



Ohio Occupational Therapy, Physical Therapy,  
and Athletic Trainers Board

*Athletic Trainers Section*  
*January 11, 2012*  
*9:30 a.m.*

**Members Present**

Jason Dapore, DO  
Brian Hartz, AT, PhD, Chair  
Aaron Galpert, AT  
Vincent O'Brien, AT, Secretary

**Staff**

Diane Moore, Executive Assistant  
Jeffrey Rosa, Executive Director

**Guests**

Jeff Sczpanski, OATA  
Ryan Dureska, JCARR  
Julie Meadows

**Legal Counsel**

Yvonne Tertel, AAG

**Call to Order**

Brian Hartz, Acting Chair, called the meeting to order at 9:32 a.m.

**Approval of Minutes**

**Action:** Vincent O'Brien moved that the minutes from the November 9, 2011, meeting be approved as submitted. Aaron Galpert seconded the motion. The motion carried.

**Executive Director's Report**

- The Executive Director informed that Section that the Governor's Office had not appointed a new member to fill the vacant position on the Athletic Trainers Section.
- The Executive Director informed the Section that the new investigator assistant position description was approved and the position will be posted shortly.

The formal Executive Director's report is attached to the minutes for reference.

**Special Orders**

**Election of Officers**

**Action:** Vincent O'Brien nominated Brian Hartz to be Section Chairperson for the period beginning January 11, 2012 and ending immediately following the September 2012 Section meeting. Aaron Galpert seconded the nomination. Vincent O'Brien moved to close the nominations. Aaron Galpert seconded the motion. The motion carried. Vincent O'Brien moved to elect Brian Hartz by unanimous consent. Jason Dapore seconded the motion. All members present voted to elect Brian Hartz Section Chairperson.

**Action:** Brian Hartz nominated Vincent O'Brien to be Section Secretary for the period beginning January 11, 2012 and ending immediately following the September 2012 Section meeting. Jason Dapore seconded the nomination. Brian Hartz moved to close the nominations. Aaron Galpert seconded the motion. The motion carried. Brian Hartz moved to elect Vincent O'Brien by unanimous consent. Jason Dapore seconded the motion. All members present voted to elect Vincent O'Brien Section Secretary.

**Appointment of Liaisons**

The liaison appointments beginning January 11, 2012 and ending September 30, 2012 are:

Enforcement Division Liaison:	<i>Aaron Galpert</i>
Licensure Liaison:	<i>Vincent O'Brien</i>
Continuing Education Liaison:	<i>Vincent O'Brien</i>
Correspondence Liaison:	<i>Brian Hartz</i>

Rules Liaison:

*Brian Hertz*

### **Administrative Reports**

#### **Licensure Applications**

**Action:** Vincent O'Brien moved that the Athletic Trainers Section ratify, as submitted, the athletic training licenses issued by examination, endorsement, and reinstatement by the Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board from November 9, 2011, through January 11, 2012, taking into account those licenses subject to discipline, surrender, or non-renewal. Aaron Galpert seconded the motion. The motion carried.

#### **Examination Applicants**

Bowers, Jordan  
Caligiuri, Jennifer  
Jones, Nicole  
Sipes, Brandon

Bramer, Melissa  
Duecker, Jody  
Kotesovec, Sherry

Brandt, Allison  
Harris, Sigourney  
Mundy, Nicole

#### **Endorsement Applicants**

Balam, Teresa  
Jochum, Jessica  
Watson, Philip

Cherney, Caitlin  
Lainhart, Richard

Holliday, Kristin  
Quinlevan, Megan

#### **Reinstatement Applicants**

Gustwiller, Stephanie

### **Continuing Education Approval**

Vincent O'Brien reported that, ten continuing education applications were approved by the Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board from November 9, 2011, through January 11, 2012.

### **Event Approval**

There were no event approval requests submitted since the November 9, 2011 Section meeting.

### **Assistant Attorney General Report**

Yvonne Tertel, AAG, had no formal report for the Section.

### **Case Review Liaison Report**

Aaron Galpert reported that the Enforcement Division opened one new case and closed one case since the November 9, 2011 meeting. There are four cases currently open. There are three active consent agreements being monitored.

### **Correspondence**

1. **Eldon Jones:** Mr. Jones asked the Section if an athletic trainer can provide restorative procedures during an athletic contest and making return to play decisions for an injured visiting team athlete. **Reply:** In accordance with section 4755.60 (A) of the Ohio Revised Code, treatment consists of the techniques and procedures used in giving care in situations where assistance is required or requested. Such actions should be reasonable and prudent within the scope of practice of athletic training. A progression of categories is listed as a guideline for your use. All treatment should be rendered in accordance with any established protocol for the venue. Physician directives should be followed at all times. Permission to treat should be obtained. Athletic trainers should not attempt any treatment measure unfamiliar to them or outside the scope of athletic training practice. Some variance may be seen in treatment, depending upon educational background, facility or setting limitations, and patient response. A referral is not required for first aide and routine treatment. However, a referral is required for restorative treatment. **First Aid (no referral necessary)** - Basic, immediate care given on site to stabilize and prepare for evacuation and referral as needed. **Routine (no referral necessary)** - Maintenance and preventative measures commonly used by athletic trainers, such as pre-event warm-up and post-event cool-down procedures. The sole intent of treatments used is to maintain normal function during participation and daily living. For example, athletes sometimes request to be taped as a prophylactic measure or ritual for participation. Prophylactic taping is not care of an injury; it is a desire of the athlete, and does not call for the degree of skill in selection of taping method or

application, as might be used by a licensed health care practitioner. Restorative - Patient specific instructions for use with a diagnosed injury or as prescribed by the referral source. Standard Operating Procedure (SOP) - A protocol set forth by team physicians and athletic trainers for treatment or various injuries prior to evaluation by a physician. Such procedures should be followed as outlined with timely referral. This protocol must be documented and on file in the setting where used. Athletic trainers may provide visiting teams, traveling without an athletic trainer or team physician, first aid/emergency care and routine care. An athletic trainer can make return to play decisions for visiting team athletes if there is no injury present. They should not provide restorative treatments or return an injured athlete or an athlete with a suspected injury to participation. The information contained in this response would also apply to the visiting team athletic trainer if the home team did not have an athletic trainer. Athletic injury means any injury sustained by an individual that affects the individual's participation or performance in sports, games, recreation, exercise, or other activity that requires physical strength, agility, flexibility, speed, stamina, or range of motion. If an athletic trainer practitioner determines that the athlete has an athletic injury, then the athlete should not be returned to play. If an athlete shows any signs of concussion, then the athlete should not be returned to play the time of the injury.

2. **Amy Schlachter:** Ms. Schlachter asked the Section whether athletic trainers can make return to play decisions and provide care for visiting team athletes. **Reply:** In accordance with section 4755.60 (A) of the Ohio Revised Code, treatment consists of the techniques and procedures used in giving care in situations where assistance is required or requested. Such actions should be reasonable and prudent within the scope of practice of athletic training. A progression of categories is listed as a guideline for your use. All treatment should be rendered in accordance with any established protocol for the venue. Physician directives should be followed at all times. Permission to treat should be obtained. Athletic trainers should not attempt any treatment measure unfamiliar to them or outside the scope of athletic training practice. Some variance may be seen in treatment, depending upon educational background, facility or setting limitations, and patient response. A referral is not required for first aide and routine treatment. However, a referral is required for restorative treatment. First Aid (no referral necessary) - Basic, immediate care given on site to stabilize and prepare for evacuation and referral as needed. Routine (no referral necessary) - Maintenance and preventative measures commonly used by athletic trainers, such as pre-event warm-up and post-event cool-down procedures. The sole intent of treatments used is to maintain normal function during participation and daily living. For example, athletes sometimes request to be taped as a prophylactic measure or ritual for participation. Prophylactic taping is not care of an injury; it is a desire of the athlete, and does not call for the degree of skill in selection of taping method or application, as might be used by a licensed health care practitioner. Restorative - Patient specific instructions for use with a diagnosed injury or as prescribed by the referral source. Standard Operating Procedure (SOP) - A protocol set forth by team physicians and athletic trainers for treatment or various injuries prior to evaluation by a physician. Such procedures should be followed as outlined with timely referral. This protocol must be documented and on file in the setting where used. Athletic trainers may provide visiting teams, traveling without an athletic trainer or team physician, first aid/emergency care and routine care. An athletic trainer can make return to play decisions for visiting team athletes if there is no injury present. They should not provide restorative treatments or return an injured athlete or an athlete with a suspected injury to participation. The information contained in this response would also apply to the visiting team athletic trainer if the home team did not have an athletic trainer. Athletic injury means any injury sustained by an individual that affects the individual's participation or performance in sports, games, recreation, exercise, or other activity that requires physical strength, agility, flexibility, speed, stamina, or range of motion. If an athletic trainer practitioner determines that the athlete has an athletic injury, then the athlete should not be returned to play. If an athlete shows any signs of concussion, then the athlete should not be returned to play the time of the injury.
3. **Joshua Elleman:** Mr. Elleman asked the Section whether verbal communication is required between an athletic trainer and physician before providing treatments identified in the standard operating procedure in place between the physician and athletic trainer. **Reply:** It is the position of the Athletic Trainers Section that section 4755.60 of the Revised Code and rule 4755-42-02 of the Administrative Code requires that a referral relationship must exist between a team physician and an athletic trainer for care of that team's athletes participating in interscholastic, intercollegiate, or professional athletics. Athletic trainers employed by a college, university, high school, or other scholastic institution, as well as professional organizations/clubs function under this team physician/athletic trainer referral relationship. This

relationship should consist of a protocol of care communicated between the team physician and the athletic trainer, and should include procedures for prevention, recognition, assessment, management, treatment, disposition, and reconditioning of athletic injuries. A referral relationship between a team physician and an athletic trainer requires interaction by both parties. In general practice, athletic trainers administer first aid and team physicians initiate referrals for continued treatment. This relationship is maintained by on-going verbal and written communication.

### **AT/PT Joint Board Correspondence**

**JB1. Kari Perin, PT, DPT:** Dr. Perin asked the Athletic Trainers and Physical Therapy Sections if an athletic trainer can provide treatment to a client under the physical therapy plan of care, if the client cannot be seen by a physical therapy practitioner and how to bill for the services rendered by the athletic trainer. **Reply:** Rule 4755-27-01 (C) of the Ohio Administrative Code defines “other licensed personnel” as “any person holding an Ohio license to practice as a health care practitioner in a profession other than physical therapy . . . who is working under the direct supervision of a physical therapist or physical therapist assistant, as delegated by the physical therapist, and is performing tasks and duties related to the delivery of physical therapy.” When acting under the direction of a physical therapist, licensed athletic trainers are considered other licensed personnel. In accordance with rule 4755-27-04 of the Administrative Code, the supervising physical therapist or physical therapist assistant is accountable and responsible at all times for the direction of the actions of the persons supervised, including other licensed personnel. If the physical therapist or physical therapist assistant is unavailable to appropriately supervise the athletic trainer, then the athletic trainer cannot provide the treatment. Other licensed personnel cannot be assigned their own physical therapy caseload without the supervising physical therapist or physical therapist assistant having direct contact with each patient during each visit. It is the responsibility of the physical therapist to determine and document the extent of contact necessary to assure safe patient care. Pursuant to rule 4755-27-03 (F) of the Ohio Administrative Code, “Delegation of tasks related to the operation and delivery of physical therapy to other licensed personnel must be done in accordance with the scope of practice of the other licensed personnel’s professional license, education and training, the level of competence as determined by the supervising physical therapist, and in consideration of the patient’s overall needs and medical status.” In accordance with rule 4755-27-03 (D) of the Ohio Administrative Code, a physical therapist may choose to refer a patient to another discipline, including physicians, for services. This referral shall be documented by the physical therapist in the medical record to clearly demonstrate a referral for that service. Such referral will not be a delegation of tasks or duties of physical therapy.

**JB2. Andrew Brown, PT, DPT:** Dr. Brown asked the Athletic Trainers and Physical Therapy Sections for clarification on billing codes for time spent on filming and educating the client. **Reply:** Nothing in the Ohio Athletic Training Practice Act prevents athletic trainers from billing for services. However, employers may restrict your practice due to billing or other protocol issues. The Athletic Trainers Section suggests you contact the Ohio Athletic Trainers Association or the National Athletic Trainers Association or refer to CPT codes listed under physical medicine. Your questions relate to payer policies and not to the Ohio Physical Therapy Practice Act. The Physical Therapy Section recommends that you contact the appropriate insurance company or the Ohio Chapter or Reimbursement Department of the American Physical Therapy Association.

### **Old Business**

#### **Audience- Specific Presentation Update**

This item was tabled until the strategic planning retreat meeting.

### **New Business**

#### **Rules Hearing**

The Section held a public rules hearing from 10:33 am to 10:39 am.

### **New Liaison Position**

The Section discussed assigning a Board member to serve as a Rules Liaison to work with the Executive Director on any interactions with stakeholders regarding input on potential rules changes. The Section agreed that the Section

Chair should be the Rules Liaison. Therefore, Brian Hertz will serve as the Rules Liaison for the Athletic Trainers Section.

**Ohio Athletic Trainers Association (OATA)**

The new OATA Executive Committee took office in December 2011. Paul Miller was elected as President. Jeff Sczpanski was elected as Vice-President for Governmental Affairs.

**Items for the Next Meeting**

- Audience-specific Presentations Update
- Retreat Planning

**Next Meeting Date**

The next meeting date of the Athletic Trainers Section will be Thursday, March 8, 2012.

**Adjournment**

**Action:** Vincent O'Brien moved that the meeting be adjourned. Jason Dapore seconded the motion. The motion carried. The meeting adjourned at 10:42 a.m.

Respectfully submitted,  
Diane Moore

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Brian Hertz, AT, Chair  
Ohio Occupational Therapy, Physical Therapy, and  
Athletic Trainers Board, Athletic Trainers Section

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Vincent O'Brien, AT, Secretary  
Ohio Occupational Therapy, Physical Therapy, and  
Athletic Trainers Board, Athletic Trainers Section

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Jeffrey M. Rosa, Executive Director  
Ohio Occupational Therapy, Physical Therapy, and  
Athletic Trainers Board

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