



JAMES CAMPBELL HIGH SCHOOL
ATHLETIC TRAINING ROOM
POLICIES AND PROCEDURES
HANDBOOK

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MISSION STATEMENT

The objective of the Athletic Training Room (ATR) is to provide the highest level of service to the student-athletes at James Campbell High School. This includes the education, prevention, care, and rehabilitation of athletic injuries.

JOB DESCRIPTIONS AND RESPONSIBILITIES

The athletic health care program involves all phases of health care in the athletic environment (i.e., injury prevention; recognition, treatment, evaluation and referral of athletic injuries; rehabilitation, follow-up evaluation and reconditioning; and education and counseling). Positions in this class are also responsible for organizing and supervising the school's athletic training facility.

Knowledge of: Human anatomy, neuroanatomy, physiology, and kinesiology; principles of personal hygiene, nutrition and first aid and emergency care treatment of injuries and illnesses; including emergency cardiac care (ECC); principles, practices and current techniques associated with sports medicine; organization and administration of an athletic health care program; components of a comprehensive athletic injury/illness prevention program; principles, practices and current techniques of athletic rehabilitation and treatment including the use of appropriate therapeutic modalities, equipment and appliances; basic legal concepts as they apply to the certified athletic trainer and his/her performance.

Ability to: Develop and implement a school's athletic health care program; formulate operating procedures; learn applicable governmental regulations and standards and departmental policies and procedures; independently apply principles, practices and techniques associated with sports medicine and athletic rehabilitation and treatment; develop and modify therapeutic treatment plans; instruct student athletes and others in adhering to therapeutic treatment plans; prepare clear and comprehensive reports; and communicate effectively, orally and in writing.

ATR GUIDELINES AND PROCEDURES

Athletic Training Room hours

1. The ATR will open at the conclusion of the school day (Monday through Friday) and will close approximately 30 minutes after the conclusion of the last practice/event.
2. Saturday hours will vary depending on event coverage. **Event coverage will take priority over practices.*
3. Holiday coverage, as well as, fall, winter, and spring break coverage will vary depending on event coverage and practice schedules.

Athletic Training Room coverage

1. Practice schedules: Days, times, and locations of practices must be given to the Athletic Health Care Trainers (AHCTs) at least 1 week in advance. Failure to do so will result in a lack of coverage.
2. Game schedules: Season game schedule (pre-season scrimmages/games, regular, and post-season games) must be provided before the beginning of the season.

****Please alert the AHCTs to any changes or cancellations to these schedules. Failure to do so will result in lack of coverage.**

Athletic Training Room rules

1. The ATR is off-limits unless under the supervision of an AHCT(s).
2. Appropriate attire is required at all times.
3. No cleats or equipment are allowed in the ATR.
4. All personal belongings (backpacks, cell phones, etc.) should be placed in the locker or under the table before receiving treatment.
5. CELL PHONE USE IS NOT ALLOWED IN THE ATR.
6. All student-athletes must sign-in before receiving treatment/rehabilitation.
7. Taping, treatments, and rehabilitation will be on a FIRST COME, FIRST SERVED basis, regardless of gender/sport. However, in-season sports will be given first priority.
8. All student-athletes will be required to participate in rehabilitative exercises consistently for additional taping support when appropriate.
9. The ATR bathroom is not for student-athlete use.

Athletic Training Room cleaning guidelines

See **Appendix A**

Reporting of Athletic Injuries

1. It is vital that AHCT(s) are made aware of any injury a student-athlete sustains during the course of the season. The faster an injured student-athlete receives proper care, the quicker the healing time, and thus a much sooner return to competition.
2. If a student-athlete sustains a serious or life-threatening injury at a practice/game and the AHCT(s) are not present, please do not hesitate to activate the Emergency Action Plan.

Student-Athletes Return to Play (RTP)

1. Student-athletes returning to practice following an illness and/or injury, due to physician care must provide a written medical release from their supervising physician complete with: date of examination, diagnosis, and date of return to participation.
2. The Athletic Health Care Trainer will provide the final clearance.

Water coolers, first aid supplies, and other equipment

These items will be provided upon request and when/if available. It is the head coach's responsibility to schedule both the pick-up and return of all items. All items must be returned in the condition it was issued. (*Water coolers and water bottles are to be washed and cleaned at the end of each use*)

ATHLETIC FORMS

Completion of athletic forms are required in order to participate in HIDOE athletics. All forms can be found at the front office (A2) or on the athletics website:

<https://www.campbellhighschoolathletics.org>. Any student-athlete with incomplete or no forms turned in will **NOT** be eligible for **ANY** participation (conditioning, workouts, practices, scrimmages, games, etc.) No exceptions.

1. HIDOE Preparticipation Sports Physical Exam

- a. All information need s to be completed
- b. Physicals are valid for one calendar year from the Date of Examination
- c. Physicals must be completed by a physician in order to be valid
 - i. Physician must complete physical with signature and written/stamped name, address, telephone number, and **DATE OF EXAMINATION**

2. HIDOE Concussion Management Program Form

- a. All information needs to be completed
- b. This form is to be completed yearly and turned in with Physical
- c. The Concussion Study is voluntary, but signatures are required

3. HIDOE Student Participation and Parent/Legal Guardian Consent, Release, and Assumption of Risk Form

- a. All information must be completed
- b. Insurance information should be provided but is not required for participation
- c. All student-athletes must have a separate consent form for each sport they will be participating in
- d. It is mandatory for all coaches to carry their own copies for emergency purposes during travel events (**fall**-orange, **winter**-blue, **spring**-green). This will be provided by AHCT

EMERGENCY ACTION PLANS (EAPs)

All EAPs and Action Plans can be found on JCHS Athletics Website
(<https://www.campbellhighschoolathletics.org>)

- Athletic Training Room
- Athletic Field
- Baseball Field
- Cafeteria
- Gym
- Softball Field
- Weight Room
- Wrestling/Judo Room

ACTION PLANS

- Allergic Reaction
- Asthma
- Cervical Spine Injuries
- Diabetic Athletes
- Head-down contact in football
- Heat/Exertional Heat Stroke
- Hyponatremia
- Lightning
- Sickle Cell Anemia
- Stroke
- Sudden Cardiac Arrest
- COVID-19 Student-Athlete Self Care

HIDOE HEAT ILLNESS POLICY & PROCEDURE

A heat acclimatization period is a 14-calendar day period beginning during the first day of the Hawaii High School Athletic Association (HHSAA) start date calendar for the designated sport or the first day an athlete reports to practice if this is a later date than the designated sport start date. If an athlete misses a practice during this period, they must restart their heat acclimatization period from the day they missed practice. The goal of this period is to enhance an individual’s exercise heat tolerance and ability to exercise safely and effectively in warm to hot conditions.

Monitoring of Temperature and Humidity

A schools’ designee can monitor temperature and humidity in a variety of ways. However, best practice is to utilize wet bulb global thermometer, which is a device that monitors temperature, wet bulb global temperature, relative humidity, and wind speed (i.e., Kestrel heat monitor). A sling psychrometer may be used to establish relative humidity and temperature from which the heat index can be used to determine practice modifications.

To provide flexibility due to available equipment, each school may choose one of the following charts to determine practice modifications or cancellations. (By its very nature, a “model” policy is intended to be flexible so that when it is being considered for local adoption, local authorities can factor in the details of their unique facilities and schedules as they prescribe the manner in which this heat and humidity guideline is implemented.)

Wet Bulb Globe Temperature (WBGT) Chart

WBGT °F	Activity Guidelines	Rest Break Guidelines
<82	Normal Activities.	Provide at least 3 separate rest breaks each hour of minimum of 3 minutes.
82-86.9	Use discretion for intense or prolonged exercise; watch at-risk players carefully	Provide at least 3 separate rest breaks each hour of a minimum of 4 minutes.
87-89.9	Maximum practice time is 2 hours. For football: players restricted to helmets, shoulder pads, and shorts during practice. All protective equipment must be removed for conditioning activities.	Provide at least 4 separate rest breaks each hour of a minimum of 4 minutes.
90-92	Maximum length of practice is one hour, no protective equipment may be worn during practice, and there may be no conditioning activities.	There must be 20 minutes of rest breaks provided during the hour of practice.
>92.1	No outdoor workouts	Cancel exercise; delay practices until a cooler WBGT reading occurs.

Georgia High School Athletic Association Source NATA, JAT September 2015

Preparation for Heat Illness

1. Measure Wet Bulb Globe Temperature or relative humidity and temperature.
2. Suggested list of equipment that should be available
 - a. Ice
 - b. Coolers with water and ice
 - c. Tub, tarp, wading pool
 - d. Blood Pressure cuff/stethoscope
 - e. Pulse oximeter
 - f. Rectal thermometer
 - g. AED (Automated External Defibrillator)
 - h. Location for cooling
3. Written EAP (please see above for EAP)

Please see written **Hawaii High School Athletic Association Heat Acclimatization and Practice Policy AND Department of Education Heat Acclimatization and Heat Illness Practice Policy**

HIDOE CONCUSSION POLICY & PROTOCOL

The Hawaii State Department of Education (DOE) and the Athletic Health Care Trainers' (AHCT) program have instituted a Concussion Management Program (CMP) to ensure student athletes return to athletic participation safely. CMP has aligned the AHCT program with the National Athletic Trainers' Association Position Statement, 2004¹; the Consensus Statement on Concussion in Sport, 2009²; and the National Federation of State High School Association (NFHS) Concussion Guidelines 2009³. The National Athletic Trainers' Association Position Statement, Consensus Statement on Concussion in Sport, and the NFHS Association Concussion Guidelines were developed by physicians, neuropsychologists, and AHCTs trained in concussion management. The NFHS Association established a new rule in the fall of 2010, **“any player who shows signs, symptoms or behaviors, associated with a concussion must be removed from the game and shall not return to play until cleared by an appropriate health-care professional.”**

To comply with the NFHS Association rule change and national guidelines, the DOE and AHCT program have instituted the following guidelines for all student athletes participating in collision and contact sports. All ninth and eleventh grade student athletes participating in collision and contact sports along with tenth and twelfth grade student athletes participating in collision and contact sports for the first time will be administered baseline assessments (described below) which will provide the high school AHCT and the student athletes' primary care physician with objective information to compare pre-and-post injury.

- Graded Symptom Checklist baseline assessment
- Cognitive status baseline assessment (Immediate Post-Concussion Assessment and Cognitive (ImPACT) or (SCAT5)
- Postural Stability baseline assessment

A student athlete with a possible concussion will receive two forms: (1) **Graded Symptom Checklist for Concussed Athlete** (GSC List) and (2) **Medical Referral Form for Concussed Athlete**. The GSC List form provides your child's symptoms at the time of injury. It also includes signs and symptoms to watch for and recovery recommendations. The medical referral form provides information for your child's physician regarding his/her head injury and recommendations for return to activity. After a student athlete takes the cognitive status assessments, the AHCT will collaborate with the student athlete's

physician and/or a neuropsychologist to determine if the student athlete is ready to start a **Return to Activity Plan** (see below). This team approach ensures the health and safety of each concussed student athlete.

Return to Activity Plan (RAP):

Step 1. Complete cognitive rest. This may include staying home from school or limiting school hours and study for several days which would be determined by a physician and AHCT, and supported by school administration.

Activities requiring concentration and attention may worsen symptoms and delay recovery.

Step 2. Return to school full time.

Steps 3-7. Will be supervised by the high school AHCT and is subject to clearance by the treating physician. These steps cannot begin until cleared by the treating physician for further activity.

(Each STEP is separated by a minimum of at least 24 hours.)

Step 3. Light exercise. Walking or riding a stationary bike

Step 4. Running in the gym or on the field.

Step 5. Non-contact training drills in full equipment. Weight training can begin

Step 6. Full contact activity

Step 7. Full game/practice

APPENDIX A: ATR CLEANING SCHEDULE

DONE	IN BETWEEN USE	NOTES
	WIPE DOWN TREATMENT & TAPING TABLES	
	EXERCISE EQUIPMENT	
	GAME READY SLEEVES	
	SURFACES (COUNTER TOPS, HANDLES, OFFICE)	
	WASH HANDS & SURFACES EVERY 30-45M	
CLEANER	Ozo H2O; Huskey; Soap & H2O; White Vinegar	
DONE	CLOSING CLEAN	NOTES
	WHIRLPOOL	
	FLOORS	
	SURFACES (COUNTER TOPS, HANDLES, OFFICE)	
	COOLERS	
	EQUIPMENT	
CLEANER	Huskey Cleaner; Bleach 10:1 solution	
DONE	WEEKLY	NOTES
	DEEP CLOSING CLEAN	
	MEDKITS (PERSONAL & TEAM)	
	GOLFCART	
CLEANER	10:1 Bleach solution; Laundry at 160F for 25M	
DONE	MONTHLY	NOTES
	AC FILTER	
	STORAGE	
	WALLS	
CLEANER	10:1 Bleach Solution or Husky Cleaner	
DONE	YEARLY	NOTES
	ICE MACHINE BINS	
	TOP WINDOWS	
CLEANER	10:1 Bleach Solution or Husky Cleaner	