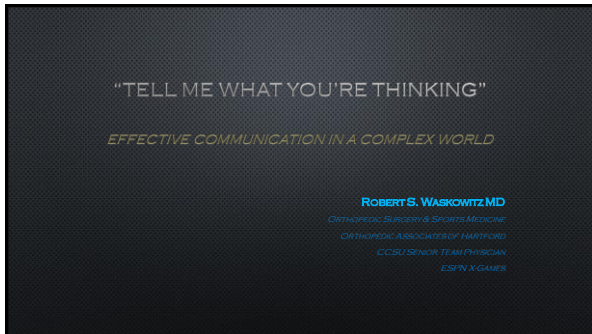




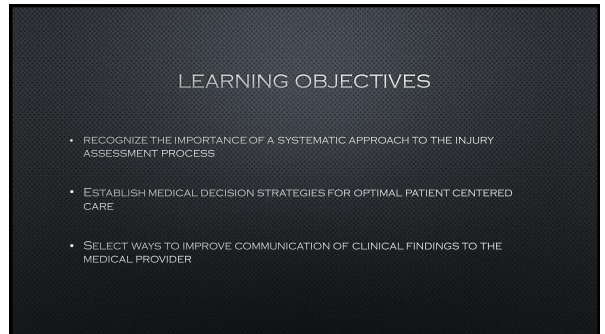
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5




6

### AUDIENCE POLL

- CAREER CHOICE:

*GIVEN THE CHANCE, WOULD YOU DO THIS AGAIN?*



7

### AUDIENCE POLL


- YOU GET TO CALL THE SHOTS: WHAT WOULD YOU CHANGE?
  - HOURS
  - PAY
  - TRAVEL
  - PERSONAL TIME
  - MAINTENANCE OF CERTIFICATION REQUIREMENTS



8

### AUDIENCE POLL

- ARE YOU HAPPY WITH YOUR JOB?
  - NOPE
  - SORTA... KINDA... MAYBE
  - SIR, YES SIR
  - IT'S THE BEST



9

### CHALLENGES OF THE JOB

POSITIVES	NEGATIVES
<ul style="list-style-type: none"> <li>SATISFACTION OF PROVIDING A SERVICE</li> <li>ADVANCING EDUCATION</li> <li>ACCESSIBILITY/SUPPORT                             <ul style="list-style-type: none"> <li>"MAKE A CALL AND MY DOC ANSWERS"</li> </ul> </li> <li>"I'M REALLY HAPPY!"</li> </ul>	<ul style="list-style-type: none"> <li>LACK OF RESPECT FOR JOB/TITLE/ROLE</li> <li>PHYSICIAN-DEPENDENT SENSE OF SUPPORT</li> <li>PHYSICIAN INTIMIDATION</li> <li>"FEAR OF BEING WRONG!"</li> </ul>

*Work/Life Balance*

10

### PREVAILING WIND vs UNDERCURRENT

MENTALITY	CULTURE
<ul style="list-style-type: none"> <li>"SIDELINE MANAGERS" vs INTEGRATION WITH THE TEAM PHYSICIAN IN ORDER TO GAIN EXPERIENCE AND LEARN</li> <li>"LACK OF EXPOSURE TO THE TRUE MEDICAL MODEL"</li> <li>"WE FAIL ON OUR COMMITMENT TO OUR PROFESSION"</li> </ul>	<ul style="list-style-type: none"> <li>"LACK OF RESPECT"</li> <li>PROFESSIONAL SPORTS IS NOT AN ACCURATE REFLECTION OF AN ATC</li> <li>"BOTTLE &amp; TOWEL"</li> <li>"CHIP ON YOUR SHOULDER" GENERATES ANGST AND FRUSTRATION</li> </ul>

*How Do We Change The Mindset?*

11

### CONTINUUM OF CARE

ARGUE THAT THE FIRST OBSERVER THAT WITNESSES THE INJURY HAS THE MOST COMPREHENSIVE INITIAL UNDERSTANDING OF MECHANISM OF INJURY, DEGREE OF INJURY AND OPPORTUNITY TO SET THE COURSE FOR TREATMENT AND RECOVERY




12

## CONTINUUM OF CARE

### THE QUESTION

- HOW DO WE EFFECT POSITIVE CHANGE, OBTAIN JOB SATISFACTION, ENGENDER A SENSE OF VALUE, AND SUCCEED WITH A SUSTAINABLE WORK/LIFE BALANCE IN A CAREER?



13

## CONTINUUM OF CARE

### THE CLOCK STARTS TICKING THE MOMENT THE INJURY OCCURS

- INITIAL
  - MOMENT OF "IMPACT"
  - DIRECT
  - INDIRECT
- SUBSEQUENT
  - SIDELINE EVALUATION
  - FOLLOWUP



14

## CONTINUUM OF CARE

### CRUCIAL TIMEFRAME


- CONTROL WHAT YOU CAN
  - ABC'S
  - STABILIZE
  - TRANSPORT VS SUPPORT
- MANAGE WHAT YOU CAN'T
  - REFERRAL FOR FOLLOWUP
  - STUDIES (XRAY MRI, ETC)
  - EMOTIONAL STATUS

**SET THE TONE**

15

## CONTINUUM OF CARE

TIME *Sensitive*...



...NOT TIME *Specific*

16

## CONTINUUM OF CARE

- YOU NEED A DIAGNOSIS
  - CAN'T MOVE FORWARD IF YOU DON'T KNOW WHERE YOU ARE
  - DIAGNOSIS DOES NOT NEED TO BE "DEFINITIVE"
  - OPENS THE DOOR TO INITIATE TREATMENT
- YOU NEED A PLAN OF CARE
  - CAN'T MOVE FORWARD IF YOU'RE STUCK IN NEUTRAL
  - SHORT TERM
    - MEDICAL
    - SURGICAL VS NONSURGICAL
  - LONG TERM
    - RECOVERY AND POTENTIAL RETURN TO SPORT

17

## AND THEN THERE IS THIS



18

*THE GOAL*



*THE GOLD*



19

### TEMPLATE FOR SUCCESS

**DATA COLLECTION**

- NCAA ISS (INJURY SURVEILLANCE SYSTEM)
  - SPORTS INJURY DATA BASE
  - 25 YEARS OF COLLECTION
  - HEALTH & SAFETY POLICY
  - RISK MANAGEMENT & PREVENTION

**DATA ANALYSIS**

- DATA SETS FOR RESEARCH
- IMPLEMENT POLICY
- RULE CHANGES
- WEB BASED
- AI? MACHINE LEARNING?

J.ATHL. TRAIN. 2007 APR;33(4): 173-182. NATIONAL COLLEGIATE ATHLETIC ASSOCIATION INJURY SURVEILLANCE SYSTEM CONCEPTS, INFORMATION AND METHODS. FRANKALL DICK, MS, FACSM\*, JULIE ASHL, MA, ATC,† AND STEPHEN W. MARSHALL, PHD.

J.ATHL. TRAIN. 2014 JUL;40(4): 552-560. NATIONAL COLLEGIATE ATHLETIC ASSOCIATION INJURY SURVEILLANCE SYSTEM REVIEW OF METHODS FOR 2004-2009 THROUGH 2013-2014 DATA COLLECTION. ANDREW V. FEAR, EMU\*, THOMAS P. DONNER, PH.D., ATC\*, FRANK BRICE, PH.D., STEPHEN W. MARSHALL, PH.D., TERRY PEDERSEN, PH.D., ATC,† BRIAN HANLINE, M.D.‡ AND JILL COLLETTE, MS, ATCS.

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### CONTROL WHAT YOU CAN

**KNOW YOUR ATHLETE**

- PRIOR INJURY
- Hx OF CONCUSSION
- CURRENT INJURY
- MEDICAL/PHYSICAL HEALTH
- MENTAL HEALTH

**KNOW YOUR SPORT**

- POTENTIAL "WEAPONS" OF THAT SPORT
- ENVIRONMENTAL CONDITIONS/SEASON
- FIELD ACCESS
  - INGRESS & EGRESS
  - SIDELINE & CROWD CONTROL

21

### CONTROL WHAT YOU CAN

**PRACTICE**

- PREPARE
  - "IF YOU THINK IT, DO IT"
  - "IT'S NEVER TOO LATE"

**GAME**

- HEIGHTENED AWARENESS
  - "IF YOU AREN'T NERVOUS, THEN I AM"
  - "BE PROACTIVE, NOT REACTIVE"

BE PART OF THE SOLUTION, NOT PART OF THE PROBLEM

QUIET CONFIDENCE

22

### MANAGE WHAT YOU CAN'T

**DO YOUR JOB**

- TRUST YOUR HEAD, HANDS & TRAINING
- YOU'RE NEVER ALONE
- EVENT PACE

"PACE YOURSELF SO YOU DON'T DISGRACE YOURSELF"

**DON'T DO SOMEONE ELSE'S**


- KNOW YOUR ASSIGNMENT
- STAY FOCUSED, SHARP & ALERT

"HEAD ON A SWIVEL"

23

### MANAGE WHAT YOU CAN'T

- TREAT EVERY SINGLE PRACTICE, GAME, MATCH, TOURNAMENT & CONTEST AS AN **AWAY GAME**



24



### UNIQUE CIRCUMSTANCES

#### MEDICAL


- TBI/CONCUSSION/LOC
  - ACCESS FOR CONTROLLED EVALUATION
- CERVICAL SPINE
  - PRE-STAGE
    - "I'VE GOT HEAD, YOU'VE GOT EVAL"
- FX/DISLOCATION
  - AIRCAST/SAM-SPLINT/CRUTCHES/SLING
- LACERATION
  - STERILE WASH/BANDAGE/ACE/SUTURE
- SOFT TISSUE/SOLID ORGAN INJURY
  - SPLEEN, KIDNEY, LIVER
    - DILIGENT SERIAL MONITORING
- DEHYDRATION/HYPER- & HYPOTHERMIA
  - FLUID RESUSCITATION, TREATMENT TANK

25

### UNIQUE CIRCUMSTANCES

#### PERSONNEL

- ACQUAINT YOURSELF WITH OPPOSING TEAM'S MEDICAL STAFF
- INTRODUCE YOURSELF TO AMBULANCE & PARAMEDIC STAFF
- KNOW WHERE THE AMBULANCE IS LOCATED
- KNOW WHERE THE CLOSEST HOSPITAL IS




26

### UNIQUE CIRCUMSTANCES

#### MEDICAL ACTION PLAN (MAP)

- MANDATORY
- WHO'S IN CHARGE
- CONTACT LIST WITH #'S
- DISASTER PLAN
  - ENVIRONMENTAL, FIRE, THREAT



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### UNIQUE CIRCUMSTANCES

#### KIT

- CELL PHONE (CHARGED, EXTRA BATTERY)
- GLOVES & MASK (WATCH OUT FOR MEDIA)
- HIP PACK
- TRAVEL KIT
- TRAUMA SCISSORS
- MULTI-TOOL



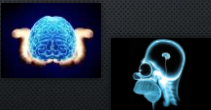
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### UNIQUE CIRCUMSTANCES

#### WHAT'S THE MOST IMPORTANT THING TO BRING?

- YOUR **BRAIN**
  - THINK
  - DECIDE
  - ACT

TAKE THE APPROPRIATE TIME TO EVALUATE, THEN ACTION PLAN GETTING THE INJURED ATHLETE TO A "PLACE" FOR FURTHER MANAGEMENT



29

### EXPECTATIONS

#### YOURS

- SUPPORT
  - ATHLETE, COACH, STAFF, DOCTOR
- RESPONSE
  - IF YOU NEED ASSISTANCE EXPECT THAT IT IS AVAILABLE
- RESPECT
  - YOU ARE THERE FOR A REASON



30

EXPECTATIONS

MINE

- COMMUNICATION
  - IN PERSON OR BY PHONE "DIAGNOSIS"
    - "WHAT ARE YOU THINKING?"
- PLAN
  - NEXT LOGICAL STEPS
    - "WHAT DO YOU WANT TO DO?"



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EXPECTATIONS

MINE

- "DIAGNOSIS"
  - ABC'S
  - INJURED PART
  - MECHANISM
  - DESCRIPTION
- PLAN
  - LOGICAL & THOUGHTFUL NEXT STEPS IN MANAGEMENT
  - FOLLOWTHROUGH
    - TRANSPORT?
    - SIDE LINE MANAGEMENT?
  - FOLLOW-UP



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EXPECTATIONS


KNOW YOUR ANATOMY



33

EXPECTATIONS

KNOW THE MECHANISM OF INJURY



34

EXPECTATIONS

KNOW CLINICAL & SPECIAL TESTS




35

EXPECTATIONS

STUDY INTERPRETATION

- X-RAY
- MRI
- CT SCAN
- ULTRASOUND

- NOT ASKING TO PROVIDE DEFINITIVE DX
- ASKING TO UTILIZE THE STUDY AS A "PIECE OF THE PUZZLE"




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## EXPECTATIONS

### RADIOGRAPHS

- HOW TO READ AN X-RAY
  - CONFIRM CORRECT PATIENT
  - CONFIRM CORRECT SIDE
    - R OR L
  - IDENTIFY VIEW
    - AP, LATERAL, OBLIQUE, WB




ROENTGEN, 1<sup>ST</sup> RADIOGRAPH (WIFE'S HAND) 12/22/1895.

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## EXPECTATIONS

### RADIOGRAPHS

- DESCRIBE STRUCTURE
  - 5<sup>TH</sup> METACARPAL, TIBIOTALAR JOINT...
- DESCRIBE LOCATION
  - DISTAL, PROXIMAL, DORSAL, VOLAR
- DESCRIBE:
  - DISPLACEMENT
    - % (OUTSIDE/INSIDE)
  - ANGLICATION
    - APEX DIRECTION
  - ROTATION
    - MALROTATED
  - ALIGNMENT
    - ANATOMIC



ROENTGEN, 1895. "ROENTGEN" (1895) ROENTGEN'S  
 INVENTION OF THE X-RAY (1895)  
 ROENTGEN'S DISCOVERY OF X-RAYS (1895)  
 ROENTGEN'S DISCOVERY OF X-RAYS (1895)

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## EXPECTATIONS

### MRI

- SOFT TISSUE STRUCTURES
  - LIGAMENT, TENDON, MUSCLE, ORGAN, "BONE"
    - CONTUSION, STRAIN, DISRUPTION
- DEGREE OF INJURY
  - SUPERFICIAL, DEEP, PARTIAL OR COMPLETE



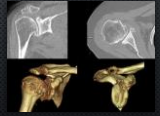
ROENTGEN, 1895. "ROENTGEN" (1895) ROENTGEN'S  
 INVENTION OF THE X-RAY (1895)  
 ROENTGEN'S DISCOVERY OF X-RAYS (1895)  
 ROENTGEN'S DISCOVERY OF X-RAYS (1895)

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## EXPECTATIONS

### CT SCAN

- MULTIPLE PLANAR IMAGING
  - FINE-CUT DEFINITION OF STRUCTURAL INTEGRITY
  - BONE AND SOFT TISSUE
  - 3D RECONSTRUCTION
- COMPLEX INTERPRETATION
  - APPRECIATE DETAILED ANALYSIS




ROENTGEN, 1895. "ROENTGEN" (1895) ROENTGEN'S  
 INVENTION OF THE X-RAY (1895)  
 ROENTGEN'S DISCOVERY OF X-RAYS (1895)  
 ROENTGEN'S DISCOVERY OF X-RAYS (1895)

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## EXPECTATIONS

### ULTRASOUND U/S

- ULTRASONIC WAVES PENETRATING THROUGH TISSUE PLANES DEPICTING REAL-TIME IMAGING IN MULTIAXIAL VIEWS
- USER-DEPENDENT (SKILLSET)
- COMPLEX INTERPRETATION  
 "ANT RACES ON TV AT 3 AM"




ROENTGEN, 1895. "ROENTGEN" (1895) ROENTGEN'S  
 INVENTION OF THE X-RAY (1895)  
 ROENTGEN'S DISCOVERY OF X-RAYS (1895)  
 ROENTGEN'S DISCOVERY OF X-RAYS (1895)

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## SPECIAL CIRCUMSTANCES

### TBI/CONCUSSION MANAGEMENT

- ESTABLISHED PROTOCOLS
- "TOOLS OF THE TRADE"
  - SCATS, SAC, KING-DEVIK, COGNITIVE BASELINE (IMPACT)
  - RTP/RTL
    - RETURN TO PLAY
    - RETURN TO LEARN



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SPECIAL CIRCUMSTANCES

SUTURE LACERATION

- WHAT TO SUTURE
- WHEN TO SUTURE
- HOW TO SUTURE




43

SPECIAL CIRCUMSTANCES

FRACTURES & DISLOCATIONS

- SPLINTING
  - SUPPORT THE EXTREMITY
    - INFLATABLE TUBE, DEFLATABLE BEAN BAG
    - WOODS PL., FIBERGLASS, PLASTER GYM SPLINT...
  - PROTECT THE EXTREMITY
    - NEUROVASCULAR INTEGRITY
  - "JOINT ABOVE & JOINT BELOW"



44

SPECIAL CIRCUMSTANCES

FRACTURES & DISLOCATIONS

- REDUCTION
  - OF WHAT
  - WHEN
  - HOW



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SPECIAL CIRCUMSTANCES

FRACTURES & DISLOCATIONS

- INTENTION
  - UNLOAD NEUROVASCULAR COMPROMISE
  - RELIEVE SOFT TISSUE PRESSURE
  - RE-ESTABLISH ALIGNMENT
  - PAIN MANAGEMENT



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SPECIAL CIRCUMSTANCES

FRACTURES & DISLOCATIONS

- PREVENTION
  - SEQUALAE INCLUDE
    - SOFT TISSUE, NEUROVASCULAR, BONE, JOINT NECROSIS
    - STIFFNESS
    - ARTHROFIBROSIS
    - COMPROMISED HEALING



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SPECIAL CIRCUMSTANCES

REDUCTION TECHNIQUES

- SIMPLE
  - DISTRACT
  - CORRECT/OVER-CORRECT
  - REDUCE
  - ALIGN
- COMPLEX
  - SKILL
  - CONFIDENCE
  - COMFORT LEVEL



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## SPECIAL CIRCUMSTANCES

### Good Samaritan Law

- GOOD SAMARITAN LAWS OFFER LEGAL PROTECTION TO PEOPLE WHO GIVE REASONABLE ASSISTANCE TO THOSE WHO ARE, OR WHOM THEY BELIEVE TO BE, INJURED, ILL, IN PERIL, OR OTHERWISE INCAPACITATED
- THE PROTECTION IS INTENDED TO REDUCE BYSTANDERS' HESITATION TO ASSIST, FOR FEAR OF BEING SUED OR PROSECUTED FOR UNINTENTIONAL INJURY OR WRONGFUL DEATH
- CONNECTICUT

THE GOOD SAMARITAN LAW (CGS § 52-557b) PROVIDES IMMUNITY FROM CIVIL DAMAGES FOR ACTS OF ORDINARY NEGLIGENCE IN CONNECTION WITH THE RENDERING OF EMERGENCY MEDICAL SERVICE BY SPECIFIED INDIVIDUALS UNDER CERTAIN CIRCUMSTANCES

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## STANDARDS

TRIAGE ACUTE CONDITIONS

### EXAMINATION, DIAGNOSIS & INTERVENTION

- CARDIAC COMPROMISE
- RESPIRATORY COMPROMISE
- ENVIRONMENTAL CONDITIONS
- CERVICAL SPINE
- TBI
- HEMORRHAGE (INTERNAL & EXTERNAL)
- FRACTURE & DISLOCATION
- ANAPHYLAXIS
- EXERTIONAL (BIKING, RHABDOMYOLYSIS, HYPONATREMIA)
- DIABETES
- DRUG OVERDOSE
- ETC., ETC., ETC...

CAATE 2020 PROFESSIONAL STANDARDS

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## STANDARDS

POC FOR SYSTEM MANAGEMENT

### EXAMINATION, DIAGNOSIS & INTERVENTION

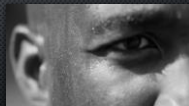
- CARDIOVASCULAR SYSTEM (AUSCULTATION)
- ENDOCRINE SYSTEM
- HEENTT
- GASTROINTESTINAL
- INTEGUMENT
- MENTAL STATUS
- MUSCULOSKELETAL
- NEUROLOGIC
- PAIN
- REPRODUCTIVE
- RESPIRATORY
- ETC., ETC., ETC...

CAATE 2020 PROFESSIONAL STANDARDS

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## CHALLENGES FACING THE ATC

- ATHLETIC TRAINERS PERCEIVED PRESSURE FROM COACHES REGARDING MEDICAL DECISION MAKING
- DIVISION I ATs PLACED GREATER EMPHASIS ON THE ROLE THAT COACHES PLAYED IN THEIR JOB PERFORMANCE AND JOB SECURITY
- ATHLETIC DEPARTMENTS SHOULD CONSIDER TRANSITIONING TO PATIENT-CENTERED MODELS OF CARE TO BETTER ALIGN VALUES AND REDUCE THE EXTERNAL PRESSURES PLACED ON ATs

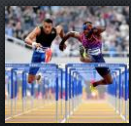


JATHA TRAIN, 2020 MAR 32(3): 305-311.  
CHALLENGES FACING COLLEGIATE ATHLETIC TRAINERS, PART I: ORGANIZATIONAL CONFLICT AND CLINICAL DECISION MAKING  
AUGUST M. PHD, LACE, PHD, ATC; COOPER, AUTHOR; THOMAS G. DORNAN, PHD, ATC; AND STEPHANIE MADRISSE SINGH, PHD, ATC, FNATA

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## CHALLENGES FACING THE ATC

- EXTERNAL PRESSURE REGARDING MEDICAL DECISIONS WAS AN ANTICIPATED OCCURRENCE
- SUCH PRESSURE WAS DESCRIBED AS A NATURAL PART OF THE POSITION, NOT NEGATIVE BUT RATHER A PRODUCT OF THE CULTURE AND ENVIRONMENT OF THE DIVISION I FBSS SETTING



JATHA TRAIN, 2020 APR 32(4): 409-410.  
COLLEGIATE ATHLETIC TRAINERS' EXPERIENCES WITH EXTERNAL PRESSURES: PAINFUL DECISION MAKING  
AUGUST M. PHD, LACE, PHD, ATC; STEPHANIE MADRISSE SINGH, PHD, ATC, FNATA; AND TUGANIG BOHMAN, PHD, ATC

53

## CHALLENGES FOR THE NEW ATC

- DIFFICULTY MAKING INDEPENDENT DECISIONS
- MAKING DECISIONS & RECEIVING POSITIVE FEEDBACK DEVELOPED CONFIDENCE
- COMMUNICATION WAS CHALLENGING
- ROLE AMBIGUITY BECAUSE OF ORGANIZATIONAL & ADMINISTRATIVE STRUCTURE & EXPECTATIONS
- MENTOR INACCESSIBILITY WAS CHALLENGING




JATHA TRAIN, 2019 NOV 34(11): 1197-1207.  
CHALLENGES FOR NEWLY CIRCUMSCRIBING ATHLETIC TRAINERS: AINSLEY B. THOMPSON, ED.D., ATC; STEPHANIE MADRISSE SINGH, PHD, ATC, FNATA; AND JESSICA L. BRADY, ED.D., STEPHANIE MADRISSE SINGH, PHD, ATC, FNATA; THOMAS G. DORNAN, PHD, ATC; AND STEPHANIE MADRISSE SINGH, PHD, ATC, FNATA  
STACY E. WALKER, PHD, ATC, FNATA

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## STRATEGIES

- ENSURING ONGOING AND FREQUENT COMMUNICATION WITH STAKEHOLDERS ABOUT AN INJURED ATHLETE'S STATUS AND ANTICIPATED TIMELINE FOR RETURN TO PLAY
- PROVIDING A RATIONALE TO COACHES OR ADMINISTRATIONS TO FOSTER AN UNDERSTANDING OF WHY SPECIFIC MEDICAL DECISIONS ARE BEING MADE
- ESTABLISHING POSITIVE RELATIONSHIPS WITH COACHES, ATHLETES, AND ADMINISTRATIONS



J.ATA, TRANS, 2020 APR; 35(4): 403A-415.  
 COLLEAGUES, PARTNERS, THREATS & CHALLENGES WITH EXTERNAL PROVIDERS: FACED CHANGING DECISION MAKING  
 AUSTIN M. PH.D., LAC, PH.D., ATC, STEPHANIE MAZURKOWICZ, PH.D., ATC, FRACAT, AND THOMAS G. BOWMAN, PH.D., ATC

55

## EXPECTATIONS

- KNOW HOW TO PRESENT A CASE



56

## RESPONSIBILITIES

- PROVIDE APPROPRIATE CARE & TREATMENT TO THE BEST OF OUR ABILITIES



57

## RESPONSIBILITIES

- KNOW YOUR "CRAFT"
  - UTILIZE YOUR TRAINING WITH PURPOSE
  - TAKE ADVANTAGE OF THE "HANDOFF" WHEN NECESSARY
    - COMFORT LEVEL
  - CONFIDENCE NOT BRAVADO



58

## RESPONSIBILITIES

- PROVIDE A DIAGNOSIS & TREATMENT PLAN
- DON'T SHY AWAY FROM CHALLENGING OTHERS

59

## RESPONSIBILITIES

- ADVANCE YOUR KNOWLEDGE BASE
  - PUSH TO GAIN FURTHER INSIGHT INTO INJURY PROFILES
  - CURRENT TECHNIQUES
  - ALTERNATIVE TECHNIQUES

*"EXPERIENCE IS SOMETHING YOU GET JUST AFTER YOU NEEDED IT"*


*"YOU CAN'T SUCCEED IF YOU DON'T FAIL"*

60

COMMON THREAD

PUTTING IT ALL TOGETHER

- EXPERTISE AS AN ATC & TEAM PHYSICIAN REPRESENTS AN EVOLUTION
  - CONSTANT OPPORTUNITY TO LEARN WITH AND FROM EACH OTHER
- CONTINUUM OF PERSONAL GROWTH AND PROGRESSION OVER A GAME... A SEASON... A CAREER




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COMMON THREAD

PUTTING IT ALL TOGETHER

- COMPLEX SYSTEM OF MULTIPLE COMPONENTS THAT NEED TO MESH TOGETHER WITH SINGULAR FOCUS ON THE HEALTH AND PERFORMANCE OF AN INDIVIDUAL SUBJECT



62

COMMON THREAD

PUTTING IT ALL TOGETHER

- PEE-WEES TO PROS
- INTEGRATED "TEAM" APPROACH STARTING FROM THE MOMENT OF INJURY
- EACH HAS A JOB TO DO
- ALL HAVE THE RESPONSIBILITY OF COMMUNICATING



63

COMMON THREAD

PUTTING IT ALL TOGETHER

- HIGHEST STRESS ENVIRONMENTS
  - NFL SUPER BOWL TEAM
    - SEASON LONG APPROACH
    - RELIANCE ON THE MEDICAL TEAM TO PERFORM OPTIMALLY
    - "CONTINUUM OF CARE" APPROACH



64

COMMON THREAD

PUTTING IT ALL TOGETHER

*"TRUST AND MUTUAL RESPECT OF YOUR COLLEAGUES AT WORK IS PROBABLY UNIVERSAL AS FAR AS WHAT'S NECESSARY FOR THE END WORK PRODUCT TO BE WHAT IT NEEDS TO BE"*




DR. NICK BLATTNER, HEAD TEAM PHYSICIAN LOS ANGELES RAMS, FROM CHICAGO, JANUARY 27/22

65

REASONABLE OR UNREASONABLE


"JACK-OF-ALL-TRADES"  
...IS REALLY...  
"MASTER-OF-NONE"



66

*"UNOBTAINIUM" vs "OBTAINIUM"*

RENAISSANCE MAN/WOMAN      BE THE "SWITCHBLADE"



*IF ITS WHAT YOU WANT, GO AND GET IT*

67

KERNELS, NUGGETS & GEMS

WE HAVE A REALLY HARD TIME SAYING "NO"



68

KERNELS, NUGGETS & GEMS


LEARN HOW TO "NO" MORE...

LEARN HOW TO SAY "YES" MORE...



69

*THANK YOU!*



70