out to side at 90° and elbow bent to 90°, roll arm half-circle forward and half-circle backward. (internal and external rotation)

4) With arm out to side at 90° at shoulder, take straight arm over chest. Do not bend elbow. (horizontal adduction & abduction)

5) With arm held over chest at 90° at shoulder, punch towards ceiling from shoulder. Do not bend elbow. (scapula protraction)

b. Lying on stomach — 10 repetitions each

1) With arm by side and palm turned up, take arm straight up.

2) With arm overhead, touching ear, take straight arm up. Do not bend elbow.

3) With arms by side, shrug shoulders. (retraction)

#### Fifth Week

1. Repeat range-of-motion exercises, 10 repetitions each, twice daily.

2. Begin towel exercises (ends of towel, broom handle, or wand held in hands) Lying on back, 10 reps each, twice daily (FIGURE 6).

a. Overhead flexion and return

b. Lower to neck, elbows out at 90° (retraction)

c. Overhead flexion to 160° — lower towel to top of head, push straight back.

d. Elbows at 90°, external rotation, internal rotation

3. Finger wall-climb — begin by facing wall, shoulder in flexion, fingers touching wall; walk fingers up wall slowly, twice daily (FIGURE 7).

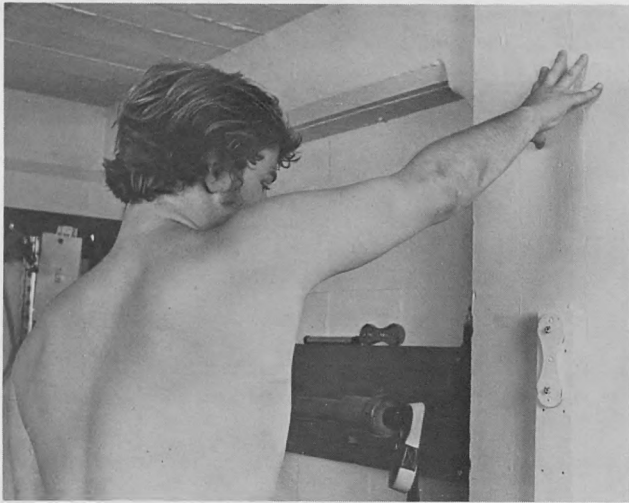


Figure 7.

#### Sixth Week

1. Girth measurements
2. Goniometric measurements
3. Repeat range-of-motion and towel exercises — once or twice daily.
4. Finger wall-climb — with side to wall, arm abducted to 90° walk fingers up wall, gradually decreasing distance from wall.
5. If 75% or more of the full range-of-motion is attained in abduction, flexion, extension, horizontal flexion, horizontal extension and internal rotation, plus 15° to 30° of external rotation, progressive resistance exercises may commence. 160° of abduction and elevation are also desirable.

#### Seventh Week

1. Continue range-of-motion, if necessary
2. Progressive resistance
  - a. Orthotron — isokinetic Speed #3, 3 x 10 repetitions daily



Figure 8.

1. Flexion
2. Extension
3. Abduction
4. Adduction
- b. Flexible tubing to tolerance — concentric/eccentric, daily (FIGURE 8)
  1. Horizontal flexion, back-lying
  2. Horizontal extension, back-lying
  3. Internal rotation from standing position or back-lying, elbow against side.
  4. External rotation from standing position or back-lying, elbow against side.

#### Eighth Week

Repeat routine for the seventh week for progressive resistance on Orthotron and flexible tubing.

#### Ninth Week

1. Girth measurement if not equal bilaterally
2. Goniometric measurements if not full range-of-motion, with the exception of external rotation (can expect 40° to 55° maximum or -15° limitation)
3. Continue Orthotron, speed #3, three days per week, increase effort.

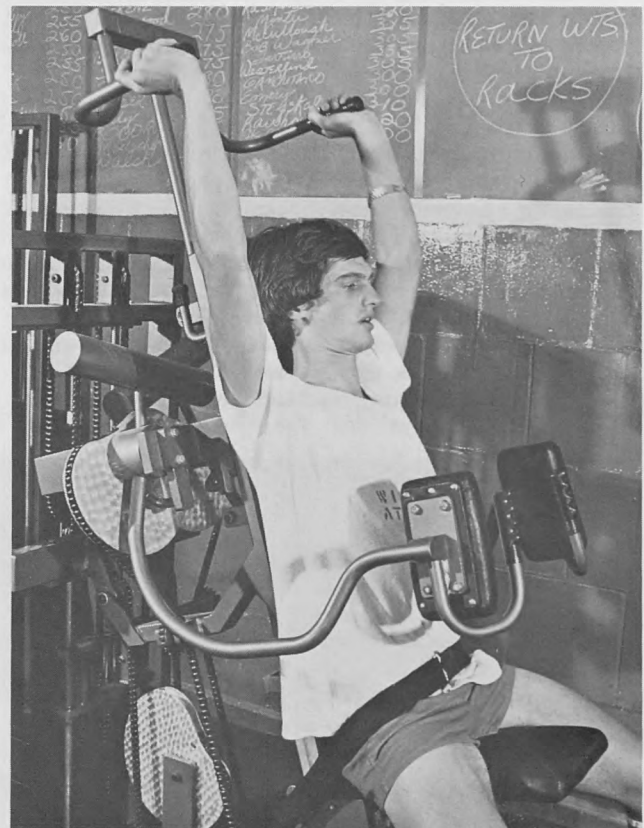


Figure 9.

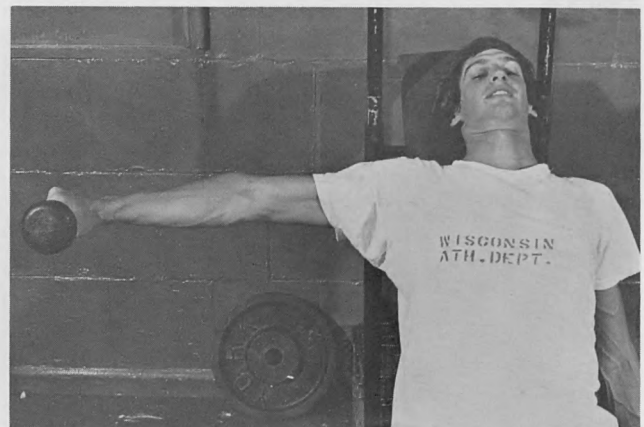


Figure 10.

4. Continue flexible tubing, three days per week, increase effort, decrease length of tubing
5. Begin free weights, Universal gym, and Nautilus programs — two days per week
  - a. Bench press — Warmup with light weight, 12 reps
  - b. Nautilus double-shoulder machine — 3 x 12 reps for each exercise (FIGURE 9)
  - c. Seated flexion — abduction raises with dumbbells — 3 x 13 reps (FIGURES 10)
  - d. Shoulder shrugs — 2 x 20 reps
  - e. Barbell curls — 3 x 10 reps
  - f. Seated, forearm supination

#### Tenth and Eleventh Weeks

1. Orthotron, speed #7 and #9, power and endurance — 3 sets of endurance repetitions — functional speed emphasis — 3 days a week.
2. Flexible tubing — increase resistance
3. Free weights, Nautilus, Universal gym
4. By eleventh week begin skipping rope, throwing motion and punching bag.
5. Power activities with dumbbells or barbells (abduction, overhead press, biceps curls) quick repetitions until full range-of-motion can no longer be attained. Repeat 3 times.

Twelfth Week — Functional, active rehabilitation should be complete

1. Full range-of-motion with exception of external rotation
2. Bilateral strength
3. Restoration of power and endurance
4. Smooth, coordinated scapulohumeral rhythm
5. Functional movements normal in jumping rope, throwing softball and punching a bag.

#### Expected Progression

By 6th week

75% of range-of-motion, except in external rotation  
160° of abduction and elevation

By 12th week

Full range-of-motion, except in external rotation  
Full return of strength, power, and endurance  
Full functional capacity

#### Critical Signals

1. If, between 8 - 12 weeks, external rotation is + 15° or less, mobilization under anesthesia may be indicated.
2. If pain is present between 8 - 12 weeks post-operative, especially in the area of the glenoid labrum over the bone block, the screw may be working loose.

### The Over-Use or Over-Stress Syndrome

Rehabilitation procedures for over-use or over-stress conditions of the shoulder usually follow a period of rest and therapy. Biceps and supraspinatus tendonitis, bursitis, shoulder impingement and general rotator cuff over-use conditions fall into this category. Disabling pain during and after activity which will compromise the athlete's function over an extended period of time will cause the athlete to eventually restrict activity and require complete rest.

Anti-inflammatory medication, ultrasound, and transcutaneous nerve stimulation are adjuncts to shoulder over-use recovery along with basic range-of-motion exercises after the resting stage. Immobilization is contraindicated in most over-use conditions. Rehabilitative procedures are employed which mobilize the shoulder in a

pain-free range. Since the motion of abduction and elevation causes impingement of the subdeltoid bursa and tendon between the acromial process and the greater tuberosity of the humerus, this movement should be avoided in the early stages of rehabilitation if inflammation of this bursa is apparent. Alteration of the athlete's basic training program or a change of events may be indicated to prevent chronic reoccurrence. A stretching routine may be necessary because of contracture from non-use of specific musculature. The contract, relax, stretch procedure is used to gain flexibility in the involved musculatures.

Basic mobilization exercises utilized for over-use conditions include:

1. Codman's, passive and active
2. Wall exercises<sup>1</sup>
  - a. Standing with back to wall, elbows at side and flexed to 90°. external rotation is attempted
  - b. Similar to a. but with increasing abduction of the arm through from 20°, 40°, 60°, to 90° of abduction
  - c. Hands behind head — backward movement of elbows
  - d. Corner pushups — hands at waist level, then hands climb until they are fully extended overhead, still apart, anterior capsule and pectoral stretch.
3. Towel or wand exercises
  - a. Elevation from overhead to arms extended overhead
  - b. Behind neck to arms extended
  - c. Lateral motion, arms behind head
  - d. Towel behind back, towel is elevated by one hand to bring the opposite up behind the back, stretching the anterior capsule and external rotators
4. Wall climbing exercises

1. Cailliet, Rene, M.D.; *Shoulder Pain*, F. A. Davis: Philadelphia, Page 50.

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131 White Building  
Pennsylvania State University  
University Park, PA 16802

### National Head and Neck Injury Registry

Dr. Joseph Torg, M.D.  
401 Conestoga Road  
St. Davids, PA 19087

### Sports Safety and Health Care Society

Sayers "Bud" Miller, A.T.,C.  
131 White Building  
Pennsylvania State University  
University Park, PA 16802

# BY-LAWS OF THE NATIONAL ATHLETIC TRAINERS ASSOCIATION

## ARTICLE I

### PRESIDENT OF THE NATIONAL ATHLETIC TRAINERS ASSOCIATION

#### Section 1

*Selection:* Elected by majority popular vote of Certified NATA membership. Board of Directors serves as the nominating committee. The Board will nominate two candidates with biographies of the two candidates published in *Athletic Training-The Journal of the National Athletic Trainers Association* in the first issue after the winter meeting of the Board of Directors prior to the popular vote. Candidates must have served as a member of the Board of Directors at some time during the four years immediately preceding beginning date of term of office.

#### Section 2

*Term of Office:* Two years. May not serve more than two consecutive terms.

#### Section 3

##### *Functions and Responsibilities:*

1. Serves as the official spokesman for the Board of Directors and the Association concerning public relations and speaking engagements for the membership.
2. Maintains communications with the Executive Director in all matters pertaining to the coordination, management and supervision of the Association's affairs.
3. Calls all meetings of the Board of Directors as deemed necessary and advisable.
4. Presides over all meetings of the Board of Directors.
5. Presides over all National Business meetings.
6. Represents a tie-breaking vote on the Board of Directors and votes only in the event of impasse.
7. Keeps the Board of Directors informed about Association affairs between Board meetings.
8. This is a non-paying position; however, all traveling expenses are paid by the NATA.
9. Serves as ex-officio member of all Association committees.
10. Appoints with agreement of Executive Director and with the approval of the Board of Directors, all committee chairmen.
11. Appoints with agreement of Executive Director and with the approval of the Board of Directors, representatives of NATA to allied organizations.

## ARTICLE II

### VICE PRESIDENT

#### Section 1

*Selection:* The district director from one of the ten districts shall be elected to the office of vice president by the board of directors, election shall be by majority vote.

#### Section 2

*Term of Office:* One year and may be re-elected.

#### Section 3

*Functions and Responsibilities:* The vice president has no duties except to assume the office of president as prescribed in the Constitution of the National Athletic Trainers Association.

## ARTICLE III

### BOARD OF DIRECTORS

#### Section 1

*Selection:* Elected representatives of the ten (10) NATA Districts plus a president elected by popular vote of the Certified membership. Each representative must be a Certified member of the Association.

#### Section 2

##### *District Geographic Areas:*

##### District 1-

Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont, Quebec

##### District 2-

Delaware, New Jersey, New York, Pennsylvania

##### District 3-

Maryland, North Carolina, South Carolina, Virginia, West Virginia, District of Columbia

##### District 4-

Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin, University of Iowa, Manitoba, Ontario

##### District 5-

Iowa, Kansas, Missouri, Nebraska, North Dakota, Oklahoma, South Dakota, University of Colorado

##### District 6-

Arkansas, Texas

##### District 7-

Arizona, Colorado, New Mexico, Utah, Wyoming

##### District 8-

California, Nevada, Hawaii

##### District 9-

Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, Tennessee

##### District 10-

Alaska, Idaho, Montana, Oregon, Washington, Alberta, British Columbia, Saskatchewan

#### Section 3

*Terms of Office:* Three (3) years for elected representatives to the board.

Districts 1, 4, 7

1971 and every third year thereafter

Districts 2, 5, 8

1972 and every third year thereafter

Districts 3, 6, 9, 10

1973 and every third year thereafter

#### Section 4

##### *Functions and Responsibilities:*

1. Meets at the National Convention and at any other time during the year the president determines it necessary to call a board meeting.
2. Serves as the official legislative body of the Association.
3. Approves appointment of all committee chairmen and standing committee members.
4. Approves the appointment of all special committees deemed necessary for the conduct of special Association projects of study.
5. Appoints all executive officers of the Association.
6. Serves as the nominating committee for the position of President, of the Board of Directors. Will nominate two candidates with biographies of the candidates published in *Athletic Training-Journal of the National Athletic Trainers Association* prior to the popular vote.
7. Continually evaluates and defines the roles and functions of all Association officers, standing committees and special committees.
8. Receives recommendations, suggestions and requests from Association districts and makes recommendations to the President for their inclusion in the agenda of Board of Director's meetings.
9. Continually re-evaluates the goals and objectives of the Association and accepts primary responsibility for progress toward these goals.
10. Meets in a private session at the annual NATA convention for the purpose of reviewing personal performances and appointing persons to all positions open or deemed necessary. A majority vote of the board is necessary to terminate the office of an appointed person; this will be done by secret vote and counted by the president and one other board member.
11. Receives and acts on recommendations of the ethics committee in regard to matters of unethical conduct. Notifies the accused person of charges pending and advises him of his right to appear before the board prior to board action on the charges. The decision of the Board of Directors in Code of Ethics matters if final, except that if the decision is to initiate cancellation of membership such cancellation shall be done as prescribed in ARTICLE VI., Sections 1 and 2 of the Constitution.
12. Approves recommendations of Board of Certification for certificate of candidates.
13. Acts as an auditing committee for NATA financial affairs and approves financial statement of Executive Director.

## ARTICLE IV

### EXECUTIVE DIRECTOR

#### Section 1

*Selection:* Appointed by the Board of Directors.

#### Section 2

*Term of Office:* Subject to yearly review by the Board of Directors.

#### Section 3

*Salary:* To be determined by the Board of Directors.

#### Section 4

##### *Functions and Responsibilities:*

1. Implements the mandates and policies of the Association, as determined by the Board of Directors.
2. Between meetings of the Board of Directors, enforces policy on behalf of the Association as is consistent with the mandates and legislation enacted by the Board of Directors.
3. Possesses full power and complete responsibility to transact all business for and on behalf of the Association and to manage all property, affairs, and activities of the Association subject to the provisions of the constitution and by-laws and the resolutions and enactments of the Board of Directors.
4. To commit the Association to no financial obligation in excess of its available financial resources.
5. Provides for the maintenance of an Association headquarters which shall serve as the center of all official activities of the Association.
6. Serves as the official spokesman concerning business and governmental affairs for the Association.
7. Serves as the custodian of all records, books and papers belonging to the Association.
8. Secures the minutes of all Board of Directors' meetings from the Administrative Assistant and distributes the minutes to all board members within a reasonable time subsequent to each meeting.
9. Submits a written report of the Association's progress to the Board of Directors of each annual meeting and upon the request of the Board.

10. Conducts the official correspondence of the Association including such matters as notifying members of meetings, officers of their election, committee members of their appointments, and all notices as required by the by-laws or as requested by the Board of Directors.
11. Handles all financial matters of the Association with the assistance of the Administrative Assistant.
12. Maintains a current and accurate mailing list and an official record of the Association membership.
13. Coordinates the activities of the Association and acts as liaison between the districts and the National office and polls the District Directors at least one month in advance of the annual board meeting for suggestions on board agenda.
14. Maintains liaison with allied organizations in conjunction with NATA representative to such organizations.
15. Maintains communication and records of all committee chairmen, committee members and members of the Board of Directors.
16. Submits an audited financial report to Board of Directors prior to the Annual Meeting.
17. Prepares the annual budget and presents this budget to the board for approval.
18. Serves as ex-officio member of all Association committees.
19. Continually reviews the Association Constitution and By-laws in terms of newly enacted legislation and makes recommendations to the Board of Directors for revisions, deletions or additions.
20. Maintains an accurate and current record of newly enacted legislation and incorporates it into the Constitution and By-Laws and as instructed by the Board of Directors.
21. Supplies the Board of Directors with an accurate record of all Constitution and By-Laws revisions, deletions or additions at their annual meeting.
22. Conducts, at regular three year intervals, a comprehensive review of the Constitution and By-Laws and makes recommendations to the Board of Directors for reprinting if deemed necessary.

#### ARTICLE V ASSISTANT EXECUTIVE DIRECTOR(S)

##### Section 1

*Selection:* Appointed by the Executive Director from the Certified membership of the Association with the approval of the Board of Directors.

##### Section 2

*Term of Office:* Subject to yearly review by the Board of Directors.

##### Section 3

*Salary:* To be determined by the Board of Directors.

##### Section 4

##### *Functions and Responsibilities:*

1. To assist the Executive Director in functions and responsibilities as designated by the Executive Director.

#### ARTICLE VI ADMINISTRATIVE ASSISTANT(S)

##### Section 1

*Selection:* Appointed by the Executive Director with approval of the Board of Directors.

##### Section 2

*Term of Office:* Subject to yearly review by the Board of Directors.

##### Section 3

*Salary:* To be determined by the Board of Directors.

##### Section 4

##### *Functions and Responsibilities:*

1. Assists Executive Director in all functions and responsibilities of the National Office.

\*See Functions and Responsibilities of Executive Director.

#### ARTICLE VII PARLIAMENTARIAN

##### Section 1

*Selection:* Appointed by President with agreement of Executive Director and approval of Board of Directors.

##### Section 2

*Term of Office:* Subject to yearly review by the Board of Directors.

##### Section 3

##### *Functions and Responsibilities:*

1. Should be a Certified member of the NATA and must have a thorough knowledge of parliamentary procedure. If no such individual is available within the Association the NATA must hire a qualified expert from outside the Association.
2. Is in charge of keeping the Board of Directors and Annual business meetings operating under parliamentary procedure as prescribed by the Roberts' Rules of Order.

#### ARTICLE VIII ADVISORY COMMITTEE

##### Section 1

*Selection of Chairman:* Appointed by the President with agreement of Executive Director and approval of Board of Directors from the Certified membership of the Association.

##### Section 2

*Term of Office:* One year and may be reappointed with approval of the Board of Directors.

##### Section 3

*Committee Members:* The number of committee members will be determined by the President and Executive Director.

##### Section 4

*Selection of Committee Members:* Appointed by the President with agreement of Executive Director and approval of Board of Directors.

##### Section 5

*Term of Office:* One year and may be reappointed.

#### Section 6

##### *Functions and Responsibilities:*

To advise the President and Executive Director, at their request, on matters needing specific information in the respective speciality fields of the committee members.

#### ARTICLE IX AUDIO-VISUAL AIDS COMMITTEE

##### Section 1

*Selection of Chairman:* Appointed by the President with agreement of Executive Director and approval of the Board of Directors from the Certified membership of the Association.

##### Section 2

*Term of Office:* Two years and may be reappointed with approval of the Board of Directors.

##### Section 3

*Committee Members:* The number of committee members will be determined by the committee chairman to form a workable group.

##### Section 4

*Selection of Committee Members:* Recommended by the Chairman and appointed by the President with the approval of the Board of Directors from the Certified membership of the Association.

##### Section 5

*Term of Office:* Two years and may be reappointed.

##### Section 6

##### *Functions and Responsibilities:*

1. Maintains a bibliography and sources of audio-visual aids available to Association members.
2. Cooperates with individuals, manufacturers, companies, etc. as advisor in audio-visual projects.
3. Investigates and recommends to Board of Directors the advisability of sponsorship, co-sponsorship, authorship, etc. of audio-visual aids. The Committee is given authority to approve audio-visual projects for further development, but not to give final approval.
4. Coordinates and supervises all Board approval audio-visual aid projects.
5. Establishment of and maintenance of an audio-visual aid loan library for the membership of the Association.
6. Cooperates with all standing committees in audio-visual aids relative to their findings and needs.
7. Cooperate with President in development of audio-visual aids for his use as the official spokesman for the Board of the membership concerning public relations.

#### ARTICLE X CERTIFICATION COMMITTEE

##### Section 1

*Selection of Chairman:* Appointed by the President with agreement of Executive Director and approval of the Board of Directors from the Certified membership of the Association. The Chairman shall also serve as Chairman of the Board of Certification.

##### Section 2

*Term of Office:* Two years and may be reappointed with approval of Board of Directors.

##### Section 3

*Committee Members:* The number of committee members will be determined by the committee chairman to form a workable group.

##### Section 4

*Selection of Committee Members:* Recommended by the Chairman appointed by the President with approval of the Board of Directors from the Certified membership of the Association.

##### Section 5

*Term of Office:* Two years and may be reappointed with approval of Board of Directors.

##### Section 6

##### *Functions and Responsibilities:*

1. Cooperates with the Professional Education Committee in the establishment of certification requirements and procedures for certification.
2. Assists in the construction and revision of appropriate certification examinations.

#### ARTICLE XI BOARD OF CERTIFICATION

##### Section 1

*Selection of Chairman:* Chairman of Board of Certification is the Certification Committee Chairman.

##### Section 2

*Board Members:* The members will be the same as Certification Committee plus consultants.

##### Section 3

*Selection of Board Members:* Recommended by the Chairman appointed by the President with the approval of the Board of Directors from the Certified membership of the Association. Consultant members of Board of Certification need not be Certified members of the Association. The ratio shall be three Certified members to one consultant.

##### Section 4

*Term of Office:* Two years and may be reappointed by the Board of Directors.

##### Section 5

##### *Functions and Responsibilities:*

1. Receives and reviews all applications for certification.
2. Coordinates and supervises the administration and grading of all certification examinations.
3. Ascertains the fulfillment of Certification requirements and makes recommendations to the Board of Directors for final approval.

#### ARTICLE XII DRUG EDUCATION COMMITTEE

##### Section 1

*Selection of Chairman:* Appointed by the President with agreement of the Executive Director and the approval of the Board of Directors from the Certified membership of the Association.

## Section 2

*Term of Office:* Two years and may be reappointed with approval of Board of Directors.

## Section 3

*Committee Members:* The number of committee members will be determined by the committee chairman to form a workable group.

## Section 4

*Selection of Committee Members:* Recommended by the Chairman appointed by the President with the approval of the Board of Directors from the Certified membership of the Association.

## Section 5

*Term of Office:* Two years and may be reappointed with approval of Board of Directors.

## Section 6

### *Functions and Responsibilities:*

1. To develop drug education material for use and distribution by the Association.
2. To maintain a bibliography on resource material pertaining to drug education.

## ARTICLE XIII

### ETHICS COMMITTEE

#### Section 1

*Selection of Chairman:* Appointed by the President with agreement of the Executive Director and the approval of the Board of Directors from the Certified membership of the Association.

#### Section 2

*Term of Office:* Two years and may be reappointed with approval of Board of Directors.

#### Section 3

*Committee Members:* The number of committee members will be determined by the committee chairman to form a workable group.

#### Section 4

*Selection of Committee Members:* Recommended by the Chairman appointed by the President with the approval of the Board of Directors from the Certified membership of the Association.

#### Section 5

*Term of Office:* Two years and may be reappointed with approval of Board of Directors.

#### Section 6

### *Function and Responsibilities:*

1. Accepts and investigates reports of violations of the Association Code of Ethics.
2. Reports to Board of Directors Committee findings and recommendations.

## ARTICLE XIV

### GRANTS AND SCHOLARSHIP COMMITTEE

#### Section 1

*Selection of Chairman:* Appointed by the President with agreement of Executive Director and approval of the Board of Directors from the Certified membership of the Association.

#### Section 2

*Term of Office:* Two years and may be reappointed with approval of the Board of Directors.

#### Section 3

*Committee Members:* The number of committee members will be determined by the committee chairman to form a workable group.

#### Section 4

*Selection of Committee Members:* Recommended by the Chairman and appointed by the President with the approval of the Board of Directors.

#### Section 5

*Term of Office:* Two years and may be reappointed.

#### Section 6

### *Functions and Responsibilities:*

1. Promote and encourage scholarship through gifts, loans, and grants-in-aid.
2. Establish guidelines and criteria for the awarding of educational grants and scholarships.
3. Stimulates and develops scholarships sponsored by industry, individual donors, service clubs, minority groups, associations, athletic conferences, and professional sports leagues.
4. Formulates recommendations for rules and administration of self-help programs, either loan or job, to include college loan, National Defense loan, Education Act loan, and State Guaranteed or Federal Insured loan.
5. Reviews, reviews and screens all applications prior to April 1 and makes recommendations to Board of Directors for Association approval or rejection.

## ARTICLE XV

### HISTORICAL AND ARCHIVES COMMITTEE

#### Section 1

*Selection of Chairman:* Appointed by the President with agreement of the Executive Director and approval of the Board of Directors from the Certified membership of the Association.

#### Section 2

*Term of Office:* Two years and may be reappointed with approval of Board of Directors.

#### Section 3

*Committee Members:* The number of committee members will be determined by the committee chairman to form a workable group.

#### Section 4

*Selection of Committee Members:* Recommended by the Chairman appointed by the President with the approval of the Board of Directors from the Certified membership of the Association.

#### Section 5

*Term of Office:* Two years and may be reappointed with approval of Board of Directors.

#### Section 6

### *Functions and Responsibilities:*

1. Compiles history of the Association.
2. Establishes a plan for maintenance of historical records of the Association and preserving important archives.

## ARTICLE XVI

### HONORS AWARDS COMMITTEE

#### Section 1

*Selection of Chairman:* Appointed by the President with agreement of Executive Director and the approval of the Board of Directors from the Certified membership of the Association. The Chairman of the Honor Awards Committee will be Chairman of the N.A.T.A. Hall of Fame Committee.

#### Section 2

*Term of Office:* Two years and may be reappointed with the approval by the Board of Directors.

#### Section 3

*Committee Members:* The number of committee members will be determined by the committee chairman to form a workable group.

#### Section 4

*Selection of Committee Members:* Recommended by the Chairman and appointed by the President with the approval of the Board of Directors from the Certified membership of the Association.

#### Section 5

*Term of Office:* Two years and may be reappointed with approval by the Board of Directors.

#### Section 6

### *Functions and Responsibilities:*

1. Coordinates and supervises the establishment and disbursement of all special recognitions and awards presented under the auspices of the Association.
2. Receives, prior to February, reviews and screens all candidates for the 25 year Award, Honorary Members Award, and Helms Award and makes recommendations to the Board of Directors prior to March 15.
3. Reviews and reviews all proposals for the initiation of new or additional honor awards and makes recommendations to the Board of Directors for Association approval or rejection.
4. The Citizens Savings Athletic Foundation (formerly Helms Hall of Fame), N.A.T.A. Hall of Fame Committee will function under the Honor Awards Committee, but the committee will remain secret.

## ARTICLE XVII

### INTERNATIONAL GAMES TRAINER NOMINATION COMMITTEE

#### Section 1

*Selection of Chairman:* Appointed by the President with agreement of the Executive Director and the approval of the Board of Directors from the Certified membership of the Association.

#### Section 2

*Term of Office:* Two years and may be reappointed with approval of Board of Directors.

#### Section 3

*Committee Members:* The number of committee members will be determined by the committee chairman to form a workable group. The committee will remain secret.

#### Section 4

*Selection of Committee Members:* Recommended by the Chairman, appointed by the President with the approval of the Board of Directors from the Certified membership of the Association.

#### Section 5

*Term of Office:* Two years and may be reappointed with approval of Board of Directors.

#### Section 6

### *Functions and Responsibilities:*

1. Formulates procedures for NATA members to apply for nomination to athletic training staff for international games and submit such procedures to Board of Directors for approval.
2. Conduct process of nominating the applicants to the Medical Service Committee of International Games.

## ARTICLE XVIII

### JOURNAL COMMITTEE

#### Section 1

*Selection of Chairman:* Appointed by the President with agreement of the Executive Director and approval of the Board of Directors from the Certified membership of the Association. The chairman also serves as the Editor-in-Chief of *Athletic Training - The Journal of the National Athletic Trainers Association*.

#### Section 2

*Term of Office:* Two years and may be reappointed with approval of the Board of Directors.

#### Section 3

*Committee Members:* The number of committee members shall be determined by the committee chairman to form a workable group.

#### Section 4

*Selection of Committee Members:* Recommended by the Chairman and appointed by the President with the approval of the Board of Directors from the Certified membership of the Association.

#### Section 5

*Term of Office:* Two years and may be reappointed with approval or the Board of Directors.

#### Section 6

### *Function and Responsibilities:*

1. Serves as the editorial committee for *Athletic Training*.
2. Selects a printer, with approval of the Board of Directors to produce and distribute *Athletic Training*.
3. Solicits and sells advertising space in *Athletic Training* at rates determined by the committee.
4. Establishes and maintains a written statement of the editorial policies of *Athletic Training* subject to review and approval by the Board of Directors.

#### Section 3

*Committee Members:* One member from each District.

#### Section 4

*Selection of Committee Members:* One (1) Certified member from each of the ten (10) districts appointed by the District Director.

#### Section 5

*Term of Office:* Two years and may be reappointed with the approval of the Board of Directors.

#### Section 6 *Functions and Responsibilities:*

1. Cooperates with National and District Offices regarding opinions and clarification of matters relating to qualifications for membership.
2. Periodically reviews the various membership classification and makes recommendations to the Board of Directors for changes.
3. The membership committee is responsible to the executive director.
4. Cooperates with Professional Education Committee and Certification Committee in the relationship of Continuing Education, Membership and Certification.

#### ARTICLE XX

##### NATIONAL CONVENTION COMMITTEE

###### Section 1

*Selection of Chairman:* Appointed by the President with agreement of the Executive Director and approval of the Board of Directors from the Certified membership of the Association.

###### Section 2

*Committee Members:* The number of committee members shall be determined by the chairman to form a workable group. The committee shall include the yearly local general program chairman, clinic program chairman and entertainment chairman.

###### Section 4

*Selection of Committee Members:* Recommended by the Chairman, appointed by the President with approval of the Board of Directors from the Certified membership of the Association.

###### Section 5

*Term of Office:* (except local ex-officio members) Two years and may be reappointed with approval of the Board of Directors.

###### Section 6

###### *Functions and Responsibilities:*

1. Serves as Chairman of National Convention Committee, which is made up of the following:
    - a. Program Chairman
    - b. Entertainment Chairman
    - c. Banquet Chairman
    - d. Registration Chairman
- NOTE: (Committee Chairmen are appointed by and from the District that is hosting the Convention).
2. Selects Convention sites and hotels according to the national guidelines set up by the Board of Directors.
  3. Cities shall be selected five (5) years in advance. Hotels shall be selected at least three (3) years in advance with final arrangements one (1) year in advance. A review of hotel requirements shall be made with Convention personnel six (6) months prior to the national meeting.
  4. Coordinates National Convention Functions.

#### ARTICLE XXI

##### PLACEMENT COMMITTEE

###### Section 1

*Selection of Chairman:* Appointed by the President with agreement of the Executive Director and approval of the Board of Directors from the Certified membership of the Association.

###### Section 2

*Term of Office:* Two years and may be reappointed by the Board of Directors.

###### Section 3

*Committee Members:* There shall be one committee member from each district.

###### Section 4

*Selection of Committee Members:* Recommended by the Chairman and appointed by the President with the approval of the Board of Directors from the Certified membership of the Association.

###### Section 5

*Term of Office:* Two years and may be reappointed with approval of the Board of Directors.

###### Section 6

###### *Function and Responsibilities:*

1. Serves as the official job placement agency of the Association.
2. Receives notification of job vacancies from high school, colleges and universities, and professional teams, and maintains a current listing of all vacancies.
3. Receives requests from Association members for information on available position vacancies.
4. Informs only NATA members of available positions and informs employers of prospective NATA applicants.
5. Arranges for and maintains a job placement service at the National meeting, (1) posting of current job vacancies, (2) posting a list of Association members desiring placement, (3) assistance in interview arrangements.

#### ARTICLE XXII

##### PROFESSIONAL EDUCATION COMMITTEE

###### Section 1

*Selection of Chairman:* Appointed by the President with agreement of the Executive Director and approval of the Board of Directors from the Certified membership of the Association.

###### Section 2

*Term of Office:* Two years and may be reappointed with approval of the Board of Directors.

###### Section 3

*Committee Members:* The number of committee members will be determined by the committee chairman to form a workable group.

###### Section 4

*Selection of Committee Members:* Recommended by the chairman and appointed by the President with the approval of the Board of Directors from the Certified membership of the Association.

###### Section 5

*Term of Office:* Two years and may be reappointed with approval of the Board of Directors.

###### Section 6

###### *Functions and Responsibilities:*

1. Investigates and studies all possibilities for the professional education and ad-

vancement of the Association, its members, and the athletic training profession and makes recommendations to the Board of Directors.

2. Confers with appropriate consultants regarding recommendations for professional advancement.
3. Makes recommendations to the Board of Directors for the accreditation of schools offering graduate and undergraduate preparation in athletic training.
4. Establishes and supervises the enforcement of professional education standards and criteria for all association certified athletic trainers.
5. Cooperates with the Certification Committee in the establishment of certification requirements and criteria.
7. Serves as a consulting and liaison agency between the Association and educational institutions providing or preparing to provide professional preparation for athletic trainers.
8. Sends educational requirements and any future changes in educational standards, to all Recruitment Committee members.

#### Section 7

##### *Sub-Committee for Graduate Education*

1. *Selection of Chairman:* Recommended by the chairman of the Professional Education Committee and appointed by the President with agreement of the Executive Director and approval by the Board of Directors from the Professional Education Committee members.
2. *Term of Office:* Two years and may be reappointed with approval of the Board of Directors.
3. *Sub-Committee members:* The number of sub-committee members to be determined by the sub-committee chairman to form a workable group.
4. *Term of Office:* Two years and may be reappointed with approval of the Board of Directors.
5. *Functions:* To work in the area of graduate education and make recommendations to the Professional Education Committee as a whole.

#### Section 8

##### *Sub-Committee for Continuing Education*

1. *Selection of Chairman:* Recommended by the chairman of the Professional Education Committee and appointed by the President with agreement of the Executive Director and approval by the Board of Directors from the Professional Education Committee members.
2. *Term of Office:* Two years and may be reappointed with approval of the Board of Directors.
3. *Sub-Committee members:* The number of sub-committee members to be determined by the sub-committee chairman to form a workable group.
4. *Term of Office:* Two years and may be reappointed with approval of the Board of Directors.
5. *Functions:* To work in the area of continuing education and make recommendations to the Professional Education Committee as a whole.

#### ARTICLE XIII

##### PUBLIC RELATIONS AND INFORMATION COMMITTEE

###### Section 1

*Selection of Chairman:* Appointed by the President with agreement of the Executive Director and approval of the Board of Directors from the Certified membership of the Association.

###### Section 2

*Term of Office:* Two years and may be reappointed by the Board of Directors.

###### Section 3

*Committee Members:* The number of committee members will be determined by the committee chairman to form a workable group.

###### Section 4

*Selection of Committee Members:* Appointed by the Chairman with the approval of the Board of Directors from the Certified membership of the Association.

###### Section 5

*Term of Office:* Two years and may be reappointed with approval of the Board of Directors.

###### Section 6

###### *Functions and Responsibilities:*

1. Establishes and maintains an effective public relations program for the Association by preparing and distributing appropriate news releases, feature stories, etc. to the various news media, radio, television and newspapers.
2. Investigates and recommends to the Board of Directors possible avenues through which the Association may enhance its professional image and interpret its purposes and objectives to allied associations and professional, high school, colleges and universities, and the general public.

#### ARTICLE XXIV

##### RECRUITMENT COMMITTEE

###### Section 1

*Selection of Chairman:* Appointed by the President with agreement of the Executive Director and approval of the Board of Directors from the Certified membership of the Association.

###### Section 2

*Term of Office:* Two years and may be reappointed by the Board of Directors.

###### Section 3

*Committee Members:* The number of committee members will be determined by the committee chairman to form a workable group.

###### Section 4

*Selection of Committee Members:* Recommended by the Chairman and appointed by the President with the approval of the Board of Directors from the Certified membership of the Association.

###### Section 5

*Term of Office:* Two years and may be reappointed with approval of the Board of Directors.

###### Section 6

###### *Function and Responsibilities:*

1. Answers correspondence, inquiries and requests for guidance and counseling concerning the professional preparation of athletic trainers.
2. Investigates the use of films, slides, and filmstrips for recruitment purposes and makes recommendations to the Board of Directors.

## ARTICLE XXV RESEARCH AND INJURY COMMITTEE

### Section 1

*Selection of Chairman:* Appointed by the President with agreement of the Executive Director and approval of the Board of Directors from the Certified membership of the Association.

### Section 2

*Term of Office:* Two years and may be reappointed by the Board of Directors.

### Section 3

*Committee Members:* The number of committee members will be determined by the committee chairman to form a workable group.

### Section 4

*Selection of Committee Members:* Recommended by the Chairman and appointed by the President with the approval of the Board of Directors from the Certified membership of the Association.

### Section 5

*Term of Office:* Two years and may be reappointed with approval of the Board of Directors.

### Section 6

#### *Function and Responsibilities:*

1. Coordinates all research efforts conducted under the auspices of the Association.
2. Receives and evaluates all research proposals from Association members, schools and other institutions and makes recommendations to the Board of Directors for research projects worthy of Association support and sponsorship.
3. Makes recommendations to the ten association districts for presentation of research findings at regional and district meetings.
4. Makes recommendations to the Board of Directors, the National Convention Chairman, and the National Program Committee for presentation of research findings at annual national meetings.
5. Prepares and submits the results of Association research to Journal Committee for possible publication in *Athletic Training Journal of the National Athletic Trainers' Association* and other Association sponsored publications.

## ARTICLE XXVI MEMBERSHIP PROVISIONS AND DUES

### Section 1

#### *Membership Classes*

#### 1. CERTIFIED CODE 1

##### *Qualifications for Membership:*

Must be a Certified Athletic Trainer (A.T.,C.).

Dues: \$25.00 plus district dues per year.

Certified and Retired Certified members only are entitled to vote on N.A.T.A. affairs and to hold N.A.T.A. office.

##### *Provisions for maintaining Certification:*

A person who is once certified as an Athletic Trainer (A.T.,C.) remains certified as long as he or she meets the minimum requirements for continuing professional education and only as long as such requirements are met.

Units of continuing professional education (CPEU) shall be defined and designated by the Professional Education Committee and approved by the Board of Directors. To maintain certification, the minimum number of units (CPEU) to be accumulated every three years shall be at least twice the number of units awarded for attendance at the N.A.T.A. Annual Meeting.

A Certified Athletic Trainer is responsible for sending to the N.A.T.A. National Office an approved statement of any continuing professional education units to be put on his record. Such a statement must be sent to the National Office within three months after the date of acquiring such units.

A Certified Athletic Trainer who does not accumulate a recorded number of continuing professional education units (CPEU) every three (3) calendar years equal to at least the minimum requirement shall have his certification suspended. He has the right to appeal.

If he does not accumulate sufficient CPE Units to meet the minimum requirement within two years after the date his certification was suspended his certification shall be cancelled.

A person whose Certified Membership was cancelled or changed to a different class of membership because of the application of the "Actively Engaged" definition and requirement and who wishes to have his Certification reinstated shall apply to the director and Secretary of the N.A.T.A. District in which he held Certified Membership for reinstatement. If the district officers agree that the person is entitled to reinstatement they should approve the application and forward the decision to the N.A.T.A. National Office. An application for reinstatement under the provisions of this paragraph must be received by the proper district officers before May 30, 1974.

#### 2. ASSOCIATE CODE 2

##### *Qualifications for Membership:*

Completion of at least two years of accredited college study or equivalent. Equivalency to be defined jointly by the Professional Education Committee and the Membership Committee with the approval of the Board of Directors. To be eligible for continuance of Associate membership the person must accumulate every three years at least one-half the minimum Continuing Professional Education Units required for maintaining certification.

Associate Members are not entitled to vote on N.A.T.A. affairs or to hold N.A.T.A. office.

Dues: \$25.00 plus district dues per year.

An Associate member is responsible for sending to the N.A.T.A. National Office an approved statement of any continuing professional education units to be put on his record. Such a statement must be sent to the National Office within three months after the date of acquiring such units.

#### 3. STUDENT CODE 3

##### *Qualifications for Membership:*

A person who is a full time student in a high school, college or university and

who is performing some of the duties of an athletic trainer under the supervision of an athletic trainer, coach or team physician and who expresses interest in preparing for the profession of athletic training is eligible for Student membership. He must be recommended by the trainer (preferably an N.A.T.A. Certified or Associate Member), coach or team physician under whom he is working.

If he ceases to be a full time student he may not remain in the Student membership class after that year.

The time during which a person is a Student Member shall not count as time engaged in athletic training for purposes of requirements for N.A.T.A. Membership (except Student Membership) nor count as time engaged in athletic training for purposes of determining the number of years in the profession.

Student members are not entitled to vote on N.A.T.A. affairs or to hold N.A.T.A. office.

Dues: \$5.00 plus district dues per year.

#### 4. AFFILIATE CODE 4

This membership class is open to individuals who are interested in the relationships of athletic training to education, biological sciences, psychology, athletics or sports medicine but who at the time are not directly related to athletic training.

##### *Qualifications for membership:*

Bachelor's degree from an accredited college or university or certification in physical therapy.

Professionally working in education, athletics, research or medicine.

Note: Physicians who are team physicians should be N.A.T.A. members in the Advisory class.

Associate members who are not entitled to vote on N.A.T.A. affairs.

Dues: National \$10.00 per year plus District Dues.

#### 5. ADVISORY CODE 5

##### *Qualifications for membership:*

Physicians who are directly associated with a sports program and are providing medical care and advice to members of the teams and advising the athletic trainer in regard to his duties are eligible for membership in this class.

A Certified or Associate member must nominate a prospective candidate for this membership. The nomination must be presented to the district membership committee and its acceptance is subject to their judgment.

Advisory members are not entitled to vote on N.A.T.A. affairs.

Dues: National \$10.00 per year plus District Dues.

#### 6. ALLIED CODE 6

This membership class is open to individuals whose business interest is related to athletic training or athletics in general.

Allied members are not entitled to vote on N.A.T.A. affairs.

Dues: National \$25.00 per year plus District Dues.

#### 7. HONORARY CODE 7

An individual may be awarded Honorary membership through the National organization only. A person who, by virtue of his acts and speech, shows profound interest in the athletic training profession and in enhancing its service to those in athletics shall be eligible for membership in this class.

Nominations may be made only by a Certified member and shall be directed to the chairman of the Honor and Awards Committee. The committee will make recommendations to the Board of Directors for their approval.

Honorary members are not entitled to vote on N.A.T.A. affairs or to hold N.A.T.A. office.

There are no dues for Honorary members.

#### 8. RETIRED CODE 8

A Certified member or an Associate member who retires because of age shall have the privilege of continuing in the class of membership held at retirement without further payment of dues. A Certified or Associate member who is eligible for retired status and who wishes to continue membership in the N.A.T.A. in the Retired class must request change to this class through the director of the district in which he is a member.

A Retired Certified member shall continue to have the privilege of voting on N.A.T.A. affairs and to hold N.A.T.A. office.

### Section 2

#### *ELECTION OF MEMBERS*

Candidates for membership (except Honorary) in the N.A.T.A. shall be proposed and recommended by at least one Certified member of the district in which the candidate is located. The application for membership shall be directed to the district director and accepted or rejected by the membership committee of the district. If the candidate is accepted for membership (class of membership designated) the application with national and district dues is sent to the district secretary who will then record the membership for the district and send record of membership with national dues to the national office.

Membership in the N.A.T.A. must come through a district and is subject to the district officers' approval. In cases of doubt regarding an individual's qualification for membership, the National Membership Committee should be consulted.

A person who is a member in one of the N.A.T.A. districts must also be a national member and pay both national and district dues.

An N.A.T.A. member must hold district membership in the district in which he is employed. (Excepting those in Military Service and Students)

### Section 3

#### *INTERDISTRICT TRANSFER OF MEMBERSHIP*

Any member of the Association who is in good standing and who moves into another district other than the one in which he holds membership must transfer his membership to the new district. This is done by filing an "Application for District Transfer" request with the secretary of the district to which he is going. (Excepting those in military service and students)

# PROCEEDINGS OF THE NATIONAL ATHLETIC TRAINERS ASSOCIATION

## MID-YEAR BUSINESS MEETING

January 8, 1978  
Opryland Hotel  
Nashville, Tennessee

The Mid-Year Meeting of the Board of Directors of the NATA was convened in the Johnson Room, Opryland Hotel, Nashville, Tennessee, at five o'clock p.m., Mr. Frank George, President, presiding and with the following present:

Mr. Frank George, President.  
Mr. Otho Davis, Executive Director.  
Mr. Wesley Jordan, District No. 1.  
Mr. Richard Malacrea, District No. 2.  
Mr. J. Herman Bunch, District No. 3.  
Mr. Gordon Stoddard, District No. 4.  
Mr. William Flentje, District No. 5.  
Mr. C. Birdwell, District No. 6.  
Mr. Troy Young, District No. 7.  
Mr. William Chambers, District No. 8.  
Mr. Bobby Barton, District No. 9.  
Mr. Larry Standifer, District No. 10.  
Mr. Bruce Melin, Parliamentarian.

### CALL TO ORDER:

Mr. George called the meeting to order with the offering of a brief word of prayer.

### CERTIFICATION BOARD:

The Board, after considering the various matters presented by Mr. McLean, approved the following recommendations:

1. MOVED, #9, (seconded #10, and carried 10-0) that the wording of the Procedures under Section I and Section IV be changed to read as follows:

#### "SECTION I:

"1. Have spent a minimum of 600 clock hours over a minimum of two (2) years and not more than four (4) years under the direct supervision of NATA approved clinical instructors. No more than 300 clock hours can be counted in any one year.

#### "SECTION IV:

"1. Having spent a minimum of 600 clock hours\* over a minimum of two (2) years and not more than four (4) years under the direct supervision of an actively engaged certified athletic trainer beyond that as a student athletic trainer on the secondary school level. No more than 300 clock hours can be counted in any one year.

"3. Presentation of a competency Qualification Check List from a certified athletic trainer.

"4. Presentation of a letter of recommendation from an NATA certified athletic trainer.

"5. Etc.

"6. Etc.

"7. Etc.

"8. Etc.

"\* Refer to the NATA Board of Certification Competency Qualification Check List for Athletic Training Techniques with major emphasis on Sections I, II, IV, and V."

2. Moved #4, (seconded #2, and carried 10-0) that Mr. Rod Moore be appointed as the new Chairman of the Certification Committee, succeeding Mr. McLean.

3. MOVED #3 (seconded #9 and carried 10-0) that students taking the Certification Examination in January are certified students for the current year, receiving all the benefits of being certified but not paying the certified dues.

The Procedures For Certification as revised in January, 1978 are as follows:

### NATIONAL ATHLETIC TRAINERS ASSOCIATION PROCEDURES FOR CERTIFICATION

Revised: January, 1978

TO BECOME CERTIFIED AS AN ATHLETIC TRAINER BY THE NATIONAL ATHLETIC TRAINERS ASSOCIATION, AN INDIVIDUAL MUST MEET THE REQUIREMENT IN ONE OF THE FOLLOWING SECTIONS I, II, III or IV. QUALIFICATION IN MORE THAN ONE SECTION IS NOT REQUIRED.

#### SECTION I. STUDENTS WHO HAVE GRADUATED FROM AN APPROVED UNDERGRADUATE OR GRADUATE PROGRAM, who have met the following criteria:

1. Completion of the N.A.T.A. approved athletic training curriculum requirements, and proof of a Bachelor's degree from an accredited college or university.
2. Have spent a minimum of 600 clock hours over a minimum of two (2) years and not more than four (4) years under the direct supervision of N.A.T.A. approved clinical instructors. No more than 300 clock hours can be counted in any one year.
3. Presentation of a Competency Evaluation Check list from a certified athletic trainer.
4. Proof of one (1) year of continuous Associate or Student membership in N.A.T.A. immediately prior to application for certification.
5. Proof of certification in Standard First Aid and CPR (or equivalent).

6. Pass an examination which includes basic principles of athletic training. (N.A.T.A. Certification Examination).

"A person who is once certified under these procedures remains certified as long as he or she meets the minimum requirements for continuing professional education as defined by the Professional Educational Committee as approved by the Board of Directors and only as long as such requirement is met."

#### SECTION II. APPRENTICESHIP — Students of Athletic Training may qualify for certification by:

1. On the job training (minimum 1800 hours) under direct supervision of a certified N.A.T.A. member.
2. Proof of a Bachelor's degree from an accredited college or university.
3. Presentation of a Competency Evaluation Check List by his N.A.T.A. immediate supervisor.
4. Presentation of a letter of recommendation from an N.A.T.A. certified athletic trainer.
5. Presentation of a letter of recommendation by his/her acting team physician.
6. Proof of one (1) year of continuous Associate or Student membership in N.A.T.A. immediately prior to application for certification.
7. Proof of current certification in Standard First Aid and CPR (or equivalent).
8. Pass an examination which includes basic principles of athletic training. (N.A.T.A. Certification Examination).

Athletic Trainers who are certified under the apprenticeship program remain certified as long as he or she meets the continuing education requirement as described under Section I and only as long as such requirement is met.

#### SECTION III. SPECIAL CONSIDERATION — ATHLETIC TRAINERS ACTIVELY ENGAGED WITHIN THE PROFESSION — This section deals with athletic trainers actively engaged within the profession but not yet certified.

The N.A.T.A. definition of "actively engaged" is as follows:

A person who is on a salary basis (no fee) employed by an educational institution, professional athletic organization, or other bona fide athletic organization for the duration of the institution's school year or for the length of the athletic organization's season and who performs the duties of athletic trainer as a major responsibility of his/her employment; or whose responsibility is the teaching in an N.A.T.A. approved athletic training curriculum is actively engaged in athletic training.

A person may be granted certification by special consideration by:

1. Proof of five (5) years of athletic training experience, after college graduation on the undergraduate level, provided that it would meet the minimum of one of the following requirements:
  - (a) graduate of an N.A.T.A. approved faculty-trainer educational program;
  - (b) a minimum of one (1) year apprenticeship (800 hours) directly under a certified athletic trainer; or
  - (c) providing proof of essentially equivalent academic course work requirements to that of an N.A.T.A. approved curriculum graduate. (If this method is selected, the applicant must submit his/her academic transcripts a minimum of 12 months prior to the anticipated date of examination for evaluation and approval).
2. Proof of graduation from an accredited four year college or university.
3. Presentation of a Competency Evaluation Check List from an N.A.T.A. certified athletic trainer.
4. Presentation of a letter of recommendation from an N.A.T.A. certified athletic trainer.
5. Presentation of a letter of recommendation by his/her acting team physician.
6. Proof of one (1) year of continuous Associate membership in N.A.T.A. immediately prior to application for certification.
7. Proof of current certification in Standard First Aid and CPR (or equivalent).
8. Pass an examination which includes basic principles of athletic training. (N.A.T.A. Certification Examination).

Athletic Trainers actively engaged in the profession certified under this section remain certified as long as he or she meets the minimum continuing education requirement as described under Section I and only as long as such requirement is met.

#### SECTION IV. PHYSICAL THERAPY DEGREE GRADUATE — Physical Therapy graduates may be awarded certification provided they meet the following requirements:

1. Having spent a minimum of 600 clock hours\* over a minimum of two (2) years and not more than four years under the direct supervision of an actively engaged certified athletic trainer beyond that as a student athletic trainer on the secondary school level. No more than 300 clock hours can be counted in any one year.
2. Proof of a Bachelor's degree from an accredited college or university.

3. Presentation of a Competency Evaluation Check List from a certified athletic trainer.
4. Presentation of a letter of recommendation by his/her acting team physician.
6. Proof of one (1) year of continuous Associate or Student membership in N.A.T.A. immediately prior to application for certification.
7. Proof of current certification in Standard First Aid and CPR (or equivalent).
8. Pass an examination which includes basic principles of athletic training. (N.A.T.A. Certification Examination).

\*Refer to the N.A.T.A. Board of Certification Competency Evaluation Check List for Athletic Training Techniques with major emphasis on Sections I, II, IV and V. Athletic Trainers certified under Section IV shall remain certified as long as he or she meets the continuing education requirements as described under Section I and only as long as such requirement is met.

#### PROFESSIONAL EDUCATION:

Mr. Donley briefly commented on the activities regarding professional certification since the last report made to the Board.

Concerning the curriculum, he indicated the recommendation of the Committee for approval of the Indiana State University curriculum for another five-year period.

Following a presentation of various concerns regarding this program and an inclination on the part of the Board that it did not desire to adopt the recommendation, it was the general consensus that this recommendation be returned to the Committee with instructions the Board desired information concerning the high number of students in the program, the reason for a high number of these students not being NATA members, an explanation of clinical experience on the graduate level and whether or not there are any students working in the training room who are not in an NATA approved program.

MOVED #5 (seconded #2 and carried 10-0) to approve the recommended Mid-Year Professional Preparation Conference.

MOVED #4 (seconded #2 and carried 10-0) to correct the minutes as erroneously presented in the Journal regarding the June Board minutes concerning the report and actions taken by this Committee at that time.

They are as follows:

Approve:

Dick Melhart resignation; Northwestern Faculty Trainer Program; \$100.00 for membership status survey; Guidelines for Short Term Course Approved; Study to reduce the number of required C.E.U. in a three year period. Recommendations 45 or 60 contact hours.

Tabled:

Request to postpone Continuing Education Program indefinitely.

Approved:

Extend approved for 1 year:

Oregon State  
Texas Christian  
Northeastern  
Ball State  
Southwest Texas State  
Western Illinois  
Washington State  
Indiana State - Grad program

Continuing Education will begin January 1, 1978, for Certified members if the computer is available.

Associate (Code 2) members will be excluded from Continuing Education for three years.

Rescinded — approved of request to have curriculum directors sign for only approved curriculum graduates for certification examination. This will be restudied and resubmitted to the Board.

MOVED, # 2 (seconded, # 4 and carried, 9-1, # 7 opposed) to approve the recommendation regarding the Faculty Training Program at Northwestern University for the succeeding year.

MOVED # 5 (seconded # 3 and carried 10-0) to transfer the responsibility for the membership status survey of the NATA to the Research and Injury Committee.

Deferred the recommended Committee statement that "approved Program Directors may only endorse applicants for Section I for Certification" until the Directors could discuss this with and receive a reaction from their various districts.

Discussed, and by common consent, deferred for action until the June Board meeting, the Committee's recommendations for change in certification procedures so that those present might have an opportunity of getting the reactions of their District membership.

MOVED # 9 (seconded # 7 and carried 10-0) that the resignation of Mr. Dave Knoepfel from the Committee be approved.

MOVED # 8 (seconded # 4 and carried 10-0) that the appointment of Mr. Gerald Bell to the Committee be approved.

MOVED #8, (seconded #5 and carried 8-1-1, #7 opposed; #6 abstained) to approve a High School Faculty Athletic Instructional Program For North Carolina Teacher Athletic Trainers.

MOVED #4 (seconded #9 and carried 10-0) that provisions be made for the holding of a meeting of Committee Chairmen and Representatives for the purpose of discussing various committee goals, with coordination concerning this meeting to be under the Chairmanship of the NATA President.

MOVED #5 (seconded, #4 and carried 9-0-1, #9 abstained) that the Board approve a study to investigate the cost and need concerning the employment of a full-time secretary for the Professional Education Committee.

The Board, by common consent, referred the Committee recommendation for development of an award to honor athletic trainers who have given the NATA Distinguished Service to the Awards Committee for implementation. Moved by #10, seconded by #9, approved 10-0.

#### AUDIO-VISUAL AIDS:

MOVED #7 (seconded #4 and carried 8-1-1, #9 opposed; #6 abstained) that Dennis Murphy be appointed a member of this Committee.

#### CAREER INFORMATION AND SERVICE

Discussion indicated that the present brochure, through the efforts of various individuals, had, in part, been rewritten to conform with the present desires and that should any Board member desire an updated copy, he contact the Committee Chairman.

MOVED # 8 (seconded # 9 and carried 10-0) that brochure orders for ten or more copies, except for District Officers, Secretaries and Liaison Representatives, be charged, plus mailing.

#### DRUG EDUCATION COMMITTEE:

MOVED # 6 (seconded # 7 and carried, 10-0) to deny the request of the Committee to change its present mission from one of "misuse" to one of "use".

MOVED # 5 (seconded # 4 and carried 10-0), to deny the request of performing a

survey to determine what pharmaceuticals are now presently in use by trainers, that all budget requests by the Committee be denied.

#### ETHICS COMMITTEE:

It was indicated, as a matter of information, there were no ethical matters to be considered by the Board at this particular session.

#### GRANTS AND SCHOLARSHIPS:

A brief review was given relative to the scholarships to be awarded at the 1978 Annual Meeting.

Attention was called to the request for the granting of approval for a Daniel D. Arneheim Scholarship.

MOVED #1 (seconded #9 and carried 9-0), #10 opposed) that the proposal to establish the Daniel D. Arneheim Scholarship with no additional stipulations other than present scholarship qualifications, be accepted.

#### HISTORY AND ARCHIVES:

It was indicated that no request had been received. The *History of NATA* is in the process of being printed.

#### HONOR AWARDS:

It was stated that no report had been received.

#### INTERNATIONAL GAMES:

Mr. George commented on the present proposal concerning membership on the United States Olympic Sports Medicine Committee, indicating there were no provisions for representation of a trainer or other professional group on this Committee but that there would be an Associate Committee on which the NATA would have representation.

Discussion ensued relative to the waiver of the seven-year experience rule and broader recognition and selection of female trainers; the possibility of submitting a statement in relation to selection of trainers for the International Games and the desire of the NATA not to proceed through the mechanics of selection until it could be guaranteed a 75 to 80 percent representation.

Discussion also ensued relative to the decrease of the seven-year requirement down to three years, with the inclusion of more women.

The general consensus of the Board in relation to all of these matters was that it take no definite action regarding any of them at this time but again consider the matter at this June meeting with, in the meanwhile, a report being forthcoming from the next meeting of the International Games Committee prior to that time.

August 1, 1977

Frank George  
Head Athletic Trainer  
Brown University  
Providence, Rhode Island

Dear Frank:

After our first two months of operation at the U.S. Olympic Training Center, the Sports Medicine Program is alive and well and has proven to be fantastic in terms of athlete acceptance.

To up-date you on some things, Jerry Lace, the Operations Director from Olympic House, was given the NATA screening and selection recommendations. I endorsed this to him for a positive approval. Thus far, no action has been taken until the scope of the Training Center is evaluated and the future somewhat clarified. In the interim, I shall continue to stay on this.

We have had a good summer staff of quality people with only one misque, and that trainer was brought in by a Sports Governing Body. It is possible that I shall contact Tow regarding this.

Also of interest, as Sports Medicine Coordinator, I have contacted all of the Sports Federations advising them that we will assist them in finding sports physicians and certified athletic trainers for any domestic or foreign travel that they might be planning. This way, we can act as a resource and screening group for non-related Olympic travel team should they be in need of assistance. I plan to work closely with you on this, if we find they cooperate.

Have a good fall season.

Regards,

Bob Beeten

December 7, 1977

Frank George  
National Athletic Trainers' Assoc.  
Brown University  
Providence, Rhode Island 02912

Dear Frank:

The United States Olympic Training Center at Squaw Valley is in its sixth month of active operation. During this time, 20 sports disciplines have been here at the Center. From June 17th to date, we have had eight certified, volunteer athletic trainers to assist us - two men and six women. The length of stay has averaged three to four weeks.

Presently, the United States Olympic Committee is in the organization stage of developing the Sports Medicine Committee. This Committee will be formulating policies that should be operational by spring. Of course, I will see that the Committee places upon their agenda the NATA recommendations for screening, and I will advise you accordingly of the action.

I shall be sending to you a curriculum vitae on one young trainer who has been with us since July and, in my opinion, is truly outstanding. She, of course, will be looking for an opening this spring and summer.

Sincerely,

Bob Beeten  
Coordinator, Sports Medicine Program

#### JOURNAL:

No committee report was submitted by the Journal Committee chairman. This will be submitted in June.

#### MEMBERSHIP:

Mr. George indicated that there remained a continuing problem concerning membership and that perhaps the solution was to have it handled out of the National Office and provide the necessary funds for such handling and that he would, between now and the June Board meeting, ascertain the costs of such a procedure.

Mr. Melin, as a matter of information, called attention to the compilation of membership provisions and dues as currently in the Bylaws in accordance with Board action through June, 1977.

Mr. Melin likewise requested discussion and guidance as to the insertion of a qualification for membership under Code II to the effect that the person applying for Code II be actively engaged in athletic training; whether hours specified for eligibility to take the certification examination should be spread over a two-year or greater period and the matter of definition of "actively engaged".

The Board discussed the procedure in which appointments to the Committee on Membership are made, involving the appointment of one certified member from each of the districts, this individual being appointed by the District Director.

There followed a brief discussion by Mr. Melin concerning various ways in which this could be handled and the advantages and disadvantages of each.

MOVED (seconded and carried), that the personnel concerning the Membership Committee be recommended by the Chairman, appointed by the President and subsequently approved by the Board of Directors from the Certified Membership of the Association.

No action was taken on the following:

1. Actively Engaged — for Code to membership.
2. Actively Engaged — to maintain Code 2 membership.
3. 600 supervised clock hours for Code 2 membership.
4. Two year membership requirement to take the Certification Exam
5. Extension of student classification for those ineligible to advance to Code 2

After brief comments by various Board members, it was the consensus of the Board that no definite action on these proposals be taken at this time, together with the request that, here again, the Board members be allowed to discuss these matters within their respective districts and with possibly the submission of additional comments by the time of the June Board Meeting.

Discussion likewise ensued relative to the present policy concerning the handling of membership applications, some of the present difficulties regarding follow-up and the feasibility and costs of the total membership procedure being handled through the computer at the National Office. Following the presentation of both negative and positive feelings regarding this matter, it was the consensus of the Board that no changes be made in the present operational policy and that District Secretaries and those concerned with this matter be informed to that effect.

#### NATIONAL CONVENTION:

Mr. Chambers, as a matter of information, briefly commented on the status of hotel arrangements, program and banquet arrangements concerning the Las Vegas Convention and that the usual written notification to the District Secretaries would be accomplished within the next few days.

There followed a brief discussion concerning the possible substitution of a luncheon in lieu of the normal banquet held, a discussion of award presentations at the banquet and the procedure of permitting recipients to respond.

The general discussion concerning matters pertaining to the National Convention was terminated with no definitive action, at this time, being recommended by the Board of Directors but with the Convention Program and Arrangements to be left to the discretion of the Convention Chairman.

#### PLACEMENT COMMITTEE:

A brief discussion ensued relative to the materials mailed out by this Committee since the last meeting, which several Board members indicated that they had not received all of the materials sent out. It was indicated to them that they get in touch with the Placement Committee Chairman relative to their individual problems.

No official actions were taken by the Board relative to the activities of this committee at this time.

It was pointed out that for a member of NATA to receive the Placement Committee list, they must request same from the Committee.

#### PUBLIC RELATIONS:

The Board was furnished, by way of information, indication of the appointment of Mr. Dominick Clark from the University of Nevada at Las Vegas for the purpose of handling public relations.

#### RESEARCH AND INJURY:

Concerning the matter of the HEW letter, the Board was informed that the Committee Chairman did not feel that information presented in that letter was sufficiently complete for him to make specific comments, which comments, in turn, Mr. George indicated, would be forwarded to HEW.

Attention of the Board was also called to a Committee request for support of a doctorate dissertation involving athletic training for possible later Journal publication, this dissertation having been prepared by a student at California State University, and a further request to likewise involve an expenditure of \$239.90 concerning this matter.

MOVED #1 (seconded #9 and carried 8-0-1 #8 abstained) that this request be denied.

Attention was likewise called to the opinion of the Committee that NATA and its members should in no way support or encourage the use of the "defensive demon" as a teaching aid for basketball programs. Following a brief discussion by the Board on this matter, it was the general consensus of the Board that this particular item in the report of this Committee be accepted merely as informational and with no definitive action to be taken.

The Research and Injury Committee is currently proceeding with the objective it recently established. The initial phase of committee operation centers around the establishment of the state of the art for research in athletic training. To this end a questionnaire is in the final stages of preparation which will, when completed be sent to all certified members of the association. The information gained from this project, programs for dissemination of information will be established. A complete report on this project should be available by June.

The additional activities of the committee are reported in detail in the attached reports.

Respectfully Submitted,

John W. Powell  
Chairman

#### The Defensive Demon

The committee was asked to review the apparatus known as the "Defensive Demon". This device is designed as a "training and teaching device for basketball defense" and it "teaches the crouch positions". In effect the "Defensive Demon" provides a mechanism whereby the "tubular plastic collar" is placed around the individuals neck and a nylon cord is inserted through a "triangular swivel" in the collar and is then attached around the arch of each foot causing the defensive man to elevate his heels forcing him to his toes". After discussion with several trainers and coaches, it is the opinion of this committee that the "Defensive Demon" has little or no value in sports and that any value present would be negated by its inherent injury potential to the cervical spine.

It appears that the prime objective of the "Defensive Demon" is to teach an athlete to bend his knees and assume an action position. It would seem that continual verbal

reminder by the coach would be far more productive than "10 minutes" a day in this device, as well as far less dangerous. It is the opinion of this committee, the National Athletic Trainer's Association and its members should in no way support or encourage the use of the "Defensive Demon" as a teaching aid for basketball programs.

#### H.E.W. Survey of Athletic Injuries and Deaths

Recently the chairman of the Research and Injury Committee was asked to review the progress of the H.E.W. Survey of Athletic Injuries and Deaths 1975. As you will remember this survey was established by Sect 826 of PL 93-380 and charged the Secretary of H.E.W. "to determine (1) the number of athletic injuries to, and deaths of, male and female students occurring in athletic competition between schools, in any practice session for such competition, and in any other school-related athletic activities for the twelve-month period . . . (2) the number of athletic injuries and deaths occurring . . . at each school with an athletic trainer or other medical or health professional personnel trained to prevent or treat such injuries and at each school without such personnel.

This Section stemmed from a House bill sponsored by Rep. Forsythe (NJ), later modified by the companion Senate bill, as the preferred course of action among recommended alternatives for congressional attention to health supervision of sport programs in educational institutions. National sport organizations generally had agreed that a meaningful study in this regard would be helpful, and had not spoken against the legislation. Responsibility for implementing the bill's provisions was delegated to the National Center for Education Statistics (NCES).

As of December 1976 the data collection phase of the project was completed. The project is currently in the final stages of preparation. In that I had the opportunity to be a part of the data collection process I would offer the following remarks regarding the survey in general. As you know every study not only must keep within certain boundaries in order to collect its observations, but be consciously aware of these boundaries when the time for interpretation of findings approaches. The following indicates some of the delimitations of this survey.

1. This study cannot elicit and summarize the types of injuries incurred within the various categories of sport; nor can the survey obtain circumstantial information which could cast light on patterns which in turn could give direction to remedial efforts. What will be gained essentially is the time-loss significance of these occurrences and the availability of health care personnel.
2. This study's design did not permit Survey staff to know how an institution compiled with the survey's demands nor how well an institution complied (nor until the study periods conclusion whether an institution was complying.)
3. This study was confined to one calendar year. Whether the findings would fluctuate from year to year, and if so to what extent, will not be known. It thus will be impossible to characterize the data as either endemic or epidemic.
4. This study excluded attention to the manner in which a particular athletic program had access to medical personnel and facilities/services. Since the structure of this access is highly variable between communities, it will not be known whether a physicians relationship to the institution and athletic trainer (or "other health person") is a factor influencing the data being collected.
5. This study may find higher injury rates among institutions having more qualified health supervision due to the considerably more reliable reporting habits of these personnel.
6. A philosophical delimitation concerns the denominator of the calculated risk equation: the benefits justifying the administration of athletic activities. Since sport and its hazards are offered to students for health and educational reasons, one must remember that these epidemiological data do not reflect the degree to which the benefits justified the risks accepted. It must be cautioned in this regard that this design will not provide actuarial perspective in terms of injury/death incidence figures for that population from alternative activities during the study period.

With these delimitations in mind Dr. Kenneth Clarke, the project director for data collection, is continually in dialogue with H.E.W. project officers regarding the quality of the final report. In some of his comments to date much cleansing of the proposed data has been completed. With his continued involvement in the project, I feel that the final product will be treated fairly and only those statements that are directly related to the data will be established.

In addition it seems apparent now that the study will fall well short of its original objective and that the utility of the survey will be only in the area of injury frequency, participation, sex and some time-loss information. Only the final product will tell exactly how much will come from the survey. At this point there is no apparent cause for alarm as to the impact the survey will have on athletic training.

#### AMERICAN ACADEMY OF FAMILY PHYSICIANS:

The Board was informed that at the present time there was no official liaison between the NATA and this group. There followed a brief discussion concerning the large membership of this group and the value of liaison with them.

MOVED #10 (seconded #9 and carried 10-0) that liaison be developed with the American Academy of Family Physicians, with no expense involved.

Mr. Kerker Kassabian was appointed as liaison representative to the American Academy of Family Physicians.

#### AMERICAN ACADEMY OF PEDIATRICS:

Attention was called to the previously submitted report, with it being indicated that this was informational in nature and that no action was required to be taken.

#### Liaison Representatives

#### Report and Statement of Justification

#### to Continue to

#### Board of Directors for Mid-Year Meeting

FROM: Richard F. Malacrea - American Academy of Pediatrics

The Committee on the Pediatric Aspects of Physical Fitness, Recreation and Sports met at the O'Hare Ramada Inn on Saturday, December 10, 1977.

Unfortunately, your liaison representative did not receive notice of this meeting and, as a consequence, was not able to attend. (A prior commitment to speak, on that same day, on a program of The Mid-Atlantic Region of the American College Health Association precluded that possibility.) The minutes of that meeting will be forwarded to your liaison representative and will be incorporated in to the annual report.

The "Sports Medicine Extravaganza" referred to in the last annual report did not take place at the Annual Meeting of the Academy. There was, however, a one-day program conducted by Drs. Nate Smith and Jim Garrick.

There has been no action to date on the joint booklet. Dr. Thornton will review the matter with his committee during the December 10 meeting and report this on his return.

It is my recommendation that the N.A.T.A. continue liaison activities with the American Academy of Pediatrics.

Respectfully submitted,

Richard F. Malacrea  
Director, District 2

AMERICAN ALLIANCE FOR HEALTH,  
PHYSICAL EDUCATION AND RECREATION:

It was indicated that no report had been received and no actions were requested on the part of the Board of Directors. This will be included in June, 1978, since the AAHPER convention will be held April 7-11, 1978 in Kansas City, Missouri.  
AMERICAN COLLEGE HEALTH ASSOCIATION.

Attention was called to the communication from this Association, indicating it would hold its 56th Annual Meeting on March 28-31, 1978 and that it was their intention to publish a program booklet and request that all interested organizations were invited to take this opportunity to make their products known to an important market.

MOVED no. 8 (seconded no. 5 and carried 10-0) that the NATA purchase a half-page ad in the program booklet of the ACHA.

AMERICAN CORRECTIVE THERAPY ASSOCIATION

FROM: Jeffrey D. Fair  
December 2, 1977

As requested by President George I have contacted Jim Colehouse, the liaison representative from the American Corrective Therapy Association to the National Athletic Trainers Association and offered my assistance in any matters that concern both our organizations.

The American Corrective Therapy Association's annual conference will be held July 10-14 at Dunfy's Royal Coach Inn, 7000 Southwest Freeway, Houston, Texas.

Because of our many common interests I recommend to the board that we continue our working relationship with the American Corrective Therapy Association and a representative of the National Athletic Trainers Association be present at the annual conference in Houston. The attending representative needs to be myself or a certified member of the N.A.T.A. and a member of the A.C.T.A. appointed by the board of directors.

Respectfully submitted.

Jeff Fair, A.T.C., C.C.T.  
Health Athletic Trainer  
Oklahoma State University  
Stillwater, Oklahoma 74074

AMERICAN PHYSICAL THERAPY ASSOCIATION:

Mr. George called attention to and there followed discussion as to the lobbying efforts of this organization and its ultimate effect on athletic trainers in its involvement in relation to the activities of licensure.

Liaison Report: American Physical Therapy Association

Frank George - N.A.T.A. Liaison Representative

Fifty-eighth Annual Meeting - St. Louis, MO. - June 25-30, 1977

The Sports Medicine Section of the A.P.T.A. met on June 25, 1977. The clinical meeting was on *Specialization - Past, Present, Future: It's Role in Sports Medicine*. I was asked to speak on a "Review of the N.A.T.A. Certification Process and Specialization." Other speakers and topics were:

Past- Review of Task Force on Specialization  
American Physical Therapy Association  
Ronald G. Peyton, R.P.T., Task Force Member

Present-Educational Requirements for Specialization in Sports Medicine  
Keith Kleven, R.P.T., Secretary, Sports Medicine Sections

Factors to Consider in Developing a Program to Measure Competence in a Sports Medicine Specialization  
Jane S. Matthews, R.P.T., Buffalo, New York

Future- Future Needs for Specialization in Sports Medicine  
Clem Eischen, R.P.T., Vice Chairman, Sports Medicine Section

The Need for Specialization in Women's Athletic Programs  
Trudy Lamb, R.P.T., Treasurer, Sports Medicine Section

This meeting went well and there were a number of questions regarding educating physical therapists to be athletic trainers. Also, methods were discussed regarding physical therapists obtaining more clinical experience in athletic training. As always, a good deal of the discussion concerned N.A.T.A. certification for the physical therapist.

BUSINESS MEETING - SPORTS MEDICINE SECTION A.P.T.A.

There are now 806 members in the Sports Medicine Section of A.P.T.A. Lynn Wallace, A.T., C. R.P.T., is chairman of the membership committee. The dues for this section is \$10.00 in addition to the \$75.00 national dues. I was asked to report on the recent N.A.T.A. meeting in Dearborn and commented on the theme "Back to the Basics", and the apparent success of this theme.

The A.P.T.A. meeting is immediately after the N.A.T.A. meeting in Las Vegas in 1978. It was recommended by a member of the Sports Medicine Section that a joint program between N.A.T.A. and this section be developed, after the N.A.T.A. meeting. I will present this to the Board of Directors for approval. In 1977 the Sports Medicine Section presented five regional programs. The theme of these programs was "The Foot and Ankle in Sports". This section also co-sponsored a program "Aspects of Sports" in Denver, Colo. and an "Olympic Seminar" in Montreal.

N.A.T.A. licensure on the state level was discussed. There was a good deal of misunderstanding regarding licensure of the athletic trainer. Most of the misunderstanding developed because of the four bills which were introduced in Pennsylvania concerning athletic trainers. I talked at length on this subject with this section. Hopefully, I was able to answer the questions correctly and was able to clear up the misunderstandings. The Executive Committee of this section was charged to form a task force to develop a position statement on the issue of "Licensure of Athletic Trainers". This is to be presented at the next annual business meeting in Las Vegas. One of the stated major concerns of this section is to have a: "Coordinated effort between A.P.T.A. and N.A.T.A.; but the section is uncertain on how much of the A.P.T.A. wishes to become involved with issues confronting both organizations."

This section established a task force to decide which of the sections stated goals should be pursued. Some new officers of the section were elected; some are continuing in term of office. These officers are:

Ronald Peyton, Chairman  
Keith Kleven, Vice Chairman  
Don Vernon, Secretary  
Gertrude Lamb, Treasurer  
Peter Cheney  
Nominating Chairman  
Bob Gifford

The editor of the bulletin of this section in George Davies, A.T., C.; R.P.T. He has done an outstanding job and developed a fine bulletin.

I appreciate the chance to represent N.A.T.A. at these meetings.

JOINT COMMISSION ON COMPETITIVE SAFEGUARDS  
AND MEDICAL ASPECTS OF SPORTS

Minutes of the Joint Commission on  
Competitive Safeguards and the Medical Aspects of Sports  
June 11, 1977

Members present included:

Paul C. Trickett, M.D., American College Health Association  
Don Cooper, M.D., American College Health Association  
Art Stevens, American College Health Association  
Kermit Smith, National Junior College Athletic Association  
Carl Blyth, National Collegiate Athletic Association  
Otho Davis, National Athletic Trainers Association  
"Pinky" Newell, National Athletic Trainers Association  
Roy Don Wilson, National Athletic Trainers Association  
James E. Bryan, National Association Intercollegiate Athletics  
Al Ortolani, National Association Intercollegiate Athletics  
Wally Schwartz, National Association Intercollegiate Athletics  
Associate Members present:  
William D. Heintz, American Dental Association  
Guests of the Joint Commission:  
Richard Maher, National Council of Secondary School Athletic Directors  
Eugene Rontal, M.D., University of Michigan  
Vern Seefeldt, Michigan State University  
Herbert Olson, Michigan State University  
Kenneth Stephens, Michigan State University  
Wayne Van Huss, Michigan State University  
Ken Murray, University of Southwestern Louisiana  
Sayers "Bud" Miller, Sports Safety & Health Care Society  
Gordy Graham, Mankato State University

OPEN BUSINESS MEETING

Saturday, June 11, 1977

1. Chairman Trickett opened the meeting by reading a letter of resignation from San Kalinowsky - Fitness & Amateur Sports Branch of Health & Welfare, Canada.  
2. Wally Schwartz - NAIA - was welcomed as a member of the Joint Commission.  
3. The Chairman next covered the agenda and made introductions.  
4. Art Stevens introduced Dr. Eugene Rontal, from the University of Michigan. He presented a very interesting paper entitled "Facial Injuries in Ice Hockey and Football." The paper had been published in *The Laryngoscope*, Volume LXXXVII, June, 1977.

Dr. Rontal recommended that Ice Hockey have mandatory facial protection in the form of a full-face mask, padded chin strap and intraoral dental guard. THOSE MASKS REQUIRING THE FACIAL SKELETON FOR SUPPORT SHOULD BE DISCOURAGED. He also felt changes should be made in the stick and the rink and, lastly, that rules should be more rigidly enforced.

5. Art then introduced Herbert Olson and Wayne Van Huss who presented a Michigan State University study entitled, "Longevity, Causes of Death, and Other Characteristics of Former College Athletes and Non-Athletes."

Two interesting points made were, that there is no difference in longevity between athletes and non-athletes, with similar causes of death. Also, non-athletes gain twice as much weight as athletes up to age 34. At age 45, athletes start to gain more than non-athletes.

6. Kermit Smith suggested we look at the problem of alcohol and athletics as a commission. Paul said we would discuss this at our business meeting this afternoon.

7. Vern Seefeldt, Ph.D., presented his study entitled, "Youth Sports Study" from the state of Michigan. He distributed one of the questionnaires for the student athlete. In the state of Michigan there are 2,313,477 kids involved in sports. There were 93,000 questioned and an 86% return. One thing the study has shown is that exposure to early participation has consequences. At age twelve to thirteen there is a dropoff in participation. Dr. Seefeldt is in his second year of the study and has a target date of July, 1978, for completion and making recommendations to the state.

At this point, Dr. Trickett adjourned the meeting for lunch.

8. Dr. Trickett called the meeting to order and introduced some audio-visual aids used at the University of Texas entitled, "Educational Videotapes for Sports Medicine Professionals."

There were three films made at the University of Texas and they were very well done. One showed a strength building program, and the other two demonstrated procedure for taping the knee and the ankle.

9. Paul then asked for items of interest from members of the Joint Commission. Don Cooper told about the use of panty girdles (Playtex Free Spirit) for muscle pulls of the hamstring area, and lateral felt heel wedges for ankle sprains.

10. The Treasurer's report was given by Art Stevens along with a copy to each member.

Pinky Newell suggested we up the dues so we can pay one speaker each meeting. A decision followed about honorarium.

The discussion then turned to the direction the Joint Commission wants to take and it was decided to wait until later to discuss raising the dues.

There was a motion to accept the Treasurer's report and it passed.

11. Carl Blyth was asked to report on NOSCAE, which he said was holding an open meeting following ours on June 28, so he would not have a report until our January meeting.

Carl did make the comment that because of law suits and liability insurance rate increases, manufacturers may have to stop making football helmets and stores stop selling them. There is right 120 million in law suits in the courts.

12. Carl also gave a brief football fatality report. He said there were no neck fatalities, some head, but fewer. There were approximately 17 deaths.

13. At this point Dr. Trickett read the following news release from NAIA.

KANSAS CITY, MO. - The National Association of Intercollegiate Athletics (NAIA) announced today that it was elected to full membership in the Joint Commission on Competitive Safeguards and Medical Aspects of Sports at the January 10th meeting of the Joint Committee in Miami Beach, Florida. The NAIA was notified in an announcement made by Paul Trickett, M.D., Chairman of the Joint Commission and Director of the Student Health Center of the University of Texas at Austin. Dr. Harry Fritz, Executive Secretary of the NAIA and Al Ortolani, Head Trainer at Kansas State College at Pittsburg, presented the NAIA application to the Joint Committee at its meeting in Boston, Massachusetts June 13th.

Members of the Joint Commission on Competitive Safeguards and Medical Aspects of Sports are The American College Health Association, The National Collegiate Athletic Association, The National Athletic Trainers' Association, The National Junior College Athletic Association, The National Federation of State High School Associations and the NAIA.

The Commission is intended to promote communication among the various organizations interested in the health and safety of those engaged in athletics. Among

the goals and objectives of the Joint Commission are the establishment of guidelines and standards in the field of athletic medicine; the establishment and development of continuous research on pertinent questions and problems in the field of athletic medicine; the establishment of valid statistics on the incidence of injuries in sports activities; and the formulation of recommendations for rules and administration of athletic programs.

"Membership in the Joint Commission affords the NAIA the opportunity to cooperatively and in a united way engage in efforts that will assist athletics to realize the educational and health development potential we all recognize", noted Wally Schwartz, NAIA Assistant Executive Secretary who serves as liaison to the NAIA Committee on Medical Aspects of Sports.

Three NAIA representatives will attend the next meeting of the Joint Commission June 11 and 12, 1977, in Detroit, Michigan.

14. There was no one to report on ACE Commission on College Athletics, but Art Stevens said he would reinstate Harry Spence. Art then read ACE's press release.

15. Art was then asked to report on the ACHA. He distributed a paper explaining the American College Health Association. The papers detailed areas such as Authorization, Purpose, Membership, Staff and Officers and Activities of the association. He also distributed a pamphlet published by the ACHA entitled, "Recommended Standards and Practices for a College Health Program."

16. Dr. Bill Heintz reported on the American Dental Association first by updating his paper which appeared in the last minutes. He said the ADA is trying to come out with a statement on what an adequate mouth protector is. The ADA is pushing for full coverage for all remaining teeth.

17. Dr. Donald Cooper reported that the AMA, in a restructuring move, turned down a request to continue with its Medical Aspects of Sports Committee.

18. Wally Schwartz gave a brief report on the NAIA. Three points of interest he made were that, 1) the NAIA has joined with the NCAA football rules committee; 2) the NAIA plans to have a recommended physical examination form for its members; and 3) a study is being made on trainers at NAIA institutions.

19. Dick Maher, representing NCSSAD, said they are working for solutions to problems such as having doctors at contact football practice and games, determining the length of seasons and pre-season conditioning time.

20. Kermit Smith, reporting on the NJCAA said he had recommended the teacher trainer system to the national board meeting.

Following Kermit's presentation, Dr. Trickett adjourned the meeting until 9:00 a.m. tomorrow.

Sunday, June 12, 1977  
9:00 a.m.

1. Dr. Trickett opened the meeting and let Don Cooper expound on a new product by Bideo Company. It is developing a covering for football helmets.

2. After reviewing minutes from the previous meeting, Pinky Newell moved for acceptance. Dr. Cooper seconded the motion and it passed.

3. Dr. Trickett moved on to the part of the agenda entitled "Discussion Items of General Interest." Pinky was asked to begin a discussion about spring football practice. A lengthy discussion followed and the following statement was recommended and approved: "The Joint Commission unanimously lends support to the idea of studying the problems and the possibility of doing with or modifying spring football practices."

4. Pinky was then asked to begin a discussion on the kicking game in football. After this discussion, the following statement was recommended and approved unanimously: "The Joint Commission recommends to the appropriate bodies to study the kicking game with special emphasis on the kickoffs, including techniques used in order to determine if modification is necessary to make the game safer."

5. Bud Miller was asked to talk to us about the Sports Safety and Health Care Society.

He was distributed a copy of their publication, *The Pulse of Sports*, and basically told us the Society's purpose is to disseminate information to the grass roots level.

Pinky Newell moved that we further add our support and encourage the Sports Safety and Health Care Society. Seconded by Art Stevens and carried.

Before leaving, Bud brought us up to date on Casey Clarke's move and NAIRS.

6. Dr. Trickett read a letter from Ralph McFillen, Assistant Director of EVENTS, NCAA, to Frank George, President of NATA. The letter stated that Mr. McFillen's committee did not feel the attendance of a trainer is necessary at All-Star games.

Otho Davis had asked that this be put on the agenda and since he was not present, Pinky Newell moved that it be tabled for a more appropriate time, when Otho is here.

7. Paul gave us the dates of the NCAA meeting, January 11 - 13, in Atlanta, at the Peach Tree Plaza. The Joint Commission will meet Monday and Tuesday, January 9 and 10, prior to this meeting. There will be an all-day Monday clinical session and talks will be limited to 30 minutes.

Art Stevens will get mailings from the NCAA, via Dennis Poppe. Paul also asked Art to bring a recommendation for stationary to the next meeting.

8. Art distributed Suggested Amendments to the Articles of Operation. Paul asked the membership to study these and it will be placed on the agenda to be voted upon at our next meeting.

#### JOINT COMMISSION ON COMPETITIVE SAFEGUARDS AND THE MEDICAL ASPECTS OF SPORTS

##### Suggested Amendments to Articles of Operation

A careful review of the Articles of Operation of the Joint Commission, keeping in mind the changes in the operation and meeting schedule, suggested several minor alterations should be made.

1. All references which imply gender to an office or person carrying out duties on behalf of the Joint Commission should be deleted. An example of this can be found in Article IV where it refers to the secretary of the Joint Commission as a he. This would not include the use of the word chairman, which defines the presiding officer of the Joint Commission, not a person.
2. The first paragraph of Article III, Membership should be amended to incorporate a misplaced sentence from Article VII and to clarify the meaning of the Article, as follows:

Membership on this commission shall be open to organizations whose membership consists primarily of institutions of education and/or members of their faculty and staff. Only the official representatives of the organizations that hold full membership have the power to initiate motions and to vote. Each organizational representative shall be entitled to one vote in the commission. Each member organization shall be represented in the commission by a maximum of four representatives, one of whom shall be the Executive Officer of the organization or designee.

Appointments to membership on the commission shall conform with the established procedures of the member organizations. Member organizations

are encouraged to provide for continuity of membership through a recommended three-year term.

3. Article VII, Meetings should be amended as follows to delete the sentence moved to Article III and to change the description of when the Joint Commission meets:

*The Joint Commission shall meet twice annually, these meetings to be held in connection with the annual meeting of the National Collegiate Athletic Association, and the National Athletic Trainers Association, at the site of these organizational meetings. Other meeting times and locations may be designated by the chairman.*

The expense of each member of the commission incurred in attendance at its meetings shall not be borne by the commission.

9. Chairman Trickett discussed our direction as a commission and asked to have an AIAW member speak to our next meeting and other possible speakers.

10. Pinky untangled the agenda item about trainers at All-Star games. (no. 6). After another discussion, Otho Davis moved that the Joint Commission recommend to the NCAA All-Star Games committee that a certified athletic trainer be required to be at all games and practice sessions as one of their criteria for sanctioning.

There was one "no" vote by NCAA representative, Carl Blyth. It was requested that the letter from Ralph McFillen be added to the minutes.

11. At this point, Otho Davis gave a report on the NATA. Points he discussed were olympic trainer selection, foreign trainer work permits, licensing and law suits.

Meeting was adjourned by Chairman Trickett.

Respectfully submitted,  
Roy Don Wilson  
Secretary

December 20, 1976

Mr. Frank George, President  
National Athletic Trainers Association  
Athletic Department  
Brown University  
Providence, Rhode Island 02912

Dear President George:

The NCAA All-Star High School Games Committee, during its December 14 meeting, discussed your proposal for a certified athletic trainer be in attendance at all all-star contests and practice sessions. It was the consensus of the Committee inasmuch as each participant is pronounced physically fit prior to the game as a result of a current medical examination made and certified in writing by his family physician and a qualified doctor is required to be present during the playing of the event and available during all practice sessions, the attendance of a trainer is not necessary. The Committee recognizes such individuals are experts in the area of athletic injuries; however, the availability and presence of a medical doctor is believed to be adequate to handle situations which may arise during practice or conduct of all-star competition.

In the event you have any questions concerning this matter, please feel free to contact me.

Sincerely,  
Ralph McFillen  
Assistant Director of Events

RM:cg

CC: Mr. Otho Davis  
Mr. John A. Fuzak

#### NATIONAL ASSOCIATION FOR GIRLS AND WOMEN IN SPORTS:

MOVED #9 (seconded #10 and carried 10-0) that the NATA liaison representative to be a certified trainer and the Chairperson on the Athletic Training Council of the NAGWS for the reason that this organization pays the expenses of this particular individual.

#### NATIONAL ASSOCIATION OF COLLEGIATE DIRECTORS OF ATHLETICS:

MOVED #7 (seconded #9 and carried 10-0) that NATA establish official liaison with this group, this involving an expenditure on the part of NATA of \$135 to accomplish this liaison.

#### NATIONAL ASSOCIATION OF INTERCOLLEGIATE ATHLETICS:

The Board was furnished with a list of those indicated as being certified for its perusal.

The list of athletic trainers employed at NAIA schools will be checked for validity and returned to the Board.

November 10, 1977  
President Frank George  
Brown University  
Dept. of Athletics  
Providence, RI 02912

Executive Director  
Otho Davis  
Philadelphia Eagles  
Veterans Stadium  
Philadelphia, Penn. 19148

Dear Frank & Otho,

To keep you informed on what NAIA Medical Aspects Committee is doing, I'm sending you a copy of a questionnaire and results to see if you all can come up with some suggestions, ideas, or conclusions that could lead to better athletic medicine in our smaller colleges. Remember they still have 40 or 50 football players, etc. that are practicing, that are making contact, etc. But, who's managing their injuries, preventing further problems, fitting and making their equipment safe?? Can we educate those schools? Can they afford a trainer? Can they afford a graduate assistant who can train for them?

I can think of a 1,000 questions!!!

I'm also sending you some duplicate correspondence that I've received on the questionnaire and problems that we in NAIA are facing.

Hope your seasons are going well and continue to do well.

Sincerely,

Al Ortholani  
Pittsburg State University  
Pittsburg, KS 66762

PS. Frank, I should be in Boston for the girl's National Swim Meet in January maybe we could get together and talk a bit.

PSS. I almost forgot! Are all the trainers listed here certified ones!!

cc:  
Wally Schwartz  
National Assoc. of Intercollegiate Athletics  
1205 Baltimore  
Kansas City, MO 64105

Mr. Wally Schwartz  
Assistant Executive Director  
NAIA  
1221 Baltimore  
Kansas City, Missouri 64105  
Dear Wally:

November 4, 1977

My report will be submitted after we meet in Atlanta, January 15, 1978.

Respectfully,

Warren Morris

NATIONAL FEDERATION OF STATE HIGH SCHOOL ASSOCIATIONS:

Mr. George commented on a letter received from Dr. Bachman and, after a brief discussion, it was the consensus of the Board that the President write to this Association to see if an NATA Program of some sort could not be set up.

LEGISLATION TO RESTRUCTURE AMATEUR ATHLETICS

By John E. (Jack) Roberts, Administrative Assistant  
National Federation of State High School Associations  
NATIONAL FEDERATION ANNUAL MEETING  
Milwaukee, Wisconsin

July 8, 1977

Regardless of our individual party preferences or affiliations, we - as administrators of interscholastic activities programs - must look with some favor on the victory by Jimmy Carter in last November's presidential election, at least as it has affected interscholastic activities programs so far during 1977. I expect that a year or two from now we will be complaining about the Carter Administration, the Congress and all of the Federal agencies; but so far, the changes taking place in Washington have been so time-consuming that interscholastic programs have remained substantially unthreatened by new legislation, although there has been some harassment resulting from new regulations and interpretations of old legislation.

Not surprisingly, the new administration has given only solicited lip-service to the Final Report of the President's Commission on Olympic Sports and the legislation which was intended by the Commission staff to result from that Report. We are not likely to hear the Carter Administration or a Democratically-controlled Congress refer often, if at all, to a Report commissioned by Mr. Ford.

The three Senators with whom Mr. Durbin and I met in February, clamored then for unanimity among athletic organizations in support of the Commission's recommendations; and they indicated that if there were not unanimity, they would forsake the legislative effort.

Obviously, there was not unanimous support for the Commission's recommendations and, probably, there will not be legislation of the type envisioned by the President's Commission. A letter from Mr. Growney as President of the National Federation and many letters from state high school association officers and youth sports directors were instrumental in displaying to the senators the lack of support for the kind of general overhaul of amateur athletics which the President's Commission was advocating.

There is no reason now to beat the dead horse by recanting the objections of interscholastic athletic administrators to the Commission's recommendations. However, one of the reasons we opposed the Report was that we believed many of those recommendations which we *could* support could be implemented without government involvement - that is, could result from voluntary changes by the United States Olympic Committee. To a large degree, that appears to have happened.

The USOC conducted its Quadrennial Meeting in Colorado Springs last April and adopted a number of amendments which had the effect of making the kind of changes in the USOC which make it better able to prepare U.S. teams for the Pan-American and Olympic Games, but without interfering in the day-to-day operations of domestic sports organizations, schools and colleges. The National Federation staff had input in the wording of several amendments, and the National Federation was represented by Mr. Growney of New Jersey, Mr. Lay of Florida, Dr. Ryan of Oregon and Mr. Gideon of Tennessee during the voting on the amendments.

The result of the Quadrennial Meeting is that the USOC now has the tools to make the changes which would lead the NCAA to re-apply for membership in the USOC. Specifically, the USOC seems to have made a commitment to the autonomy of each international franchise holder, which means the AAU will no longer be able to monopolize amateur sports administration. Secondly, the USOC seems to have made a commitment to the fair arbitration of franchise disputes between organizations.

The revised USOC constitution recognizes that the National Federation membership and its schools may conduct the interscholastic program without outside interference. Specifically, a new sentence of the constitution reads: "The USOC recognizes each Group B member as entertaining jurisdiction over competition engaged in solely by its constituents."

The New USOC president has stated publicly that this jurisdiction extends to international as well as domestic competition. In other words, the National Federation membership shall control the athletic participation of high schools both in this country and abroad.

Ironically, the National Federation and other organizations might now want to introduce legislation which will assure the USOC does not reverse itself in a few years when the pressure of these times relaxes. To cast in low these recent changes, P.L. Law 805 - which is the act incorporating the USOC - would have to be amended by action of the Congress. However, before the National Federation supports such legislation, several interpretations would have to be made to our satisfaction.

The recommendation of the President's Commission that schools and not associations of schools make determinations regarding the eligibility of student-athletes was not incorporated in the revised USOC Constitution. However, the revised constitution does include a strengthened athletes bill of rights.

Dropped is the special provision that any high school could deny a student participation in an international competition conducted in compliance with reasonable national and applicable international requirements - something that was never done anyway. It is not yet clear if that will be interpreted to mean schools must always allow the student to retain interscholastic eligibility when he or she returns from international competition. Added to the USOC constitution is a statement which stipulates that any member of the USOC - and we are - agrees to submit to binding arbitration any controversy between an athlete and an organization which attempts to deny an athlete participation in an international competition. Again, it is not yet determined if that is being interpreted to mean that a student may arbitrate his or her interscholastic eligibility after returning from international competition.

The revised USOC constitution gives Group A members - the national sports governing bodies - much autonomy and authority, but it also specifies with new wording that the national governing body for each sport shall be responsible to the organization it represents and seek to minimize conflicts in scheduling and have due regard for the regular programs of competition sponsored by each of its members.

Unfortunately, this is the kind of wording that can go unheeded. In fact, the Group A member for swimming has made plans for a series of summer time all-star meets which conflict with the philosophies of many state high school associations and it is planning to entertain Europe's outstanding female swimmers in January for a meet which will conflict directly with many high school seasons. In other words, Group A members may heed the USOC Constitution only as it pleases *them*, not us; and we will have to have

After looking over the results of the Athletic Trainer survey, I will offer the following observations:

1. There appears to be very little change in the status of athletic trainers in NAIA institutions since 1970.
2. Approximately 20% of the NAIA institutions responding to the survey indicated that they have an NATA certified trainer.
3. Approximately 88% of the respondents use student trainers. This apparently means that some of the schools which have a certified trainer also use student trainers.
4. The apparent difference in the status of team physicians from 1970 to 1977 is probably due to the definition of the team physician. In the 1970 questionnaire, the team physician was defined as one who attends team practices as well as intercollegiate contests. I do not believe that the 1977 questionnaire state that the team physician attended the team practices. Therefore, many more institutions have indicated that they do have a team physician.
5. Approximately 80% of the respondents feel that an NAIA athletic workshop would be beneficial. Since approximately 88% of the institutions use student trainers and approximately 80% have only student trainers, the workshops should be held in the districts to permit students to attend. A national workshop would be too expensive for most institutions to send the student trainers and the certified trainers should not need the workshop.
6. Ideally it would be good to have a certified NATA trainer in every institution. Until this objective can be reached I would like to suggest that the NAIA Medical Aspects of Sports Committee work toward organizing an NAIA athletic training workshop in each of the districts within the next year or so. The certified trainers who are presently working in NAIA institutions could be used along with physicians or others qualified to conduct a workshop. Most of the districts would probably have at least one certified trainer in the district. Apparently district 17 does not have a trainer and therefore we would probably have to bring in someone like Al Ortolani to conduct the workshop in Arkansas. There are several team physicians and orthopedic surgeons in the state, however, who could and would participate in such a program.

Sincerely,

Harry Olree  
Athletic Director  
HO:mb

TO: NAIA MEDICAL ASPECTS OF SPORTS COMMITTEE  
SUBJECT: NAIA ATHLETIC TRAINER SURVEY  
FROM: WALLY SCHWARTZ, ASSISTANT EXECUTIVE DIRECTOR, NAIA  
Gentlemen:

Enclosed find the results of the recent NAIA Athletic Trainers survey. The results will also be published in the next issue of *The NAIA News*.

Rather than just publish the results, we would like to also draw some conclusions from the results. We would appreciate receiving from each of you, your thoughts and we will finalize them. We will need the material by November 11th.

Enclosed you will also find a list of NAIA certified trainers as reported by each athletic director. I would like Al Ortolani to check these through NATA for verification as the athletic director may be misinformed. This list will supply the NAIA with a qualified "pool" of talent for use at our national events as well as possible clinic people and those the association can recommend to governing sports bodies for use at international athletic events.

Sincerely,

Wally Schwartz  
Assistant Executive Director  
NAIA  
Encl.

cc. Dr. L. T. Walker, Coordinator, NAIA Medical Aspects of Sports Committee Dr.  
Harry Fritz, Executive Director, NAIA

NCAA FOOTBALL RULES COMMITTEE:

The Board was furnished, as a matter of information, with the statement that this Committee would meet during the coming week, January 1978, and that there was nothing to report to the Board at this particular stage in time.

FROM: Warren Morris - NCAA Football Rules Committee

The annual meeting of the NCAA Football Rules Committee will be held in Atlanta, Georgia, January 15-18, 1978.

The Injuries and Equipment Committee which, Dr. Fred Behling representing the A.M.A. Medical Aspects of Sports, Bump Elliott - Athletic Director, Iowa, representing N.C.A.A. Football Rules Committee, one other assigned N.C.A.A. Football Rules Committee Member and Warren Morris - A.C.T. representing N.A.T.A. will meet with the manufacturers of football equipment and exchange ideas on equipment and injuries during the 1977 season. The chairman will then give a report to the N.C.A.A. Football Rules Committee with the manufacturers present. The Manufacturers Representatives are then excused after the report and discussion. The Rules Committee hears all reports and then they go through the Rule Book word for word and add or subtract where it is necessary. The Chairman will assign committees to work on any new rule changes with the following principles that govern all rule changes:

1. It must be safe for all playing the game.
2. It must be applicable to all institutions.
3. It must be a coachable rule.
4. It must be administrable by officials.
5. It must maintain the balance between offense and defense.
6. It must be interesting for the spectators.

I will be gathering data to make my report to the N.C.A.A. Football Rules Committee from N.A.I.R.S., questionnaires that are sent to each reporting school for their injuries, etc. and also suggestions for any rule changes, N.O.S.A.E. and the A.M.A. Medical Aspects of Sports, and fellow trainers.

The doctor and trainer are the conscience of the committee for safety, and I believe the N.A.T.A. should continue to have a representative on the N.C.A.A. Football Rules Committee.

some assurances that the USOC will hold national governing bodies to their responsibilities to organizations such as ours.

If these questions are answered to our satisfaction, I believe we can label as "successful" the efforts of the school-college community and many youth sports groups to halt the movement to restructure domestic amateur athletics through Federal legislation. It may have been that we were fortunate in the timing - that a new administration took over in Washington.

However, the National Federation membership must be wary of the new power of the USOC and the national sports governing bodies, constantly reminding these groups that their authority for international competition does not make them the spokesmen for domestic sports or give them license to interfere in domestic sports programs.

I'm beginning a general review of other pending Federal legislation, I suppose I must mention that the preoccupation of the Carter Administration and the Congress with reorganization of Federal agencies has had the adverse effect of keeping them from considering a couple pieces of legislation we would like supported, such as amendments to Title IX and the resolution calling for October 7 to be National Coaches Day.

The Coaches Day resolution - House Joint Resolution 332 - remains stuck in the Subcommittee on Census and Population of the House Committee on Post Office and Civil Service. Our letters and yours to subcommittee and Committee members have evoked favorable responses but little action. At present there are 4 co-sponsors of the Resolution. Needed for favorable action are 218 co-sponsors.

It is doubtful there will be action sufficiently in advance of October 7 that much publicity can be generated to make the day widely recognized. However, that does not mean you cannot promote the day from the state association office and within individual schools; and I hope you will. I also hope you will urge your Representatives to co-sponsor House Joint Resolution 332. It gives us an opportunity to be for something for a change, and it will be good for our image.

A year ago, Congress chipped away at the broad coverage which the Department of Health, Education and Welfare had given to Title IX of the 1972 Education Amendment. Boys State, Girls State, Boys Nation, Girls Nation, Father-Son Banquets, Mother-Daughter Banquets and scholarships for beauty pageant winners were among those programs specifically exempted by Congress from H.E.W.'s broad interpretation of Title IX.

This year, Congressional pressure has caused HEW to permit boys-only and girls-only choral groups, although they shouldn't be called that. "Base Cleff" and "Treble Cleff" might be better names.

In addition, a bill has been introduced in Congress to exempt sex-segregated gymnastics classes, another to exempt physical education classes altogether, another to exempt musical programs, and - most to the point - two bills to exempt all programs which do not receive Federal financial assistance.

While there is no question in my mind that passage of each of these bills would be consistent with the intent of the Congress in 1972, I am not sure the 1977 Congress would vote accordingly. And votes defeating these bills would be interpreted by some people as Congressional sanction to HEW's regulation of high school activities programs.

Therefore, people who know more about these things than I, feel the best route to follow in confining the long reach of HEW is through litigation. The *Romeo* decision indicates this is a correct assessment. In that case, the court ruled Title IX is "program specific" - that is, HEW can only terminate Federal funding for a program when there is discrimination in that Federally assisted program. HEW is appealing the decision.

An equally important case is the NCAA's suit which challenges HEW's authority to regulate the use of revenue generated by a particular program. HEW contends all football receipts must be dispersed to the men's and women's athletic programs; the NCAA contends only the net receipts - that money left over after paying the bills for the football program - must be dispersed fairly to the men's and women's programs.

I am hopeful this suit is successful, not because I want colleges or high schools to discriminate without check against students; but because I believe favorable results in litigation and the continuing interest of the Congress are essential in keeping HEW from running rough-shod over our program. The people I've dealt with at HEW are extremely arrogant crusaders and must constantly be reminded of the limits of their authority.

During the past year, HEW has been busy preparing regulations of another kind - these to implement Section 504 of the Rehabilitation Act of 1973.

The wording of Section 504 is nearly a copy of Title IX. Section 504 was acted on by Congress with even less discussion than it gave Title IX. HEW has made regulations which go even farther than its Title IX regulations in imposing federal regulation of school programs.

At present, our concern should be directed to two areas: facilities and programs. The 504 regulations do not appear to require schools to give handicapped students access to all facilities, but they do require schools to give them access to all programs. This means that if a handicapped student wants to participate in a program conducted in a building or room which does not permit him or her entry or complete function, then the school must either modify the facility or move the program.

The regulations require that all new facilities be built in such a way that they are readily accessible to handicapped students. The regulations require that all remodeling of old facilities be done in such a way as to permit easy access by handicapped students. Access to facilities does not have to be total, but it is not permitted to designate a certain area for people confined to wheel chairs, nor isolate people with other handicaps.

The regulations require equal opportunity for handicapped students. In athletics, this opportunity may be in separate programs if this is the only way these students may have an opportunity to participate and only if the same services and supplies are provided. Unlike the Title IX regulations, however, the 504 regulations state a school may not keep an otherwise qualified handicapped student off the regular school team even when there is a separate team in that sport for handicapped students.

Most significant, however, is the requirement similar to Title IX which says schools have an obligation to educate all students fully, and this would include offering handicapped students the opportunity to be educated through athletics.

There is no question, the 504 regulations could be devastatingly expensive to schools which need to be remodeled and will push up considerably the cost of new schools and that both factors will make even more precarious the place of interscholastic programs in the curricula of schools.

However, there remains a great deal of question of the authority under which HEW has imposed these broad, expensive regulations for programs which do not receive Federal funds. As in Title IX, the wording of Congress in Section 504 is clear and is limited to "any program or activity receiving Federal financial assistance," not programs which do not receive Federal financial assistance.

Other questions raised by the 504 regulations include:

- (a) the obligation of rules committees to formulate rules which will not deny equal opportunity to handicapped students;
- (b) the obligation of state associations to conduct state championship events for the handicapped and to conduct other state championship events at facilities to which handicapped spectators have reasonable access; and

- (c) the obligation of state associations and schools to construct eligibility rules which do not put an unfair burden on handicapped students.

By the way, the handicapped regulations impose these additional requirements and deadlines. Recipients of federal funds, according to the regulations must:

- (a) Provide complete program accessibility by August 2nd;
- (b) Give notice by September 1 that they do not discriminate against the handicapped;
- (c) Develop a transition plan by December 3 outlining structural changes necessary to achieve program accessibility;
- (d) Complete a self-evaluation by June 3, 1978; and
- (e) Complete structural changes necessary to achieve program accessibility by June 3, 1980.

Another area of athletes in which Congress has been interested for the past few years is athletic safety. Congressman Dellums of California introduced in January of this year the same two bills he introduced in three previous Congresses. One would require schools which conduct interscholastic programs to employ certified athletic trainers. The other would impose on interscholastic athletic contests the regulations of the Occupational Safety and Health Act of 1970. Both have been referred to the House Education and Labor Committee where both are expected to die unless an HEW survey on injuries in interscholastic and intercollegiate athletics, which was ordered by Congressional action and was due last February, is critical enough of school-college athletics to bring new attention to the Dellums bills.

The National Federation headquarters office is content to let the bills die. School people have told us that, while the presence of a certified athletic trainer in every school is desirable, it is not practical. First of all, there are not enough trainers. Secondly, many schools could not add a trainer without cutting out a sport or two to pay the trainer's salary or differential. Thirdly, there are alternatives to a certified trainer in every school - such as district training centers, student trainer corps, retired physicians who volunteer their time, and more.

School people have also indicated they are fed up enough with government regulation through various educational acts that they would oppose regulations from the Occupational Safety and Health Act. Moreover, most educators find something philosophically wrong with treating a student-athlete as an employee and the school as an employer.

Another area of legislative concern is television.

The National Federation headquarters office has done its best to inform the membership of what must be done to assure that high school football games received the protection from professional football telecasts which the Federal legislature has granted in P.L. 87-331. You must merely publish by August 1 in a paper of general circulation the date and site of games on Friday nights or Saturdays to assure that no television station within 75 miles of that site will telecast a professional football game during that period.

The protection begins with the second weekend in September and terminates after the second weekend in December. Consequently, some early season games are not protected, but state association play-off games are protected if you publish the date and site by August 1.

If several sites are possible for your play-off games, depending on the teams involved, we recommend you choose a site and publicize it in the classified section of a state-wide paper. If it turns out your choice is inconvenient, you may change the site, although you lose the protection.

I'm happy to report that the NCAA, which is not prohibited from televising games on Friday nights, has specified in its new \$118 million, 4-year agreement with ABC that Friday night should remain free of college telecasts. Although there may be a telecast on the Friday night after Thanksgiving this year because this is part of a previous agreement with ABC, there probably will not be telecasts on Friday nights during the four years which follow.

This is a voluntary action by the NCAA. It is turning its back on a great deal of money which the networks are willing to pay for Friday night college football, and the NCAA is doing so strictly out of respect for the National Federation and interscholastic programs. The NCAA deserves our appreciation in this matter.

It was reported last June at the Associated Press convention that the television networks are very interested in televising high school and youth sports. In fact, NBC will be televising the Junior Olympics from Omaha this August.

It is very clear that any organization which wishes to sponsor a national high school event would have no difficulty televising the event. With that one telecast, the sponsoring organization would gain as much prestige and national recognition as it has taken the National Federation to gain in 60 years.

So, while we have statutory protection from the National Football League regarding professional telecasts and a solid understanding with the NCAA regarding collegiate telecasts, we have no protection from those organizations which might wish to televise high school events on Friday night - or any other night or day for that matter - and then use the resultant income and prestige to speak for interscholastic athletics in all affairs. Consequently, I suggest we begin to think more seriously about the National Federation's role in sponsoring and televising certain events.

The final legislative topic I will report on today is in the area of products liability litigation and insurance. The Federal legislature is addressing the insurance aspect, and many state legislatures are addressing their systems of tort law in response to the kinds of problems you heard Mr. Rust discuss yesterday.

Typical of the four pieces of federal legislation so far introduced in this area is Senator Pearson's "National Product Liability Insurance Act." This would establish a super-agency and hundreds of arbitration panels across the country which I do not believe is in tune with the times. People want fewer federal agencies, not more.

In fact, I heard Representative McClory of Illinois at a workshop on products liability say that he believes Federal agencies like the Consumer Product Safety Commission and the Occupational Safety and Health Administration are among the causes of the increase in products liability litigation and that another Federal agency is unlikely to be the solution to the problem.

Senator Pearson's Bill would also create a product liability insurance pool - a re-insurance program. While this may help manufacturers, I do not believe it is the solution to their problems. I do not believe they need insurance protection against bad law; they need the system of bad law improved.

Changing the system of tort law appears to be the intent of a third part of Senator Pearson's Bill, but this raises constitutional questions because tort law is a matter for state judicial systems and probably cannot be altered by Federal legislation.

Therefore, if you are interested in averting the idiosyncrasy of playing football without helmets and competing in gymnastics without apparatuses, you should be talking with your state legislators. The Utah legislature enacted legislation which imposes a six-year statute of limitations for product liability actions; it prohibits the injured party from specifying a dollar amount in a complaint filed in a product liability action; and it protects manufacturers from action when the product is altered or used in a way not intended. Other states are considering legislation which would permit the "State of the art" as a defense in a product liability action. Some states are considering modifications of the contingency fee basis for compensating the plaintiff's lawyers.

One word of caution, however, to those of you who are worried about this problem - and I am: Be sure that legislation which protects the manufacturer of a piece of athletic equipment does not shift the burden of liability to the athletic director who buys it or the coach who supervises its use. We must see that school people are protected, even as we make efforts to help manufacturers achieve reasonable protection from capricious suits and exorbitant settlements.

As we address the topic of products liability during the next year or so, let us take a posture that will cause the public to view us as committed to the safety of competitors, secondarily committed to the security of coaches, and only then supportive of the concerns of manufacturers. When we go on the attack, let us attack judgements which compensate the lawyer more than the injured and let us attack the insurance companies which raise premiums or cancel policies without a full and public accounting for their actions.

Ladies and gentlemen, I chose to end with the subject of the products liability problem because it points out something we have only recently been realizing in our efforts to monitor and manipulate Federal legislation. That is that we cannot forget public relations during Congressional relations.

In our fight against HEW, for example, the National Federation was made to be the villain - those guys who hated women. Actually, we are women and we love women's athletics. What we hate is government interference and take-over. Evidently, we didn't stress that aspect enough.

Now, in the fight to protect interscholastic athletics against product liability litigation, let's not make the same mistake. Let's be seen as unequivocally and vocally committed to the safety of athletes, and less vocally and identifiably committed to big manufacturers. Let's attack the things that will win public support - those huge legal fees and those indiscriminate or at least unpublic actions by insurance companies.

In all legislative matters, let's temper our Congressional lobby with a good lobby for the support of the public. For in these days of program cuts, we must have public support for interscholastic activities if these programs are to continue.

Thank you.

#### 1977 HIGH SCHOOL FOOTBALL SEASON UNDERWAY

(National Federation Press Service) . . . THE MOST POPULAR HIGH SCHOOL SPORT - at least in terms of the number of participants - is football, and interscholastic football seasons are now underway all across the country.

MORE THAN ONE MILLION BOYS - in fact, nearly 1,060,000 - will be on high school football teams this fall, as nearly 15,000 schools sponsor the sport on an interscholastic basis.

NO MAJOR RULE CHANGES will complicate the sport for the millions of spectators who will watch the more than 75,000 varsity and 100,000 sub-varsity contests sponsored by schools during 1977. What few changes there are have been made as technical improvements and to simplify administration of games of officials.

MORE THAN 40 STATES will culminate the season with playoff series to determine state champions.

October 4, 1977

John E. Roberts  
Administrative Assistant  
National Federation of State  
High School Associations  
400 Leslie Street  
Elgin, Illinois 60120

Dear Mr. Roberts:

Recently I came in possession of a copy of a paper entitled "Legislation to Restructure Amateur Athletics" that was developed from the National Federation Annual Meeting held in Milwaukee, Wisconsin on July 8, 1977. One paragraph on page 5 of this document irritated me so much that it stimulated the writing of this letter. The paragraph that is so incorrect and based upon a lack of facts reads "The National Federation headquarters office is content to let the bills die. School people have told us that, while the presence of a certified athletic trainer in every school is desirable, it is not practical. First of all, there are not enough trainers. Secondly, many schools could not add a trainer without cutting out a sport or two to pay the trainer's salary or differential. Thirdly, there are alternatives to a certified trainer in every school such as district training centers, student trainer corps, retired physicians who volunteer their time, and more."

First, I personally don't care what the National Federation headquarters office plans to do in regards to the Athletic Care Act. Although it would be nice to have the National Federation's support since it has been the National Federation's failure to recognize very unhealthy practices being carried out at the secondary school level, especially the appointment of unqualified persons to the position of athletic trainer, that has stimulated federal and state legislation not only to help protect high school athletes but also the field of athletic training. Too many schools have appointed an assistant coach, teacher, other school personnel, and individuals from the community to the position of trainer without any consideration of their qualifications or the duties and responsibilities. It is the use of incorrect techniques and improper procedures by these unqualified individuals that has caused serious repercussions on the field of athletic training and its professional organization, the National Athletic Trainers Association. Today, certified athletic trainers are trying to protect themselves from all kinds of attacks from the public to state officials because of the action taken by these "unqualified" trainers. To the general public a trainer is a trainer no matter what his or her qualifications may be. Federal and state legislation is one method of not only protecting the field of athletic training but also the health care of the student athletes.

Returning back to the specific statement made by the National Federation, I strongly reject your three reasons that having a certified athletic trainer in every school or school district is impractical. First, the NATA does have the mechanism to provide schools with a sufficient quantity of teacher-universities across the nation producing professionally prepared athletic trainers. Most have limited their class size because of the lack of job vacancies being created at the secondary school level. Most of the approved curriculums could double or triple their enrollment and graduates if the job market was there. In addition to these programs, the NATA has developed a High School Faculty Athletic Training Instructional Program. The latter program assists the school with very little turn over in its faculty and growth in the number of new positions. An interested faculty member can be professionally prepared to carry out the role of athletic trainer and at the same time become qualified to take the NATA certification exam in this type of retraining educational program. With further development of this type of educational program it would be very easy to provide every school or school district with a certified athletic trainer in an eight to ten year period of time.

Secondly, I can not believe that the \$250 to \$2000 increment, depending on the financial situation of that school district and their base supplements for coaching would completely eliminate a sport or two from the interscholastic program for a teacher-trainer.

We are not advocating full-time non-teaching positions for the athletic trainer. Certainly most school districts could not afford this expense without cutting out one or two sports. However, this argument of lack of finances becomes ridiculous when one school allots \$750.00 for cheerleaders to travel to swimming meets when most of the swimming pools can't even seat 50 persons or when a basketball coach at one city school publicly states that he needs only one assistant coach with his varsity squad and is given another assistant coach without requesting it because another school in the same city adds the second assistant coach position. These examples of frills and financial waste in athletic budgets are abundant and too numerous to list here.

Finances should never overshadow the provision of proper health care for and preventive measures of injuries that may occur to student athletes in interscholastic sports programs. If the athletic administrator fully explained the value of a teacher-trainer to his sports program, it would be the rare athletic advisory committee or school board that would turn down the funds to develop this position in the program. In most cases the proposal is never made unless pressures of a few knowledgeable persons in the community become too overwhelming. My own local high school is an excellent example of this situation. Coaches at the high school wanted a qualified athletic trainer but were rejected by the administration because of the lack of funds. When several citizens of the community including the strong backing of several members of the medical field supported the coaches, the athletic administrator made the proposal for the additional position of athletic trainer and requesting the amount of \$1000 to fund the position without an explanation of the duties and responsibilities of this person to the athletic advisory committee. The proposal would never have been approved in this form. However, one of the coaches on this committee had done his homework and provided all with supporting materials for the need of proper health care and injury prevention. In conclusion, both the advisory committee and the school board approved the position with a funding of \$1800.

Finally, the National Federation alternatives for a certified athletic trainer are either weak or inadequate. No matter the number, the student trainer without proper supervision can never substitute for the certified athletic trainer. Their educational background is lacking. At the college level, I find most of the high school student trainers have to be retrained and broken of some very improper habits, practices, and techniques. The only exception being those students working under the supervision of a certified athletic trainer.

True, all athletic programs should have a team physician. However, fewer programs are able to obtain the services of any physician for a home football game because of the greater concern of their part about legal liability. The certified athletic trainer must have proper medical supervision and work under the prescription of a physician. He is not a substitute and work under the prescription of a physician. He is not a substitute for a physician. At the same time it is the rare physician, retired or not, that can substitute to carry out the duties and responsibilities of the athletic trainer at all practices and contests for all sports being provided in the school's interscholastic athletic program.

Enough of my soapbox but I had to let you know one person's sentiments in regards to your statements about the Athletic Care Act. I know that I speak for a great number of other persons and not all certified athletic trainers in my objectives. I personally do not support the other bill mentioned that would impose on interscholastic athletic contests the regulations of the Occupational Safety and Health Act of 1970. Therefore, I feel that these two bills should be considered separate entities.

Certainly appreciate your time in reading these opposition remarks to the National Federation's published statement in regards to the desirability of having a certified athletic trainer in every school or school district. The field of athletic training must protect itself against statements of this kind since they encourage the use of improper use of health care and injury prevention techniques and the use of unqualified personnel in the care of athletic injuries.

Sincerely,

Sayers J. Miller, Jr., A.T.C.

October 10, 1977

Mr. Sayers J. Miller, Jr., A.T.C.  
The Pennsylvania State University  
College of Health, Physical Education and Recreation  
131 White Building  
University Park, PA 16802

Dear Mr. Miller:

We are genuinely appreciative of receiving your comments regarding our position on the two Dellums bills. We are constantly seeking such input.

However, at the present time, our position is unchanged. Unlike you, we have to be concerned with more than one aspect of administering interscholastic programs. It is a fact that one of the two or three most serious problems facing interscholastic athletics is finding people to fill coaching vacancies. This is because many schools have coaching vacancies, but not corresponding teaching vacancies. Obviously, employment of a certified athletic trainer in a school where there is not a teaching vacancy or where there are more coaching vacancies than teaching vacancies would only compound the problem. We continue to believe that district-wide training centers, student trainer corps under the guidance of local physicians, and treatment by competent but not NATA certified trainers are viable alternatives to the Dellums requirement.

We will take your advice to separate our discussion of the two Dellums bills, recognizing that the "Trainers" bill has more merit than the "OSHA" bill.

Sincerely,

John E. Roberts  
Assistant to the Executive Director

Oct. 19, 1977

Brice B. Durbin  
Executive Director  
National Federation of State High School Assoc.  
400 Leslie St.  
Elgin, Illinois 60120

Dear Mr. Durbin:

In a recent Federation publication "Legislation to Restructure Amateur Athletics", there is a paragraph on page 5 commenting on Athletic Trainers in high schools. There are a number of incorrect statements in this paragraph. It is wrong to state that, "there are not enough trainers". There are a large number of Certified Athletic Trainers with teaching certificates who are seeking employment on the high school level. There are now fifty schools with an Approved Athletic Training Curriculum and the N.A.T.A. has

developed a Faculty Trainer Education Program. I believe we could meet the needs of the large high schools immediately, the medium size high schools within 3 to 5 years, and all schools within 8 to 10 years. The method of doing this was explained and we thought very well received by Federation Executives in our meeting at Hershey, Penn.

I believe it is wrong to say that many schools could not add a trainer without cutting out a sport or two to pay the trainer's salary. This same statement was used by many as a scare tactic when it was proposed that women's sports be added to the athletic programs. We have seen a large increase in women's sports, with funding, and no sports being cut or dropped from the men's programs. The N.A.T.A. is not proposing to place full-time athletic trainers in the high schools. The N.A.T.A. feels many of the needs of the high school athlete can be met by a Faculty-trainer; a faculty member who would teach a regular class schedule and have additional duties as an athletic trainer. This is the same principle by which many of the high school coaches are hired. The additional cost to the school would be the same as adding another coach to the staff.

The alternatives offered in the Federation Statement are certainly not acceptable. A student-trainer cannot and should not be given the responsibilities of a Certified Athletic Trainer. There are too few retired physicians available who have shown enough interest to help with the problem. District Training Centers can be more costly than the faculty-trainer concept. We have a responsibility to the athletes on the high school level, which we are not fulfilling at this time. Every sports program is morally obligated to do everything within its power to prevent injury whenever possible and to minimize the severity of the injury by treating each injury promptly and properly with total rehabilitation as the goal. The faculty-trainer is the best means by which this obligation can be fulfilled on the high school level.

After the meeting in Hershey, Penn., I hoped that the NFSHS would support this concept and assist the N.A.T.A. in achieving a goal of having a Certified Faculty-Trainer in every high school. The executives of the Athletic Directors Association certainly supported this goal and the method of reaching it. With support from NFSHS, I feel the N.A.T.A. could fulfill its obligation to the high school athlete.

Sincerely,

FRANK GEORGE  
President N.A.T.A.

October 31, 1977

Mr. Frank George, President  
National Athletic Trainers Association  
Athletic Department  
Brown University  
Providence, RI 02912

Dear Mr. George

We appreciate receiving your letter of October 19, 1977, in which you make objections to a recent National Federation publication. We have received only two other objections to the publication, both from your colleagues making the same points.

As you have done, one of your colleagues has contended that we are incorrect in our belief that there are not enough trainers. That same person used as evidence that there are presently 65 Ohio school districts that have recognized the need and have hired certified athletic trainers. However, 65 school districts is not many when one considers that there are more than 1,500 member schools in the Ohio High School Athletic Association, and this fact lends more credence to our point of view than yours.

The publication to which you object does not deny, and I certainly do not deny, that the employment of a certified athletic trainer is an asset - a very important one - to interscholastic athletic programs. However, unlike you and your colleagues, our concern - and that of interscholastic athletic administrators on the local and state levels - is broader than just medical aspects of sports administration. We would not execute our responsibilities properly if our only concerns were medical aspects of sports administration. That is your task, and you are doing it well; and we are happy to receive your letter in that vein.

However, we are somewhat annoyed when you and your colleagues throw up the term "moral obligation" as the ultimate reason for placing certified athletic trainers in every school. We wish you would temper this morality with a recognition that the legislation you support would greatly enhance your own organization; and we ask you to recognize that the certification program of your organization is not the only solution to providing better medical care for the interscholastic program.

Cordially,

Brice B. Durbin  
Executive Director

December 1, 1977

Mr. Bill Durbin  
Executive Director  
National Federation of  
State High School Associations  
400 Federation Place  
P.O. Box 98  
Elgin, Illinois 60120

Dear Mr. Durbin:

It has recently come to our attention that the National Federation has enunciated a policy concerning certified athletic trainers at the high school level. We think it entirely appropriate that the National Federation take a stand on this issue. However, we were shocked and, even more, saddened to discover that the Federation's position is to actively oppose the concept of certified athletic trainers at every secondary school.

Jack Roberts' remarks at the National Federation meeting in July indicate that it is not "practical". His remarks are ill-timed, ill-conceived and uninformed.

The activities of the students of the Center for Sports Medicine Faculty Athletic Training Program daily refute these allegations. Nationally, many successful programs exist at the secondary level. In fact, the National Federation's own magazine featured Ron Freeman of Forest View High School in a cover story concerning athletic training at the high school level.

To say that there are not athletic trainers available is fallacious. There are many unemployed certified trainers in the country. Schools have the capacity to graduate more trainers, but have not done so because of a lack of job opportunities. Additional programs modeled after the Faculty Athletic Training Program could be geared up to provide interim support if necessary.

Another common misconception supported by Mr. Roberts is that qualified but uncertified trainers exist. Any truly qualified trainer is certified.

The suggestion that student trainers, retired, volunteer physicians or paramedics

can serve as alternatives to certified trainers demonstrates blissful ignorance of the role of an athletic trainer.

The schools that have had the foresight to employ a certified trainer have met no difficulty in finding funds to pay their salary, nor has it been necessary to drop any sports. This is another example of setting up straw men and is not borne out by facts.

It is the opinion of the Center's legal counsel that future sports injury litigation will be adversely influenced by the schools' failure to provide optimum conditions. This means providing a certified athletic trainer.

For a national organization to predicate any action on adverse publicity shows lack of initiative. We do not need a HEW survey to tell us that sports health care delivery at the secondary level is woefully inadequate. We would hope that the National Federation would take a positive approach in remedying this situation rather than solely reacting to unfavorable statistics.

We will look forward to the National Federation redressing its position and are ready to offer any assistance necessary to facilitate the change.

Sincerely,

David C. Bachman, M.C.  
Director, Center for Sports Medicine

December 8, 1977

David C. Bachman, M.D.  
Director, Center for Sports Medicine  
Northwestern University Medical School  
339 E. Chicago Avenue, Room 416  
Chicago, IL 60611

Dear Dr. Bachman:

We have your letter of December 1, 1977, criticizing and somewhat mis-stating the National Federation's position with regard to certified athletic trainers.

Mr. Roberts' presentation at the National Federation Annual Meeting in July gave an accurate reflection of the position of the National Federation headquarters staff and membership with regard to the proposed federal mandate that all schools which sponsor interscholastic athletic programs must also employ certified athletic trainers. There are few issues on which Mr. Roberts and I are more sure that we accurately reflect the opinion of the membership.

Referring to your letter, we find that you have an incorrect notion of the National Federation's position. Perhaps your notion has been tainted by the trainers who may have encouraged you to write and whom we know do not have an unbiased position on the subject.

The National Federation is *not* opposed to the *concept* of a certified athletic trainer in every secondary school, but the National Federation is adamantly opposed to the *mandate* of certified athletic trainers at every school. We understand there are many schools which do have certified athletic trainers and that the benefits have been tremendous. The fact that the National Federation's magazine featured the Forrest View High School training program shows our support for the concept of certified athletic trainers and our acknowledgment that certified athletic trainers are operating beneficially in schools.

It is logical that those schools which have employed certified athletic trainers have not had to drop sports or levels of competition. This is because only the schools which have had the funds to employ trainers have done so. The problem is *mandating* to those which do not have funds that they must hire a certified athletic trainer. Something must give.

The facts are clear that, if it was mandated that each school employ a certified athletic trainer, there would not be enough trainers to go around. There are a great many unemployed certified athletic trainers in the country not because there is an excess of certified trainers, but because schools lack the funds and corresponding teaching openings to accommodate the employment of certified athletic trainers.

Consequently, we believe it is important that local school districts have the autonomy to develop alternatives to hiring certified athletic trainers for caring for the participants in the interscholastic athletic program. To maintain that the employment of a certified athletic trainer is the only way to bless students with adequate medical attention is the arrogant and self-serving opinion of the National Athletic Trainers Association, an opinion we do not share.

Probably the most disturbing aspect of your letter is the people you have shared it with. We do not believe that Congress or the Department of Health, Education and Welfare should be telling us what to do in interscholastic athletic administration, nor should we share our differences of opinion with them. Your copying government officials makes us question whether the objectives of the Center for Sports Medicine are consistent with the National Federation's objectives for interscholastic athletics, and we will be reviewing our association with the Center.

Cordially,

Brice B. Durbin  
Executive Director

#### ATHLETIC EMERGENCY PROCEDURE

A comment by the Joint Advisory Committee on Sports, the Ohio High School Athletic Association, the Ohio State Medical Association, and the National Federation.

For many years the Ohio High School Athletic Association and the Joint Advisory Committee on Sports Medicine of the OHSAA and the Ohio State Medical Association have recommended that a physician be present at athletic contest and available (on call) during practice sessions. With many sports activities in progress at any one time it is often impossible to have physicians present at all contest. In fact, some small communities in rural areas and inner-city schools may not have the services of a physician. This makes it mandatory for the school administrators and coaches to arrange a procedure to obtain medical care and treatment for emergencies.

Some sources of assistance that may be utilized when physicians are not available are certified athletic trainers, emergency medical technicians usually on emergency vehicles, ambulance vehicle with trained personnel, rescue vehicles with trained first-aid personnel and, in some areas, National Guard or Army Reserve medical personnel assigned to ambulance duty. Schools may also have other school personnel qualified in first-aid, who may be available for duty during activities.

Recommended procedures that may be followed in successful emergency care are:

1. Immediate, on the spot, first aid by an individual with adequate training.
2. Communication System. An available non-pay telephone with a direct, outside line to contact a physician or ambulance service. Arrangements should be made in advance to insure availability.

- Emergency care facility. Arrangements should be made, in advance, with staff personnel of local hospital or clinic to notify, in case of emergency, that emergency service is necessary.
- Notification. The facility to which the injured player is being transported should be immediately informed of the injured players status. Necessary personnel and equipment would be available at the facility or physicians, on call, could be notified of the emergency.
- Transportation. Ambulance, emergency vehicle, first-aid vehicle or rescue vehicle, with appropriate equipment and personnel may be parked at the field or game site. If this procedure is not feasible, prior arrangements should be made to have equipment on call when an emergency develops. Again, an available, non-pay telephone with a direct outside line should be immediately available.
- Communities without physicians, medical clinics or hospital service should complete arrangements with medical personnel and hospital facilities in the nearest community where such services are available.

The plan of action specified above should be carefully covered, in advance, with responsibilities of all concerned - trainer, coach, vehicle personnel, school administrators, local police, deputies or constables - defined. When an emergency does occur, everyone involved can function as an informed effective team.

Local plans of action to meet emergency situations will vary depending on availability of medical personnel and facilities, the location of the playing field or site and communications. In all cases, the emergency situation plan is best developed through cooperative action of local school personnel, participating professional medical staff and allied groups.

When there is a school physician or community health department providing school health services, the medical people involved would share in the planning. When no such service exists, the school administration should request medical assistance through the local medical professional groups, the county medical society, the community hospital staff or personal contact with a physician. Many doctors may be interested in assisting as team physicians but school administrators should initiate the first contact. Ethics of the medical profession necessitates this procedure.

Understanding is the key to an effective emergency care plan. Everyone involved - school personnel, medical professionals, allied medical groups, transportation staff, etc. - must know exactly what is going to be done in an emergency and who will be responsible for carrying out the various tasks involved. When this procedure has been completed, the players, coaches, administrators, parents, and medical personnel will know that everything possible has been done to protect the health, safety and welfare of a player who may be injured.

(National Federation Press Service)

#### NATIONAL OPERATING COMMITTEE ON STANDARDS FOR ATHLETIC EQUIPMENT:

It was indicated by the President that there was nothing definitive to report on.

#### THE NATIONAL OPERATING COMMITTEE ON STANDARDS FOR ATHLETIC EQUIPMENT June 14, 1977

- Open Meeting.* The National Operating Committee on Standards for Athletic Equipment will conduct its annual open meeting June 28, 1977, at Wayne State University located in Detroit, Michigan. A full schedule of presentations and panel discussions will be held in the Community Arts Auditorium on the campus of Wayne State.

Registration begins at 8:00 a.m. and the first session, concerned with the effect of the new blocking and tackling rules on serious head-neck injuries in high school football, will be conducted at 9:00 a.m. Other topics of discussion will deal with the NOCSAE Football Helmet Standard, proposed NOCSAE standards for baseball batting helmets and ice hockey protective headgear, neck protection devices and knee injuries in college and high school football.

For additional information concerning the open meeting, please contact:

Department of Neurosurgery  
Wayne State University  
550 East Canfield, Room 116  
Detroit, Michigan 48201

- NOCSAE Football Helmet Standard.* Recently, several questions have been posed concerning the NOCSAE Football Helmet Standard pertaining to its status and how it affects helmets which bear the NOCSAE seal. Specifically, the NOCSAE Football Helmet Standard is a voluntary safety standard, one which may be adopted by manufacturers of football helmets. If a football helmet model passes the NOCSAE tests, all similarly manufactured helmets of that model series may bear the NOCSAE seal. The NOCSAE seal is not a warranty, but merely indicates the helmet model meets the NOCSAE test standard.

Because equipment manufacturers did not possess the proper testing equipment at the time the NOCSAE Standard was established, Wayne State University, located in Detroit, Michigan, conducted the initial tests on the helmets in behalf of the manufacturers. Commencing January 1, 1978, the manufacturers will be responsible for conducting the NOCSAE tests with their own equipment or through an independent laboratory.

For more technical information concerning the NOCSAE Standard, please contact Voigt Hodgson, Ph.D., Department of Neurosurgery, Wayne State University, 550 East Canfield, Room 116, Detroit, Michigan 48201.

#### NEWS RELEASE July 15, 1977

- NOCSAE Open Meeting.* The NOCSAE annual open meeting was held June 28 on the Wayne State University campus in Detroit, Michigan. Representatives from various athletic equipment manufacturing concerns, safety organizations and governmental agencies listened to talks and panel discussions on topics ranging from the NOCSAE Football Helmet Standard to knee injuries in high school and college football. Approximately 75 persons were in attendance at the open session.
- Printing of NOCSAE Football Helmet Standard.* An updated NOCSAE Football Helmet Standard will be printed and distributed to member organizations of NOCSAE. Interested individuals and organizations should contact Dennis Poppe, NOCSAE secretary-treasurer, later this fall for copies.
- NOCSAE Baseball Helmet Task Force Meeting.* The NOCSAE Baseball Helmet Task Force will hold a meeting July 25 in Detroit, Michigan. The task force is finalizing the proposed NOCSAE Baseball Batting Helmet Standard.
- NOCSAE Round-Robin Test.* NOCSAE is preparing to conduct a round-robin test of the NOCSAE Football Helmet Standard. The purpose of the round-robin test is to show the reproducibility of the NOCSAE system. The testing should be completed by September 1.
- NOCSAE Ice Hockey Protective Headgear Standard.* NOCSAE is continuing its

research on a possible standard for ice hockey protective headgear. Any comments or suggestions concerning the proposed hockey standard should be forwarded to Voigt Hodgson, Ph.D., Gurdjian-Lissner Biomechanics Laboratory, Wayne State University, Detroit, Michigan 48201.

#### NEWS RELEASE August 18, 1977

- Weekly Inspection of Football Helmets.* The National Operating Committee on Standards for Athletic Equipment (NOCSAE) has recommended a weekly inspections should decrease the potential danger of any broken or defective headgear and further any defense to unwarranted lawsuits relating to faulty equipment. Inspections should decrease the potential danger of any broken or defective headgear and further any defense to unwarranted lawsuits relating to faulty equipment.
- Round-Robin Test.* In an effort to prove the reproducibility of the NOCSAE Football Helmet Standard test system, a round-robin test with eight participating laboratories will be conducted. Commercial helmets are now being distributed to the eight participating laboratories and results of these tests will be made available to show the latest state of the art of the NOCSAE Football Helmet Standard test system. This round-robin will be a predecessor to a much larger round-robin involving 20-25 systems including all NOCSAE helmet manufacturers and recon-ditioners.
- Revised NOCSAE Football Helmet Standard.* A revised NOCSAE Football Helmet Standard has been approved by the Board of Directors and will be released early this fall. The revisions include the addition of the NOCSAE recertification procedure.
- Baseball Batting Helmet Standard.* The NOCSAE Baseball Batting Helmet Task Force has concluded its meetings and a NOCSAE Baseball Batting Helmet Standard will be reviewed during the Board of Directors' winter meeting in Chicago, Illinois.
- NOCSAE Contributions.* NOCSAE is a non-profit organization supported by contributions from organizations interested in athletic safety. Groups and individuals interested in provided financial support for the NOCSAE research and testing program should forward contributions to the secretary-treasurer of NOCSAE, Dennis Poppe, NCAA, P.O. Box 1906, Shawnee Mission, Kansas 66222.
- NOCSAE Board of Directors.* Attached please find a listing of the NOCSAE Board of Directors and the organizations they represent.

#### NEWS RELEASE September 14, 1977

- Round Robin Test.* The round robin test which was conducted by the various athletic equipment manufacturers who possess the NOCSAE test systems has been completed. The results have been tabulated and have been sent to Wayne State University and the Consumer Product Safety Commission for review. The tests were conducted to determine the reproducibility and reliability of the NOCSAE test system.
- Instrumentation Meeting.* A meeting to discuss the technical aspects of the mechanical and electronic parts of the NOCSAE test system will be held during the week of October 10 at Wayne State University, Detroit, Michigan. The actual dates of the meeting will be announced later. Representatives from the manufacturing firms which possess the NOCSAE testing apparatus will be in attendance. As mentioned, the group will review the technical aspects of the system as they relate to quality control.
- Football Helmet Certification List.* Attached please find a listing of the football helmet models on the NOCSAE Football Helmet Certification List as of September 15, 1977. There are currently 10 companies manufacturing helmets which have passed the NOCSAE test standard. For additional copies or information, please contact Dennis Poppe, NCAA assistant director of events, NCAA, P.O. Box 1906, Shawnee Mission, Kansas 66222.

#### NEWS RELEASE October 28, 1977

- Manufacturers Ad Hoc Committee.* Manufacturers of football helmets which belong to NOCSAE have formed an ad hoc committee to assist in the surveillance of the NOCSAE Football Helmet Standard. The committee will assist the NOCSAE Board of Directors in the enforcement of standard, insure the quality control of helmets being manufactured and any problems relating to the standard.
- Neck Injury Study.* NOCSAE has been conducting research on force-indicating neck models to determine tolerance levels. A mechanized blocking and tackling apparatus is being used in the tests to determine the tolerance levels of the neck model. Results from the tests are expected to provide more information concerning mechanisms of neck injuries and how to prevent such injuries.
- Revised NOCSAE Football Helmet Standard and Certification Lists.* Copies of the revised NOCSAE Football Helmet Standard and the certified football helmet list are available upon request. To receive a copy of the standard or certification list contact Dennis Poppe, NCAA assistant director of events, P.O. Box 1906, Shawnee Mission, Kansas 66222.

#### NEWS RELEASE November 15, 1977

- Manufacturers Ad Hoc Committee.* As stated in the October 28 NOCSAE Newsletter, football helmet manufacturers who have adopted the NOCSAE Football Helmet Standard have formed an ad hoc committee to assist in the surveillance of the NOCSAE Standard. The committee will assist Voigt Hodgson, director of the independent laboratory who will be conducting the NOCSAE tests on the helmets. The manufacturers will exchange helmet models and conduct tests to insure compliance with the Standard. This voluntary monitoring of the NOCSAE Standard will also provide for a quality control check on the various helmets being manufactured.
- New Injury Data.* Early results pertaining to athletic-related serious head and neck injuries during the 1977 football season indicate a decline in the number of injuries when compared to previous years. Although the season has not been completed, reports from various sources are encouraging.
- NOCSAE Ice Hockey Helmet Standard.* At the present time, NOCSAE is attempting to correlate data between the Canadian Standards Association's (CSA) helmet standard which is in effect and the proposed NOCSAE Standard. It is hoped the combination of data will result in the possible creation of an improved ice hockey protective headgear standard.
- Football Shoulder Pad Research.* NOCSAE is investigating the possibility of conducting research on the football shoulder pad. Because of tentative data which indicates an increase in the number of injuries to the shoulders, clavicles and upper arms, NOCSAE is considering the study of the shoulder pad. It is thought the increase in upper body injuries might be a result of recent changes in the football rules which have attempted to eliminate the use of the head in blocking and tackling and as a result the arms and shoulders are being used to a greater extent.

#### UNITED STATES OLYMPIC COMMITTEE:

It was indicated that there was nothing, at this point, to make a definitive report on other than factors previously discussed in relation to other items considered by the Board.

#### SCHERING SYMPOSIUM:

Mr. Davis indicated that Mr. Larry Schmeidler no longer was in the same capacity and that Mr. Ray Fagan was now performing this function.

Mr. Davis, in reply to a request for other topics to be programmed in connection with the Schering Symposium, was given the suggestion of perhaps a program on basic pharmacology for the athletic trainer (medications to use for certain injuries, medications not to use and in what combinations.)

A suggestion was further made that perhaps a program on skin problems would likewise be in order, as well as a possible program on the knee.

#### COUNCIL ON POSTSECONDARY ACCREDITATION:

Mr. George called attention to the information submitted, indicating that the previous meeting of this Association, while it was a good meeting, was, nevertheless, a bit discouraging.

November 28, 1977

#### RE: COPA - COUNCIL ON POSTSECONDARY ACCREDITATION Meeting

From: Frank George

On Nov. 22, 1977, Otho Davis, Phil Donley and I met with Jim Phillips of COPA in Washington, D.C. The subject of the meeting was the N.A.T.A. petitioning COPA to become the recognized accrediting body of athletic training curricula. Mr. Phillips opening remarks were discouraging but necessarily so. He stated this is a bad time to be applying because the COPA Board is fairly evenly divided regarding recognition of new certifying bodies. COPA is also in the process of strengthening their regulations. The recognition process will now take longer than it did. Another reason why this is a bad time is that school administrations and executive officers are opposing the high cost of accreditation. There is also a trend for accreditation to be done through and with umbrella type groups. The N.A.T.A. must document why it cannot and should not fit under one of these groups.

Mr. Phillips thought that because of new Federal Trade Commission investigations it is good to have more than one procedure for certification. However no specifics were discussed.

Phil Donley will be submitting all materials necessary for application prior to January 1, 1978.

#### NATIONAL ATHLETIC INJURY ILLNESS REPORTING SYSTEM

NAIRS is fast becoming more potent as a data gathering, information disseminating tool to the world of athletic safety. As correspondence from Dr. Ken Clarke has indicated at least one recent precedent setting legal decision has been made with the help of NAIRS data on football helmets vs. injury. This will perhaps help stem the once seemingly rampant, snowballing success of suits being brought against helmet manufacturers. Of course the data used was gathered by volunteer recorders, (trainers) and these trainers are to be commended for their perseverance and dedication.

As the months go by the preponderance of new information (70 university-colleges reporting football data for 1977) being fed into the computer at Penn State by NATA recorders will make the system an even more valuable tool for the trainer to use in decreasing the injury rate at any given school.

The ability of the retrieval system is a sleeping giant with respect to what information can be extracted in the area of injury trends and prevention, such as injury vs. equipment or injury vs. coaching techniques.

While a great many individual athletic trainers are already supporting NAIRS by their voluntary recording efforts, the NATA itself can be of valuable assistance by financially supporting NAIRS through a grant to support the on going data gathering process that is so valuable to the Sports Medicine community.

#### NATIONAL HEAD AND NECK INJURY REGISTRY

December 1, 1977

Gentlemen:

Let me first thank you and all the Athletic Trainers throughout the country for your continued support in the National Football Head and Neck Injury Registry. As I'm sure you are all aware, this is the third year we have jointly conducted this registry. Letters are being sent out this year, December 8, 1977, approximately 42000 letters will go to high school administrators, athletic trainers, and other individuals involved in Sports Medicine.

We hope to have this years tabulations completed by March. We will be most happy to present it to the National Athletic Trainers Membership at their annual meeting this year in Las Vegas.

We feel that we have gathered some significant data and are hopeful that this information can be used, reducing the number of catastrophic head and neck injuries in tackle football.

Sincerely,

Joseph S. Torg, M.D.  
Director

#### PRESIDENT'S CHALLENGE AWARD:

The Board was informed that Dr. Godfrey had returned to NATA the \$500 in connection with a research project.

There then followed a general discussion concerning the disposition of these funds, with the general consensus being that this be used in the future for research and injury when that group came up with a project or, in the future, whatever meets the desires of the Board of Directors.

#### NATIONAL EXPLORER OLYMPICS:

Mr. Davis indicated conversation with this organizing regarding involvement of athletic trainers in their programs, indicating that they welcomed this but did not have money to defray expenses to the site nor did they have funds to pay salaries but, on the other hand, they did desire to have trainers come and work with them. Mr. Davis further commented on the concept that NATA support or cooperate with this organization.

After a brief discussion, it was the consensus of the Board that it supported the idea of cooperation with this organization.

#### AMERICAN ORTHOPEDIC SOCIETY FOR SPORTS MEDICINE:

Mr. George indicated the offer of assistance from this organization to the NATA and his reply to them indicating the need for trainers in the high schools, the need for licensure and any assistance to the NATA in this regard would be deeply appreciated.

He further indicated this matter was now being held in abeyance pending correspondence from the organization.

Mr. George also called attention to the recommendation for development of a workshop with the Sports Medicine Committee of this organization.

MOVED #8 (seconded #5 and carried 10-0) that the Board approve further exploration of the idea of the development of a workshop with the Sports Medicine Committee of the American Orthopedic Society to consider the problem of meeting the medical needs of high school athletes, with Dr. Ellison, the Chairman of the Sports Medicine Committee.

#### REORGANIZATION OF THE NATA:

Mr. George called attention to a letter received from Mr. Skip Vosler concerning reorganization of the NATA structure. A lengthy discussion ensued as to advantages and disadvantages relative to restructuring, with a motion by District 4 being offered that a study of the whole matter be undertaken for later report, which motion was declared dead for lack of a second.

The Board, at the present time, not being in unanimity as to any type of action to be taken relative to this matter, further discussion was then dropped and the Board moved on to consideration of other business.

#### LIABILITY INSURANCE:

Mr. George called attention to the present cost of this insurance, indicating, in his opinion, it was very, very reasonable for the benefits conveyed. There being no further comments or actions on the part of the Board concerning this particular item, the Board continued with consideration of the next agenda item.

#### CALIFORNIA NEWSPAPER ARTICLE:

Mr. George called attention to the background information concerning this matter, following which the Board, by general consensus, indicated there was nothing further to be done inasmuch as the article had been published and those reading it had already formed their own opinions and conclusions.

#### DISTRICT NO. 2 - REVIEW OF ARTICLE "Are Athletic Trainers a Luxury or a Necessity"?

Attention was called to the publication of this article and several comments regarding both good and bad points made therein, with the consensus of the Board being that inasmuch as the article had been published, there was nothing the Board could do by way of alleviating any complaints or bad feelings regarding it.

#### DISTRICT NO. 2 - STATE REPRESENTATIVE COUNCIL'S ROLE AS AN ADVISORY GROUP TO THE DISTRICT DIRECTOR:

Mr. Davis indicated this was purely within the option of each individual district and there was no action the Board could take relative to this matter.

#### REQUEST TO PUBLISH "MODEL ACT" OF LICENSURE:

Attention was called to the request of Mr. Behnke to publish the Model Act concerning licensure, it being further indicated that present authorization provided for distribution of these to state licensing representatives only.

MOVED #7 (seconded #10 and carried 9-0-1) #9 abstained) that the Board grant permission to Mr. Behnke for the publication of this material per his request, with Mr. Davis and Mr. George to review the material before publication.

#### EFFECTS OF BEE POLLEN AS AN ERGOGENIC AID:

MOVED #1 (seconded #10 and carried 8-2) #1 and #9 opposed) that the Board approve the revised resolution, namely that it opposes promotion of bee pollen as a physiological, ergogenic aid for the improvement of athletic performance.

#### A Resolution by the National Athletic Trainers Association on the Effects of Bee Pollen as an Ergogenic Aid.

WHEREAS,

A significant controversy exists in the community of sports and athletics regarding the value of Bee Pollen as an ergogenic aid, and

WHEREAS,

The Drug Education Committee of the National Athletic Trainers Association has participated in scientific research, over a two-year period, regarding the efficacy of Bee Pollen as an ergogenic aid in sports, and

WHEREAS,

The conclusions of these studies conducted at Louisiana State University indicate that the use of Bee Pollen provided no significant benefit to the athlete as an ergogenic aid, therefore,

BE IT RESOLVED,

The National Athletic Trainers Association is on record that it opposes the promotion of Bee Pollen as a physiologic ergogenic aid for the improvement of athletic performance.

#### INSTITUTIONAL MEMBERSHIP FEE:

Following a brief discussion, it was the general consensus of the Board that no action at the present time be taken toward the promulgation of an institutional membership fee.

#### JOINT DUES AND ASSESSMENTS FOR HUSBAND AND WIFE:

Mr. George indicated there was no present mechanism for this procedure, following which Mr. Malacrea presented his reasons for the presentation of this matter for Board consideration, he concluded his remarks by indicating that this matter had been presented for further thinking by the Board members.

The Board then moved on to other items of business.

#### RESPONSIBILITY OF HOST TRAINERS:

Mr. Malacrea called attention to the difficulties expressed to him concerning the proper financial and other courtesies extended to host trainers. Following indication by various Board members that these matters were being adequately handled in their respective districts, it was the general suggestion that Mr. Malacrea prepare a checklist relative to this item for their presentation to the Board for its consideration.

#### SUPPORTING STATEMENT FOR FOOTBALL HELMET MANUFACTURERS:

Mr. Malacrea presented a prepared statement regarding this matter, with the Board then adopting the suggestion of Mr. George, namely, that Mr. Malacrea type up this statement and forward it to Mr. George and that he, in turn, would present it to the attorneys for their comment and then place the matter back on the agenda for consideration at the next Board meeting.

#### WAIVER OF REGISTRATION FEE:

MOVED #8 (seconded #9 and carried 10-0) that registration fees for NATA members who are speakers at the 1978 Convention be waived.

#### GENERAL ADMINISTRATIVE MATTERS:

MOVED #8 (seconded #4 and carried 10-0) that if names on the membership application form do not include first name, middle initial and last name, that they will not be accepted.

MOVED #5 (seconded #10 and carried 10-0) that any check dated six months or longer will not be accepted for processing.

MOVED #5 (seconded #7 and carried 10-0) that all newly classified members must be in the correct membership class or the application will be returned for clarification to the District Secretary by the National Office.

#### MISCELLANEOUS:

Various other agenda items included on the agenda but not mentioned specifically in these minutes either had no report involving them or, after very brief discussion, were not formally acted upon.

There being no further business, whereupon, in accordance with regular motion, the business meeting was at four o'clock a.m. adjourned on January 9, 1978.

# Guide to Contributors

*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. Six 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.

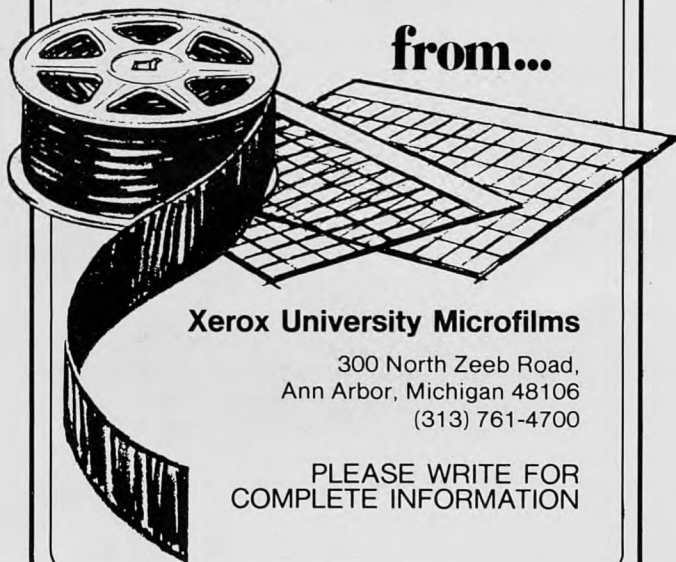
6. For reprints, authors are authorized to reproduce their material for their own use or reprints can be reproduced at time of initial printing if the desired number of reprints is known.

7. Unused manuscripts will be returned, when accompanied by a stamped, self-addressed envelope.

Address all manuscripts to:

Clint Thompson  
Department of Athletics  
Michigan State University  
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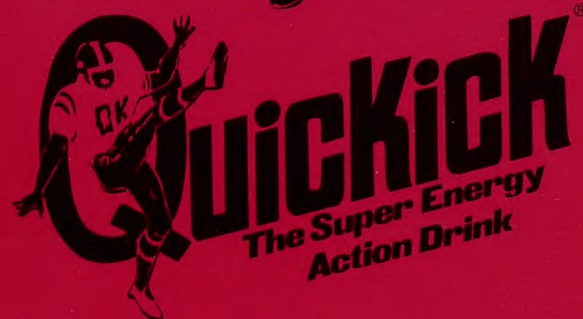
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