

Skyline College Sports Medicine

PE212 Prevention and Care of Athletic Injuries Lab

Clinical Education Competencies

Instructor: Jo Silken, ATC, Office Portable Classroom 3B, (650)738-4283, silken@smccd.edu
Fall Semester Hours M-F 12 noon to 6:30 PM

PE212 Prevention and Care of Athletic Injuries Lab class requires a series of clinical experiences consisting of competencies and proficiencies. Competencies and proficiencies will be obtained through a number of experiences in the classroom and lab setting. To complete the laboratory class, each student will need to have each competency checked off. Certified Athletic Trainers are the *only* individuals who can check off competence in each skill. Skill check off will include practice in labs and demonstration of competence. Students are responsible to spend time outside the classroom practicing to ensure skill competence.

Successful practice and then competence of each task must be demonstrated prior to skill performance. Demonstration of skill performance should be completed by the end of each unit..

DEFINITIONS:

Practice: Skill taught in class or lab and practiced either one-on-one with an ATC or peer, or in small peer groups.

Competency: Student demonstration of skill proficiency to ATC. This may occur in class, lab or internship classroom with an ATC. Competencies not signed off within one week of the end of each unit will get no credit towards final grade

Appropriate attire: Students should wear shorts and tennis shoes for all classes covering the lower extremities. Upper extremity classes require the student to be in a tank top, sports bra or other appropriate top which can provide exposure to the shoulder joint down to the hand.

GRADING:

| | |
|--|----------------|
| Demonstration progression of skill development in laboratory setting | 25 % of grade. |
| Competencies | 75 % of grade |

Student’s Name _____

Student ID # _____

Head ATC (ACI) Jo Silken, ATC _____
Print Name Signature Date

Assistant ATC Jeremy Nickoloff, ATC _____
Print Name Signature Date

PE212: Prevention and Care of Athletic Injuries Lab
Competency Check Sheet

All skills must be viewed, dated and initialed. Peers can “check off” Practice, an ACI must check off Competency.

Separate sheets are provided for evaluation skills of head injuries. Each evaluation should be completed for practice and competency. You must have an 80% on the competency.

| | Competency | Practice | Competence |
|--|-------------------|-----------------|-------------------|
| ♦ Arch | | | |
| ♦ Longitudinal Arch | | _____ | _____ |
| ♦ Transverse Arch | | _____ | _____ |
| ♦ Great Toe | | | |
| - Valgus support | | _____ | _____ |
| - Varus support | | _____ | _____ |
| - Hyperextension/flexion | | _____ | _____ |
| ♦ Ankle | | | |
| - Closed Basketweave Taping | | _____ | _____ |
| - Open basketweave Taping | | _____ | _____ |
| - Basic preventative –inversion | | _____ | _____ |
| - Post-injury wrap with horseshoes | | _____ | _____ |
| - Achilles Taping | | _____ | _____ |
| ♦ Shin Taping | | | |
| - MTSS Circumferential taping | | _____ | _____ |
| ♦ Quadriceps/Hamstring wrapping | | _____ | _____ |
| ♦ Adductor/Abductor wrapping | | _____ | _____ |
| ♦ Hip flexor/extensor wrapping | | _____ | _____ |
| ♦ Thigh (Hamstring/Quadriceps) padding | | _____ | _____ |

| | | |
|--------------------------------------|-------|-------|
| ♦ Knee | | |
| - Valgus/Varus support (MCL/LCL) | _____ | _____ |
| - Hyperextension | _____ | _____ |
| - Compression Wrap | _____ | _____ |
| ♦ Thumb support | | |
| - Hyperextension (Tear Drop) | _____ | _____ |
| - Hyperflexion (Figure 8) | _____ | _____ |
| - Combination (Abduction) | _____ | _____ |
| - Check Rein | _____ | _____ |
| ♦ Fingers | | |
| - Buddy taping | _____ | _____ |
| - Flex/ext/radial/ulnar deviation | _____ | _____ |
| - Splinting | _____ | _____ |
| - MC-P Hyperextension | _____ | _____ |
| ♦ Forearm splints | _____ | _____ |
| ♦ Elbow | | |
| - Hyperextension Taping | _____ | _____ |
| - Varus/valgus Taping | _____ | _____ |
| - Wrapping | _____ | _____ |
| - Hyperextension Taping | _____ | _____ |
| ♦ Wrist | | |
| - Ulnar/radial deviation taping | _____ | _____ |
| - Flexion/extension taping | _____ | _____ |
| - Wrist/hand combination taping | _____ | _____ |
| - Wrapping | _____ | _____ |
| - Bracing | _____ | _____ |
| ♦ Hand | | |
| - Taping | _____ | _____ |
| - Wrapping (hand & wrist combined) | _____ | _____ |
| - Bracing | _____ | _____ |
| - Padding | _____ | _____ |
| ♦ Shoulder: | | |
| - Glenohumeral Spica (wrapping) | _____ | _____ |
| - Acromioclavicular (wrap /pad) | _____ | _____ |
| ♦ Cervical support | _____ | _____ |
| ♦ Rib padding/support | _____ | _____ |
| PADDING | | |
| ♦ Friction pad | _____ | _____ |
| ♦ Bony prominence | _____ | _____ |
| ♦ Muscle contusion | _____ | _____ |
| ♦ Checkrein device | _____ | _____ |
| ♦ Hard immobilization splint | _____ | _____ |
| FRACTURE TESTS | | |
| ♦ Palpation | _____ | _____ |
| ♦ Compression (axial and transverse) | _____ | _____ |
| ♦ Percussion | _____ | _____ |
| ♦ Vibration | _____ | _____ |

EMERGENCY ASSESSMENT

- ♦ Emergency Plan understanding
 - Demonstration of proper preparation _____
 - Knowledge of procedures _____
 - Proper blood borne pathogen disease prevention and disposal _____
- ♦ CPR certification (optional) _____
- ♦ First Aid Certification
 - Airway management _____
 - Patient assessment _____
 - Hemorrhage control _____
- ♦ Vital signs
 - Pulse _____
 - Consciousness (Glasgow Coma Scale) _____
- ♦ Shock _____
- ♦ Respirations: Identify the following breathing patterns and signs and symptoms
 - Apnea _____
 - Tachypnea _____
 - Dyspnea _____
 - Braypnea _____
 - Hyperventilation _____
 - Obstructed Airway _____
- ♦ Diabetic Emergencies _____
- ♦ Fracture
 - Proper “packaging” for transportation _____
- ♦ Dislocation
 - Proper “packaging” for transportation _____
- ♦ Spinal Cord Injury
 - Proper spine board techniques _____
 - Proper stretcher & sport chair use _____
 - Proper stabilization techniques _____
- ♦ Splint
 - Vacuum splint _____
 - Moldable splint (Sam splint) _____

REQUIRED**EMERGENCY ASSESSMENT/TREATMENT**

| | | |
|--|-------|-------|
| ♦ Check surroundings for physical and/or environmental hazards | _____ | _____ |
| ♦ Triage | _____ | _____ |
| ♦ Heart Rate | _____ | _____ |
| ♦ Respirations | _____ | _____ |
| ♦ Blood Pressure | _____ | _____ |
| ♦ Temperature | | |
| - Oral | _____ | _____ |
| - Axillary | _____ | _____ |
| - Tympanic | _____ | _____ |
| ♦ Skin | | |
| - Circulation | _____ | _____ |
| - Color | _____ | _____ |
| - Feel | _____ | _____ |
| ♦ Open Wound Management | | |
| - Open & Closed wound | _____ | _____ |
| - Control Bleeding | _____ | _____ |
| - Clean and debride | _____ | _____ |
| - Apply superficial skin closures | _____ | _____ |
| - Apply and remove gloves and other protective equipment | _____ | _____ |
| - Properly dispose of biohazardous waste | _____ | _____ |
| - Apply appropriate dressings | _____ | _____ |
| ♦ Heat Illnesses – Evaluate and Manage the following | | |
| - Heat exhaustion | _____ | _____ |
| - Heat stroke | _____ | _____ |
| - Heat Syncope | _____ | _____ |
| - Hypothermia | _____ | _____ |

PHYSICAL EVALUATION

| | | |
|---|-------|-------|
| ♦ Snellen Chart | _____ | _____ |
| ♦ Height | _____ | _____ |
| ♦ Weight | _____ | _____ |
| ♦ Skin (blemishes, rashes, moles, etc.) | _____ | _____ |

EQUIPMENT, PADDING & BRACING

| | | |
|---------------------------------------|-------|-------|
| ♦ Crutch Fitting | | |
| - Instruct patient on use of crutches | _____ | _____ |
| ♦ Cane Fitting | | |
| Instruct patient on use of cane | _____ | _____ |

PE212: Prevention and Care of Athletic Injuries Lab

UNCONSCIOUS ATHLETE

| Competency | Practice | Competence |
|---|-----------------|-------------------|
| Summon Help - activate emergency protocol | _____ | _____ |
| <i>History</i> | | |
| What was the mechanism of injury? | _____ | _____ |
| How long was the person unconscious (time)? | _____ | _____ |
| Has the patient had previous CNS injuries or a history of CNS difficulty? | _____ | _____ |
| <i>Suspected Cervical Injury:</i> | | |
| · Immobilize head | _____ | _____ |
| · Check breathing/airway | _____ | _____ |
| - Begin rescue breathing if necessary | _____ | _____ |
| · Arouse victim verbally | _____ | _____ |
| · Check circulation | _____ | _____ |
| - Begin CPR if necessary | _____ | _____ |
| · Transport to hospital | _____ | _____ |
| Neurological check | | |
| · Vital signs | | |
| - Pulse (base line) | _____ | _____ |
| - Respiration's (base line) | _____ | _____ |
| · Will awaken to | | |
| - Name | _____ | _____ |
| - Shaking | _____ | _____ |
| - Light pain (pinch) | _____ | _____ |
| - Strong pain -(sternal rub) | _____ | _____ |
| · Pupils | | |
| - Size on right/left | _____ | _____ |
| - PEARL | _____ | _____ |
| · Nonverbal reaction to pain (pinch, rub,etc) | | |
| - Appropriate | _____ | _____ |
| - Inappropriate | _____ | _____ |
| - None | _____ | _____ |
| · Posturing - Decerebrate/Decorticate | _____ | _____ |
| Neurological check if awakens | | |
| · Conscious and | | |
| - Oriented x four | _____ | _____ |
| - Disoriented | _____ | _____ |
| - Restless (inability stay still) | _____ | _____ |
| · Speech | | |
| - Clear | _____ | _____ |
| - Rambling | _____ | _____ |
| - Garbled | _____ | _____ |
| - Combative | _____ | _____ |
| - None | _____ | _____ |
| · Ability to move right/left upper extremities | _____ | _____ |
| Ability to move right/left lower extremities | _____ | _____ |

