

From: Tom G Santo

Subject: Trainers

Mr. Miller,

I wanted to drop you a note and have it on record with my continuing displeasure with the decision made not to have athletic trainers for our schools.

We are now three and a half weeks into the fall sports season and a number of issues have already occurred.

We have no one qualified in our buildings and on our staffs to handle some of these issues. In just events I have covered I have witnessed what I feel are three major injuries. I feel in each instance the injuries were not handled properly.

First, there was a leg injury during a football scrimmage. The coach was working on the player when a local veterinarian came out of the stands to work on the player. He said I'll take over. The coach backed off. This player has still not been cleared to play.

Second, there was a back injury to a football player and the coach comes onto the field and flips the player on his back before asking what was wrong. The player screamed and said "my back".

Third, there was another leg injury which appeared to possibly be a broken ankle and the coach said to other player "pick him up and get him to the sidelines". I don't believe this is how we want to handle injuries period.

We have a number of "minor" injuries that occur each day which are just passed by because no one is monitoring them. It seems we have a more than usual number of athletes missing practices and games because they are not being properly cared for medically. I for one would like to have the trainers back immediately.

In three weeks I have taped, bandaged, iced, wrapped and impact tested more kids that I have in the past ten years.

I see a number of issues arising in the near future.

Who will administer Impact Testing?

Who will read Impact Test Results?

Who will be the go between from the Doctor and the Coach and understand it medically?

Who will allow athletes to return to play? You must have certification.

Who will administer weight management for wrestling?

Who will log the information to the state for wrestling weight management?

Who will over see rehab for our athletes coming back from injuries?

Who is going to determine the severity of any type of injury and allow a player to participate or not? How about the coach, the parents, an aunt or uncle who is an EMT?

These are important question that need to be answered. "Just call the ambulance" is not the solution.

I understand a soccer official went down with heat exhaustion last weekend in Warren and there was no medical coverage. I was told that there were a number of other heat related issues last weekend which may have been avoided with trainers at our events. It is embarrassing to have one of our athletes go down and always have to rely on trainers from other schools to help us out and our home events.

These are just a few concerns I have and I hope someone will come to their senses and get our trainers back.

I don't believe two is even enough. There should be a trainer in each school.

Thank you for the consideration.

Tom

From: Jeff F White
Subject: Trainers

We badly need the trainers back. By far the number one reason is student safety. The school district has made it a point over the years to spend money for student safety (example: bus ramp at Beaty) but cut the trainers who work with the vast majority of the students who attend the WCSD.

- Parental involvement: Parents are making medical decisions where in the past the trainer was there to help them.
- Coaches: Coaches are being put in spots to also make decisions and they are not properly trained to do this.
- Working with visiting teams' athletes
- Injury prevention
- Post injury evaluation
- Post injury recovery
- Concussion recognition
- Concussion evaluation
- Impact baseline tests
- Impact test for post concussion
- Evaluation of the Impact tests
- Heat Index testing
- Wrestling Weight Standards (Hydration Tests)
- Taping
- Injury recognition and evaluation
- Recognition of staph infections
- Keeping athletes sidelined when they should be to stop further injury
- Making sure athletes are hydrated
- First Aid
- Able to use the Heart Defibrillator machine
- Allowing athletes to perform at their best by having the confidence that they are healthy
- Keep the WCSD from a law suit that is bound to happen if we continue to not have trainers

From: Jeff F White
Subject: Re: Trainers

After going to my meeting today and listening to the speaker from the PIAA I have thought of other reasons why the trainers are going to be so important.

Senate Bill 200

- This bill is dealing with concussions at the high school level and will make it even more important to have a Trainer on staff who can help to give clearance to those student athletes who exhibit concussion-like symptoms

- The trainer should be here to help make sure all coaches are completing their mandatory training courses and help coaches to understand the materials in this training course.
- The trainer should be involved to help implement this new law and to protect our coaches and school district from liability

House Bill 1610

- This bill is very similar to Senate Bill 200 but deals with sudden cardiac arrest.
- Once again it is going to be very important for the WCSD to have a trainer to help navigate our way through both of these bills and to keep our players and coaches safe.

Other thoughts:

- upkeep of AED's that are used in the district
- setting up of medical kits for each sport specifically
- keeping track of a player's medical/injury history
- how to care for an athlete with a spinal injury at football/soccer /wrestling
- ability to look at a preparation physical and understand a student athlete's needs and be able to note that so if something occurs during the season they are prepared for it
- the trainer is able to help with both the heat and the cold weather (Fall season) and help the coaches develop a safe practice schedule
- the trainer understands the safety issues dealing with strength and conditioning and can help develop a proper plan for our student athletes
- Trainers can help recognize student athletes who are suffering from eating disorders and help the coach develop a safe practice plan for these athletes.
- One of the big things today is the use of Nutritional Supplements among student athletes. A trainer is trained to see a student athlete who may be having trouble with these supplements and can detail an education program to help these athletes
- Trainer can set up an education plan to inform our coaches of the signs of anabolic steroids and can also set up an education program for our athletes.
- Trainers can work with our coaches in Football, Baseball and Softball with making sure that our athletes' protective equipment is properly fitted. This will help protect the school district from liability issues.
- Working with kids that have asthma
- skin conditions especially in wrestling and football

Trainers

As a first year AD, I have witnessed first hand a need for an athletic trainer. For starters, it is an embarrassment to tell other athletic directors we do not have a trainer, you must provide your own if an injured player requires medical attention. With concussions on the rise, and in a district that takes steps to prevent liability, we are opening ourselves up to legal questions by not providing adequate diagnoses for concussion symptoms. We continue to ask more and more of our coaches, and in addition, it becomes harder and harder to find and keep good coaches, and now we are adding the entire medical and injury treatment responsibilities to our coaches. This is taxing on them. Predicting what will happen in the winter sports season, I do not have an answer as to who will provide the required hydration testing to our wrestlers because none of our people in the building are qualified. This is a service that was performed by medical trainers. And finally, we had a situation in a large county football game where an athlete was legitimately injured. I witnessed first hand a shell shocked coach and team because nobody knew how to treat the individual. This injury occurred in front of over a thousand people. The ambulance was eventually called in but asking the coach to treat an injured player was not fair to him and in addition, the coach had no medical background to treat the player. Some have argued "we do not need a trainer; we did not have them in the old days." That is true, however with a word of caution, most schools were associated with a team doctor who traveled with or covered the sports teams. Finally, trainers are not only beneficial for dealing with injury, but also proactive in preventing injury. They are a versatile and valuable asset that in today's world is synonymous with a first class operation.

Sincerely,

Joe Errett
Youngsville H.S.

Concerns

In the event trainers are not funded, a protocol should be developed through Mr. Miller and the AD's on how to address, diagnose, and react to injury without an athletic trainer.

From: Corey B Copley <copleyc@wcsdpa.org>

Subject: Need for Trainers

I cannot think of anything new or different than has already been said or done. I have attached previous documents that justify and/or rationalize the need for trainer services.

Our need is no greater today than yesterday. However, the loss of our trainers has subjected our coaches and school district to greater liabilities and lessened the quality of care we provide our student-athletes. In some instances we have jeopardized the safety of those athletes.

Corey Copley
Teacher of Social Studies
Athletic Director
Sheffield Area Middle High School

*Office of
Athletics and Co-Curricular Activities*

MEMORANDUM

TO: Personnel/Athletic and Co-Curricular Activities Committee

FROM: John N. Werner
Supervisor of District-Wide Athletics and Co-Curricular Activities

RE: Justification of Contracted Certified Athletic Trainer Services - A

DATE: May 1, 2008

Please allow me to state that in my opinion, the services of a Certified Athletic Trainer (ATC) are absolutely essential to our athletic program. Some of the services they provide to our student-athletes are:

- Consultation / Advice
 - WCSD Accident Report Form
 - Care of Injured Player item in our Athletic Employees' Handbook
 - Development and Implementation of an Emergency Action Plan at each of our Secondary Schools
 - Formulate a revised procedure for dealing with HIPAA Option B student-athletes
 - MRSA education and prevention
 - Herpes education and prevention
 - TBI in-service
- Administer ImPACT Baseline and Post Concussion tests
- ImPACT consultation with UPMC
- Herpes evaluation
- StaphASeptic application
- NWCA weight control evaluator
- Injury
 - Prevention
 - Treatment
 - Referral
 - Rehabilitation
- Make medically based return-to-play decision without conflict of interest
- Easy access to expert medical care
- Immediate assessment and treatment thus reducing severity and rehabilitation time
- Students can remain in school rather than travel to a rehab clinic at our hospital
- Injury and illness prevention education
- Assist in administration of Athletic Physicals

It is true that our coaches are responsible to treat injured athletes in many instances. Our trainers do provide some in-service training to our coaches. And our trainers are on call and occasionally are available to respond to or at least consult on an injured athlete. However, our coaches are not required to have even basic first aid training. Some have had Red Cross certification in the past but very few are currently certified.

Our coaches do contact emergency personnel when serious injuries occur. I do not have average response time to our various athletic venues. However consider that outside the City of Warren emergency service is provided by volunteer ambulance services. Even with the most fortuitous circumstances, it takes over 15 minutes to respond to an emergency. It could take significantly longer. When tending to an injured student-athlete that can seem very long.

One additional thought: Consider the difficulty explaining to a parent whose child has been seriously injured why we no longer provide the services of a Certified Athletic Trainer. We had found their services important enough to double our ATC coverage in August of 2007, but now we have decided that we no longer need their expertise. There are many frightening scenarios we could all imagine that our coaches are simply not trained to handle. Waiting for emergency personnel to arrive while a student-athlete lies on the ground or court can be excruciating. Please consider extending our contract with Warren General Hospital for our current Certified Athletic Trainer services. Thank you.

JW/wn

*Office of
Athletics and Co-Curricular Activities*

MEMORANDUM

TO: Personnel/Athletic and Co-Curricular Activities Committee

FROM: John N. Werner
Supervisor of District-Wide Athletics and Co-Curricular Activities

RE: Justification of Contracted Certified Athletic Trainer Services - B

DATE: May 1, 2008

Please allow me to relate two extreme cases of emergency care administered to an injured athlete I have witnessed.

- In an incident witnessed during my coaching tenure with the WCSD I observed a coach tending to an injured football player. The player had sustained a blow to the head and was complaining of head and neck pain. The coach broke an ammonia capsule (These have since been removed from all of our medical equipment kits.) and held it under the player's nose. The boy was startled, shook his head violently and eventually sat up and walked off the field. The boy was fine but I cannot imagine the damage that would have been done had he had a neck injury.
- In another incident at the other end of the spectrum, a student-athlete was injured in an athletic contest. In this case a helicopter was actually flown to one of our schools and transported the player to an emergency room. The student was in school the next day. While I certainly did not criticize the decision to call for emergency help; perhaps air transport was more extreme than necessary.

The services of a licensed certified Athletic Trainer would help avoid circumstances such as these. Even if they are not present at all events, they are at half of our facilities at almost any given time and are always available for immediate consultation.

JW/wn

*Office of
Athletics and Co-Curricular Activities*

MEMORANDUM

TO: Personnel/Athletic and Co-Curricular Activities Committee

FROM: John N. Werner
Supervisor of District-Wide Athletics and Co-Curricular Activities

RE: Justification of Contracted Certified Athletic Trainer Services - C

DATE: May 1, 2008

Please see below key statements from documents in support of maintaining Certified Athletic Trainer positions in all scholastic athletic programs. The associated links will take you the document in which the statements are found.

- National Athletic Trainers Association -

...The recognition and treatment of injuries to student athletes must be immediate. ... Therefore, it is the position of the National Athletic Trainers' Association that all secondary schools should provide the services of a full-time, on-site, certified athletic trainer (ATC) to student athletes.

- <http://www.nata.org/statements/official/secondaryschool.pdf>

- American Medical Association -

The AMA believes that: (1) the Board of Education and the Department of Health of the individual states should encourage that an adequate Athletic Medicine Unit be established in every school that mounts a sports program; (2) the Athletic Medicine Unit should be composed of an allopathic or osteopathic physician director with unlimited license to practice medicine, an athletic health coordinator (preferably a NATABOC certified athletic trainer), and other necessary personnel; (3) the duties of the Athletic Medicine Unit should be prevention of injury, the provision of medical care with the cooperation of the family's physician and others of the health care team of the community, and the rehabilitation of the injured; ...

- http://www.nata.org/employers/ss/ama_recommendation.pdf

- American Academy of Family Physicians -

... "The AAFP encourages high schools to have, whenever possible, a BOC certified or registered/licensed athletic trainer as an integral part of the high school athletic program." ...

- <http://www.aafp.org/online/en/home/policy/policies/s/athletictrainhsathletes.html>

- **Consensus Statement from members of:** American Academy of Family Physicians, American Academy of Orthopaedic Surgeons, American Academy of Pediatrics, American Medical Society for Sports Medicine, American Orthopaedic Society for Sports Medicine, American Osteopathic Academy of Sports Medicine, American Physical Therapy Association, American Public Health Association, Emergency Medical Services, International Academy for Sports Dentistry, National Association of School Nurses, National Association of Secondary School Principals, National Athletic Trainers' Association, National Federation of State High School Associations, National Interscholastic Athletic Administrators' Association, National Safety Council, The President's Council on Physical Fitness and Sports, -

The athletic health care team may be comprised of appropriate health care professionals in consultation with administrators, coaches, parents and participants. Appropriate health care professionals could be: certified athletic trainers*, team physicians**, consulting physicians, school nurses, physical therapists, emergency medical services (EMS) personnel, dentists and other allied health care professionals. ...

- http://www.nata.org/statements/consensus/Consensus%20Statement_Final%20Version_Sept02.pdf

*Office of
Athletics and Co-Curricular Activities*

MEMORANDUM

TO: Personnel/Athletics and Co-Curricular Activities Committee

FROM: John N. Werner
Supervisor of District-Wide Athletics and Co-Curricular Activities

RE: Trainer Justification

DATE: May 28, 2008

Please find below area schools and the Athletic Trainer who provides ATC services to their student-athletes.

<u>School</u>	<u>Trainer</u>	<u>School</u>	<u>Trainer</u>
Cambridge Springs	Heather Wheeler	Linesville	Paul Van Dusen
Cathedral Prep	Keith Grubbs	McDowell	Paul Endres
Cochranon	Mike Carr	Maplewood	Heather Johnson
Commodore Perry		Meadville	Brad Schnauber
Conneaut Lake	Mary Beth Jacobs	Mercer	Sue Mehallick
Conneaut Valley	Mike Burns	Mercyhurst Prep	Beth Nichols
Corry	Mike Fedyshir	North East	Erin Terry
East	Lynn Chrisman	Northwestern	Amy Smith
Farrell	Rocky Morris	Oil City	Mel Wenmoth
Eisenhower	Kari Morales	Reynolds	Steve Waleff
Central	David Marks	Saegertown	Chris Greco
Fairview	Nicole Parker	Seneca	Lisa Locke
Ft. LeBoeuf	Bob Barton	Sharon	Ryan Fagley
Franklin	Becky Barnes	Sharpsville	Tom Martin
General McLane	Rob Kennerknecht	Slippery Rock	Jennifer Toy
George Junior	Cindi Hall	Strong Vincent	Josh Hoffman
Girard	Michele Desser	Titusville	Becky Hasbrouck
Greenville		Union City	Stacey Quirk
Grove City	Trish Caton	Villa Maria	Kristen Tome
Harbor Creek	Derek Chew	Vision Quest	
Hickory	Tammy Thomas	Warren	Andrea Shene
Iroquois	Bob Dixon	West Middlesex	Mark Zaccone
Jamestown		Wilmington	Brandy Sanford
Kennedy	Rotates SRMC	Youngsville	Kari Morales
Sharon	Rotates SRMC		
Lakeview	Dan Braatz		

JNW/wm

*Office of
Athletics and Co-Curricular Activities*

MEMORANDUM

TO: Personnel/Athletics and Co-Curricular Activities Committee

FROM: John N. Werner
Supervisor of District-Wide Athletics and Co-Curricular Activities

RE: Trainer Justification

DATE: May 15, 2008

The following testimonials were found on the National Athletic Trainers Association web site as cited at the end of the document.

Testimonials from employers and friends

Legislators and Regulators

As a state legislator concerned with health policy, affordable and accessible health care for all people is my primary concern. We must look for innovative solutions to providing health care because of the increasing shortages of nurses and other health care workers. One of the best ways to deliver health care services in the community is to better utilize certified athletic trainers. Athletic trainers are multi-skilled allied health care professionals who provide a unique combination of injury and illness treatment and rehabilitation with a substantial dose of injury prevention and general wellness.

- Representative Jerry Krummel Oregon House of Representatives, District
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Physicians, Hospitals and Clinics

"I am a Pediatrician who specializes in Pediatric Emergency Medicine and have a personal interest in Sports Medicine. I have had the opportunity to work closely with Athletic Trainers as the mother of three teenage athletes. I have relied on them to provide the guidance for rehabbing injuries, for taping joints and providing guidance to prevent re-injury. I have also witnessed Athletic Trainers on the sidelines/court side making quick assessments of severity of injury and initiating therapy to prevent further injury."

"Professionally I have had the honor of working with an experienced Athletic Trainer as part of our comprehensive Sports Medicine program. This athletic trainer is a vital part of the

assessment, therapeutic and educational team. Not only does she teach the patients/parents about the injury and rehab program but she plays a crucial part in the education of medical students, residents and fellows. Education of pediatric residents in the area of Sports Medicine is fundamentally important as more and more young children are becoming year-round athletes. Our Athletic Trainer provides the expertise we need when dealing with these young athletes."

-- Leslie Mihalov, MD, Chief of Pediatric Emergency Medicine, Associate Director, Pediatric Residency Program, Children's Hospital, Columbus, OH

"I am a primary care sports medicine specialist and I work in the high school, college and clinic settings in sports medicine. I have worked closely with athletic trainers for 18 years. Athletic trainers play an indispensable role in the care of athletes in all of those settings. In the high school setting, the athletic trainers are frequently the main point person in initially evaluating and treating sports injuries. Athletic trainers have to be well-versed in treating problems from blisters to life-threatening problems such as heat illness and cardiac arrest. The key component is preparation for the worst problems that can occur."

"Athletic trainers need to disseminate information in an understandable way for parents, athletes and coaches. They play an essential role in patient information in the world of sports medicine. They also oversee rehabilitation, appropriate strength conditioning and nutritional programs."

"In summary, athletic trainers are an essential part of the health care team in sports medicine. They play a central role both by their actions and their preparation."

-- Joe Congeni, M.D. Medical Director of Sports Medicine, Akron Children's Hospital, Akron, OH

"The educational background of a certified athletic trainer is the perfect preparation for assisting an orthopaedic surgeon. The knowledge of musculoskeletal anatomy, function and clinical experience in the diagnosis and treatment of musculoskeletal disorders is virtually unmatched, even amongst medical students. I believe that ATCs are the best physician extenders, and I use them in that role daily."

-- Ron Clark, MD, Valparaiso (IN) Orthopaedic Clinic

"I realized early on in my career that ATCs are the only health care professionals who devote their entire education and professional lives to taking care of active people. My patients experience excellent outcomes as a result of therapy provided by ATCs. My patients love working with them. ATCs are a value added service to my practice. I could not do without them."

- Thomas D. Kohl, MD, Family Practice Physician; Director, Sports Medicine, Comprehensive Athletic Treatment Center, Wyomissing, PA

<http://www.nata.org/consumer/testimonials.htm>

JW/wn

Mark Evans
640 Liberty Street
Warren Pa. 16365
May 9, 2008

To the Members of the Board of the Warren County School District:

I am the Head Coach of the Warren Boys Soccer Team and have coached in this position for the last 12 years. I am alarmed to hear that the board is considering the elimination of the school athletic trainer. I have found the access to and attendance of an athletic trainer at matches to be invaluable. I would have preferred to have to have spoken in person but I am abroad on holiday.

Soccer is a contact sport, a sport in which players must contest for the ball all the time, a sport in which the players will run at least five miles in a game while battling to win the ball and to keep it.

Our players practice very hard between matches. There will always be injuries in the course of a season during matches and at practice sessions. How these injuries are managed contributes significantly to the success of our program, and of any sports program.

There are many ways in which to judge an athletic program. Please consider this part of what I deem to be highly important and a success for the student athletes involved.

We have played a grueling 20-match season with two additional scrimmage games followed by play-off matches for the past 12 years that I have been the team's Head Coach. It is highly important to me, and I see this as significant achievement, that we have suffered over this long time frame, very few injuries that require further treatment away from the playing field. This has, I believe, been due directly to the quick and thorough diagnosis of any injuries that have been sustained. It is due to the correct treatment and then to the excellent follow up care provided by our trainers particularly Andrea Sheen. The care and prevention of injuries and keeping them minimal, is an important part of the way I evaluate the quality of this program.

There will always be injuries. Injuries will be picked-up during practices and during matches. Injuries will be sustained by our players and by visiting players. These injuries and the potential for injuries require the attention of a qualified professional trainer. I believe in order to have a successful, safe, and healthy program with injuries kept to an acceptable minimum, a trainer is needed.

Over the course of these last 12 years, in addition to the trainer attention noted, at my request, our teams have had the benefit of having the trainer address the various teams I have coached about numerous topics. These topics include: proper nutrition, the use of performance enhancing drugs, overall peak conditioning, and the dangers of heat stroke and how to avoid this condition. I have also had Andrea recommend proper stretching techniques, when needed.

The expertise I bring to this program does not nearly cover all of the professional expertise required to create and maintain a safe and successful program. All of my players and I, and I'm sure their parents, are comforted by knowing a trainer is in attendance and on call.

I ask that you continue to provide a trainer for our program and for all of the other programs covered. The continued well-being and safety of our student athletes should be of the highest importance. The presence and availability of a trainer helps to assure that.

Thank you.

Sincerely,

Mark Evans
Warren Area High School Boys Soccer Head Coach

*Office of
Athletics and Co-Curricular Activities*

MEMORANDUM

TO: Personnel/Athletics and Co-Curricular Activities Committee

FROM: John N. Werner
Supervisor of District-Wide Athletics and Co-Curricular Activities

RE: Trainer Justification

DATE: May 28, 2008

This is an excerpt from Section IV of the PIAA Handbook which discusses Sports Medicine.

GUIDELINES FOR MEDICAL COVERAGE FOR ATHLETIC EVENTS

The Governor's Council on Physical Fitness and Sports recommends the following guidelines for medical coverage for student-athletic events:

Equipment: Ice – O2; Scalpel; Epinephrine; Benadryl; Airway; Endotracheal Tube; Soft Collar; Spine Board; H.Slats, Kelly, Tourniquet; Chest Tube; 18 Gauge Needles; Tape; Air Splint, Cellular Phone

Collision (opponents may displace opponents) Sports:

Football, Ice Hockey (male), Lacrosse (male), Wrestling

Contest: Physician and at least one of the following: **Certified Athletic Trainer or Physician Assistant or Nurse Practitioner specifically trained in sports medicine.** Access within 2 to 5 minutes of phone line activation of emergency system (i.e. – ambulance – EMT + physician notification).

Practice: **Certified Athletic Trainer or Physician Assistant or Nurse Practitioner specifically trained in sports medicine.** Access within 2 to 5 minutes of phone line activation of emergency system (i.e. – ambulance – EMT + physician notification).

Contact (opponents may not displace opponents) Sports: Baseball, Basketball, Competitive Cheerleading, Cross Country, Field Hockey, Ice Hockey (female), Gymnastics, Lacrosse (female), Soccer, Softball, Swimming and Diving, Track and Field, Volleyball, Water Polo

Contest & Practice: **Certified Athletic Trainer or Physician Assistant or Nurse Practitioner specifically trained in sports medicine.** Access within 2 to 5 minutes of phone line activation of emergency system (i.e. – ambulance – EMT + physician notification).

Non-Contact Sports: Bowling, Golf, Rifle, Tennis Contest & Practice: Coach Certified in CPR, first aid, and basic care of suspected injuries. Access within 2 to 5 minutes of phone line activation of emergency system (i.e. – ambulance – EMT + physician notification).

Pennsylvania Department of Health • Governor's Council on Physical Fitness and Sports
January 2002/Revised June 2002 32

JNW/wn

September 9, 2011

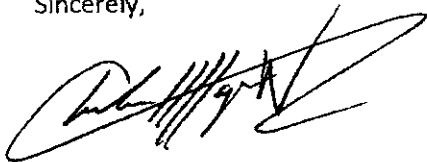
To whomever it may concern:

The purpose of this letter is to provide written record to my absolute conviction that the decision to not have an athletic trainer(s) at each and every football game in the district is dangerous and irresponsible. Football coaches, or any sports coaches, are not trained or able to provide accurate diagnosis and treatment of the many potential injuries that occur during sports.

A recent contest at Kane High School demonstrated just how important the presence of an athletic trainer is whenever two teams compete. During this Junior High Football game, two of our players were attended to by the athletic trainer on Kane's staff. In both instances the players were determined to have concussions and in need of immediate medical attention. The frightening part is that in both cases, if not for the presence of the athletic trainer, the other coach and I may have not have diagnosed the concussions. Both players were injured on two separate incidents and neither was visible from our sideline. Both players were removed from the game because they were complaining of non-head related injuries. One said that he had hurt his neck and the other said that he was nauseous. This player did not even recall being part of a helmet-to-helmet collision at first, and it was not until a third player said something that we established that he had been involved in a potentially concussion-yielding collision. Both players had suffered concussions, but both were exhibiting symptoms of other types of injuries. As coaches we do everything we can to prevent concussions and treat them, but this game provided two scenarios that clearly demonstrates how coaches will never be able to adequately fill the role of an athletic trainer in diagnosing and treating sports-related injuries. Both players were sent to the emergency room at Kane's hospital as determined appropriate by the athletic trainer, where both players received proper supervision and treatment for concussions. Thank goodness Kane School District has not compromised the safety of their players by cutting funding for an athletic trainer's attendance at all their sporting events.

I certainly understand that decreased budgets have forced some difficult decisions, but cutting athletic trainers should have never been a consideration. No cost is too great for the health and safety of our athletes. I have already given half of my coaching salary to supplement our football program, but I would without hesitation, give up the other half of my pay if that meant we could have athletic trainers present at our home football games. Trainers are not a luxury; they are a necessity, and I fear it is only a matter of time until a greater tragedy occurs; one that could have been avoided if a properly trained athletic trainer was present.

Sincerely,

A handwritten signature in black ink, appearing to read 'Charles H. Hayes', with a stylized flourish at the end.

Charles H. Hayes

The safety in youth sports act has passed the house and will go in front of the senate when they reconvene on the 17th. Apparently Gov. Corbett has said he plans to sign the bill assuming it passes the senate which it is expected to do; therefore, having someone to interpret the ImPACT data is crucial. I spoke to a representative at ImPACT and he was uncertain if those doctors who are considered ImPACT clinicians will be approved for clearances for concussion, but, if it must be what they call a CIC doctor, then the closest person to clear our student athletes would be Clarion or Pittsburgh. Furthermore, there is a serious concern with the athletes getting a baseline test prior to the start of the sports season. The WCSD is paying a fee to use the software and there is a lack of personnel to test the student athletes, making the fee questionable at best. However, facing the pending laws in our state, it makes little sense to eliminate this service as it will be an invaluable service in informing clinicians when a student athlete is prepared to safely return to sports and academics.

I am uncertain of the numbers, but Kari and I had also talked about the need to have someone available that would be proficient in AED/CPR. I know that not every one of the coaches have this ability which may pose a serious threat to the students who are practicing without a person who is certified being present.

Wrestling assessments are coming up in the next few weeks, and an ATC must perform them. Without someone in the district, the wrestling teams are going to have to hire out this service. Luckily, Kari and I are in the area to perform this, but that may or may not be the case in the future. Also, we will be more favorable to the district in our fee than someone who may have to drive a significant distance to perform the test.

Since as ATCs, Kari and I are in the schools, we are providing a significant financial windfall to the parents. I have spoken with several parents who have been forced to have their children seen in the ER or in the doctor's office because there was a concern of the severity of injury. Kari and I are trained to make recommendations in regard to the need for outside intervention, providing a significant financial and time savings to the families. Luckily, this fall was mild in terms of temperatures; however, Kari and I had implemented a county-wide heat illness prevention protocol. This required us to make recommendations on safe practice conditions based on our findings of temperature and relative humidity. Certainly the AC's are intelligent enough to plug the data into the chart to determine safe practice procedures; however, the question remains if they have the time to perform the test and make the appropriate calls to ensure the student athletes' safety at practice.

The bottom line is that there were several uninformed members in our community that saw our salaries as dispensable without considering the unique service that ATCs can provide. Unfortunately, many people would view us at sporting events sitting and watching the events that they were attending. What goes unseen is the bulk of what we do in our day, the evaluations, taping, rehabilitation, communications with coaches, parents, doctors, on behalf of our student athletes, school visits we would perform on our own time, the calls to us at home as frantic parents were hoping to get the best information they could to understand their child's injury, aiding student athletes from other schools as they prepare to compete within the WCSD, all this behind the scenes, unseen by the community that may attend the sporting events in the WCSD. I am very passionate about my profession but also about the families that I have served. I sincerely hope that our district's current financial situation does not result in our student athletes denial of access to qualified health professionals by not renewing the ATC contract for the 2012-13 academic year.

I hope this information is helpful. I would love the opportunity to return to the WCSD.

Andrea Shene