

**HHPK/HHPA 213**  
**Prevention and Care of Athletic Injuries**  
**Revised Syllabus – 08/2005**

Section: 001 – MWF, 11:00am – 11:50am, Field House – Rm. 201

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**I. COURSE NUMBER AND TITLE:**

HHPK/HHPA 213 - Prevention and Care of Athletic Injuries

**II. COURSE TEXT BOOK:**

Pfeiffer, R., Mangus, B., Concepts of Athletic Training, 4<sup>th</sup> ed., Jones and Barlett, Inc., 1998

**III. CATALOG DESCRIPTION:**

HHPK 213 *Prevention and Care of Athletic Injuries*. Three semester hours.

(Crossed Referenced to HHPA 213 for Athletic Training Majors)

A lecture course designed to provide entry-level knowledge in the field of sports related injuries. Content areas include: basic anatomy of common injuries, emergency procedures, evaluation techniques, medical conditions affecting athletes and preventive measures to reduce the incidence of injuries. Standard treatment protocols and legal and ethical issues are also discussed. Course fees and lab fees are listed in the current course schedule. Prerequisite: HHPK 172 or anatomy course or consent of instructor.

**IV. GENERAL INFORMATION:**

This course is a lecture course for coaches, student athletic trainers, and health/physical education majors specifically dealing with the art and science of injury prevention for the physically active population. Depending on the size of the class and that the basic format for the course is a lecture format, only a small amount of “hands on” instruction will be given as required for tape application. Additional learning opportunities are available; see the instructor for details.

**V. COURSE OBJECTIVES:**

ExCET OBJECTIVES

**Domain I – Promoting Physical Development.**

Competency 001 --The student will learn motor development and principles of motor learning.

Course Objectives:

1. To learn the development of fundamental skills
2. To understand biomechanics of running and throwing

Competency 002 – The student will learn to apply the principles and concepts of fitness and fitness development.

Course Objectives:

1. To learn principles of fitness and fitness development.
2. To learn exercise science; anatomy, physiology, and kinesiology
3. To learn risk factors related to fitness and exercise

Competency 004 – The student will learn health, nutrition, and safety principles and practices related to fitness/performance.

Course Objectives:

1. To understand cardiovascular and personal health risk factors.
2. To learn health related safety practices.

**Domain II – Promoting Affective, Social, and Cognitive Development**

Competency 007 – The student will learn how to promote knowledge and cognitive skills in relation to lifetime fitness and wellness.

Course Objective:

1. To learn and develop habits for lifetime fitness and well-being.

**Domain III – Implementing Physical education Programs**

Competency 010 – The student will learn management and supervision skills to establish positive climate that encourages achievement.

Course Objectives:

1. To learn to organize teaching environments and equipment.

Competency 011 – The student will understand legal, ethical, medical, and safety issues.

Course Objectives:

1. To learn legal terms and requirements of working with physically active individuals.

2. To learn what a coach's/teacher's/athletic trainer's responsibility is regarding liability and negligence.

3. To learn and understand ethical and medical issues related to working with physically active individuals.

4. To learn and understand safety and emergency principles and procedures.

### **Additional Objectives**

- A. The student will learn the basic principles of emergency care for injuries and illness. (Athletic Training Domain – Acute Care of Injuries and Illness)
- B. The student will learn the muscles, tendons, bones, and nerves and the injuries that occur to them. (Athletic Training Domain – Assessment and Evaluation)
- C. The student will learn assessment techniques for evaluating upper and lower extremity injuries. (Athletic Training Domain – Assessment and Evaluation)
- D. The student will observe demonstrations of basic taping skills to be applied for supportive and preventive purposes. These demonstrated will be by the instructor, and video tapes. (Athletic Training Domain – (Athletic Training Domain – Risk Management and Injury Prevention)
- E. The student will learn to recognize specific athletic injuries associated with the various body parts and specific sports. (Athletic Training Domain – Risk Management and Injury Prevention)
- F. The student will learn appreciation for the injured student-athlete/physical education student/or physically active person. They will learn the ethical and legal responsibilities of the coach/teacher/trainer to provide appropriate care. (Athletic Training Domain – Health Care Administration)
- G. The student will be able to discuss current issues in the field of sports that relate to sports injuries. (Athletic Training Domain – Professional Development and Responsibilities)
- H. To be able to research Sports Medicine topics on the Internet. (Athletic Training Domain – Professional Development and Responsibilities)

### **Athletic Training Majors Competencies:**

#### **PROFICIENCIES INSTRUCTED:**

##### Risk Management and Injury Prevention

- 1 - 1A : The student will assess the following:
  - a. height
- 1 - 1B : The student will assess the following:
  - b. weight
- 1 - 1C : The student will assess the following:
  - c. blood pressure
- 1 - 1D : The student will assess the following:
  - d. pulse
- 1 - 1E : The student will assess the following:
  - e. limb girth
- 1 - 1F : The student will assess the following:
  - f. limb length
- 1 - 1G : The student will assess the following:
  - g. vision using a Snellen eye chart
- 3 - 1 : a. use a sling psychrometer
  - b. use a wet bulb globe index
  - c. interpret and present environmental data for the following conditions: heat; wind; humidity; potential for lightning strike; cold; poor air quality
  - d. check an activity setting for physical and/or environmental hazards
  - e. use and interpret weight charts
- 4 - 1A : The student will select and fit the following protective equipment:
  - a. protective helmet and head gear
- 4 - 1B : The student will select and fit the following protective equipment:
  - b. protective shoulder pads
- 4 - 1C : The student will select and fit the following protective equipment:
  - c. footwear for physical activity

- 4 - 1D : The student will select and fit the following protective equipment:
  - d. mouth guard
- 4 - 1E : The student will select and fit the following protective equipment:
  - e. rib brace/guard
- 4 - 1F : The student will select and fit the following protective equipment:
  - f. prophylactic ankle brace
- 4 - 1G : The student will select and fit the following protective equipment:
  - g. prophylactic knee brace
- 8 - 1 : The student will construct, apply, and remove the following protective devices:
  - a. bony prominence pad      e. friction pad ("doughnut" pad)
  - b. muscle contusion pad      f. checkrein device
  - c. soft playing cast (e.g., silicone, thermofoam)
  - d. hard, immobilization splint or cast (e.g., thermoplastic, plaster, fiberglass)
- 9 - 1A : The student will demonstrate the ability to tape, splint, wrap, pad or brace the following joints to limit motions:
  - a. cervical spine
  - f. lumbar spine
- 9 - 1B : The student will demonstrate the ability to tape, splint, wrap, pad or brace the following joints to limit motions:
  - b. shoulder joint and girdle
  - c. elbow
  - d. wrist
  - e. hand and fingers
- 9 - 1G : The student will demonstrate the ability to tape, splint, wrap, pad or brace the following joints to limit motions:
  - g. hip and pelvis
  - h. knee
  - i. leg
  - j. ankle
  - k. foot and toes

Assessment and Evaluation

- 1 - 1AD : The student will recognize the following postural deviations and predisposing conditions:
  - a. kyphosis
  - b. lordosis
  - c. scoliosis
  - d. pelvic obliquity
  - f. hip anteversion and retroversion
- 1 - 1EK : The student will recognize the following postural deviations and predisposing conditions:
  - e. tibial torsion
  - g. genu valgum, varum, and recurvatum
  - h. rearfoot valgus and varus
  - i. forefoot valgus and varus
  - j. pes cavus and planus
  - k. foot and toe posture
- 1 - 3 : The student will identify and classify body types as
  - a. endomorph
  - b. ectomorph
  - c. mesomorph
- 2 - 1A : The student will
  - a. use standardized record keeping methods (e.g., SOAP, HIPS, HOPS)
  - b. select and use injury, rehabilitation, referral, and insurance documentation
  - c. use progress notes
- 6 - H1 : obtain the medical history of an ill or injured athlete or other physically active individual suffering from a head injury.
- 6 - H2 : observe and identify the clinical signs and symptoms associated with head injury:
  - a. amnesia (retrograde or post-traumatic)      f. pupil and eye movements
  - b. levels of consciousness      g. pulse
  - c. orientation (person, time, place orientation)      h. blood pressure
  - d. intracranial hematoma      i. facial postures
  - d. balance and coordination
- 6 - H3 : observe and identify the clinical signs and symptoms associated with eye injuries and illnesses:
  - a. orbital blowout fracture      e. detached retina
  - b. conjunctivitis      f. hyphema
  - c. corneal abrasion      g. styte
  - d. corneal laceration
- 6 - H4 : observe and identify the clinical signs and symptoms associated with an ear injury or illness:
  - a. pinna hematoma ("cauliflower ear")      c. otitis externa
  - b. impacted cerumen      d. otitis media
- 6 - H5 : observe and identify the clinical signs and symptoms associated with nose injury:
  - a. deviated septum
  - b. epistaxis
  - c. nasal fracture
- 6 - H6 : observe and identify the clinical signs and symptoms associated with jaw, mouth, or tooth injury or illness:
  - a. gingivitis      g. tooth abscess

- b. mandibular fracture
  - c. maxilla fracture
  - d. periodontitis
  - e. temporomandibular joint dislocation
  - f. temporomandibular joint dysfunction
  - h. tooth extrusion
  - i. tooth fracture
  - j. tooth intrusion
  - k. tooth luxation
- 6 - H7 : administer appropriate sensory, neurological, and circulatory tests for the head and face
- 6 - H8 : administer functional tests and activity-specific tests for head and face injuries.
- 6 - H9 : identify, palpate, and assess the integrity of bony landmarks of the head and face.
- 6 - H10 : identify, palpate, and assess the integrity of soft tissue of the head and face.
- 6 - H11 : administer commonly used special tests to make a differential assessment of the following:
- a. cranial nerves (e.g., eye motion, facial muscles)
  - b. cognitive tests (e.g., recall, serial 7s, digit span)
  - c. cerebellar function (e.g., Romberg's test, finger-to-nose test, heel-toe walking, heel-to-knee standing)
  - d. spinal nerve roots (e.g., upper quarter screen)
- 6 - C1 : obtain the medical history of an ill or injured athlete or other physically active individual suffering from a cervical spine injury.
- 6 - C2 : observe and identify the clinical signs and symptoms associated with common injuries, illnesses, and predisposing conditions:
- a. atrophy
  - b. dislocation or subluxation
  - c. vertebral fracture
  - d. head and neck posture
  - e. intervertebral disc herniation
  - f. nerve root compression or stretch
  - g. ischemia
  - h. torticollis
- 6 - C9 : administer commonly used special tests to make a differential assessment of the cervical spine:
- a. nerve root compression (e.g., distraction/compression test, Spurling's test, shoulder depression test)
  - b. brachial plexus neuropathy (e.g., brachial tension test, Tinel's sign)
  - c. cervical disc herniation (e.g., Valsalva's maneuver)
  - d. neurovascular dysfunction (e.g., vertebral artery test)
- 6 - S1 : obtain the medical history of an ill or injured athlete or other physically active individual suffering from a shoulder injury.
- 6 - S2 : observe and identify the clinical signs and symptoms associated with common injuries, illnesses, and predisposing conditions:
- a. atrophy
  - b. bursitis
  - c. dislocation or subluxation
  - d. efficiency of movement
  - e. fracture
  - f. sprain
  - g. nerve injury
  - h. positioning (Sprengel's deformity)
  - i. strain
  - j. scapulohumeral rhythm
  - k. scapular winging
  - l. step deformity
  - m. symmetry
  - n. tenosynovitis and tendonitis
- 6 - S7 : identify and palpate bony landmarks of the shoulder
- 6 - S8 : identify and palpate soft tissue landmarks of the shoulder.
- 6 - S9 : administer commonly used special tests to make a differential assessment of the following
- a. glenohumeral instability (e.g., anterior drawer test, posterior drawer test, relocation test, apprehension test, clunk test, sulcus sign)
  - b. acromioclavicular instability (e.g., shear test, compression test)
  - c. rotator cuff impingement/inflammation (e.g., Speed's test, drop arm test, empty can test, impingement test, Hawkins-Kennedy impingement test, Neer impingement test, pectoralis major contracture test)
  - d. biceps and biceps tendon pathology (e.g., Yergason's test, Ludington's test)
  - e. thoracic outlet syndrome (e.g., Adson's maneuver, Allen test, military brace position)
- 6 - E1 : obtain the medical history of an ill or injured athlete or other physically active individual suffering from elbow pathology.
- 6 - E2 : observe and identify the clinical signs and symptoms associated with common injuries, illnesses, and predisposing conditions:
- a. symmetry
  - b. carrying angle (cubital valgus and varus)
  - c. dislocation or subluxation
  - d. fracture
  - e. atrophy
  - f. efficiency of movement
  - g. bursitis
  - h. epicondylitis
  - i. tenosynovitis and tendonitis
  - j. osteochondritis dissecans
  - k. sprain
  - l. strain
  - m. nerve injury
- 6 - E7 : identify, palpate, and interpret the integrity of bony landmarks of the elbow
- 6 - E9 : identify, palpate, and interpret the integrity of the soft tissue of the elbow.
- 6 - E9 : administer commonly used special tests to make a differential assessment of the following
- a. joint instability (e.g., valgus stress test, varus stress test)
  - b. inflammatory conditions (e.g., tests for lateral epicondylitis, tests for medial epicondylitis)
  - c. neuropathy (e.g., Tinel's sign, pronator teres syndrome, pinch grip test)
- 6 - F1 : obtain the medical history of an ill or injured athlete or other physically active individual suffering a forearm, wrist, or hand pathology.
- 6 - F2 : observe and identify the clinical signs and symptoms associated with the following
- a. fracture (Colles' fracture, Bennett's fracture, carpal fracture ["boxer's fracture"], metacarpal fracture, phalanges fracture)
  - b. dislocation or subluxation
  - c. disease states (e.g., clubbed nails, spoon-shaped nails)

- d. soft tissue pathology (e.g., sprain, flexor tendon avulsion [jersey finger sign], extensor tendon avulsion [mallet finger], extensor tendon rupture [boutonniere deformity], volar plate rupture [pseudo-boutonniere deformity], Dupuytren's contracture, ganglion, swan neck deformity, trigger finger)
- e. neurovascular involvement (e.g., carpal tunnel syndrome, bishop's or benediction deformity, ape hand, claw fingers, drop-wrist deformity, Volkmann's contracture)
- 6 - F7 : identify, palpate, and interpret the integrity of bony landmarks for the forearm, wrist, and hand.
- 6 - F8 : identify, palpate, and interpret the integrity of soft tissue for the forearm, wrist, and hand.
- 6 - E9 : administer commonly used special tests to make a differential assessment of the following
  - a. joint instability (e.g., valgus stress test, varus stress test)
  - b. inflammatory conditions (e.g., tests for lateral epicondylitis, tests for medial epicondylitis)
  - c. neuropathy (e.g., Tinel's sign, pronator teres syndrome, pinch grip test)
- 6 - T1 : obtain the medical history of an ill or injured athlete or other physically active individual of the thorax and lumbar spine.
- 6 - T2 : observe and identify the clinical signs and symptoms associated with common injuries, illnesses, and predisposing conditions:
  - a. café au lait macules (spots)
  - b. dislocation or subluxation
  - c. spina bifida occulta
  - d. facet syndrome
  - e. intervertebral disc pathology
  - f. spinal posture (kyphosis/ lordosis)
  - g. leg length discrepancies
  - h. nerve root compression
  - i. sacroiliac dysfunction
  - j. scoliosis
  - k. sprain
  - l. stenosis
  - m. step deformity
  - n. strain
  - o. vertebral pathology (e.g., spondylitis, spondylolysis, spondylolisthesis)
- 6 - T7 : identify, palpate, and interpret the integrity of bony landmarks of the thoracic and lumbar spine.
- 6 - T8 : identify, palpate, and interpret the integrity of soft tissue of the thoracic and lumbar spine.
- 6 - T9 : administer commonly used special tests to make a differential assessment of the following:
  - a. intervertebral disc herniation (e.g., Valsalva's maneuver)
  - b. neuropathy (e.g., straight leg raise test, well straight leg test, Babinski's reflex test, Oppenheim's gait test, Kernig's sign, Brudzinski sign test, bowstring test, Hoover sign test)
  - c. vertebral defects (e.g., stork standing test/spondylolisthesis test)
  - d. joint instability (e.g., spring test)
- 6 - P1 : obtain the medical history of an ill or injured athlete or other physically active individual for hip/pelvis pathology.
- 6 - T2 : observe and identify the clinical signs and symptoms associated with common injuries, illnesses, and predisposing conditions:
  - a. leg length discrepancies
  - b. hip retroversion
  - c. hip anteversion
  - d. Legg-Calve-Perthes disease
  - e. apophysitis
  - f. slipped capital femoral epiphysis
  - g. dislocation or subluxation
  - h. fracture
  - i. stress fracture
  - j. osteitis pubis
  - k. athletic pubalgia
  - l. bursitis
  - m. piriformis syndrome
  - n. iliotibial band syndrome
  - o. contusion
  - p. sprain
  - q. strain
  - r. tendonitis
- 6 - P7 : identify, palpate, and interpret the integrity of bony landmarks of the hip/pelvis.
- 6 - P8 : identify, palpate, and interpret the integrity of soft tissue of the hip and pelvis.
- 6 - P9 : administer commonly used special tests to make a differential assessment of the following:
  - a. sacroiliac dysfunction (e.g., Patrick's/FABER, Gaenslen's test, pelvic compression/distraction test)
  - b. neuropathy (e.g., femoral nerve traction test)
  - c. neuromuscular pathology (e.g., Trendelenburg test, Thomas test, rectus femoris contracture test, Ober test, Noble's test, piriformis test)
- 6 - K1 : obtain the medical history of an ill or injured athlete or other physically active individual suffering from knee pathology.
- 6 - K2 : observe and identify the clinical signs and symptoms associated with common injuries, illnesses, and predisposing conditions:
  - a. bursitis
  - b. chondromalacia patella
  - c. dislocation and subluxation
  - d. fat pad contusion
  - e. fracture
  - f. leg length
  - g. meniscal tear
  - h. Osgood-Schlatter disease
  - i. osteochondritis dissecans
  - j. patellar alignment (e.g., patella alta, patella baja, squinting patella, Q angle)
  - k. patellar tendon rupture
  - l. peroneal nerve contusion or palsy
  - m. popliteal cyst
  - n. sprain
  - o. strain
  - p. tendonitis
  - q. tibial torsion
  - r. tibiofemoral alignment (e.g., ...)
- 6 - K7 : identify, palpate, and interpret the integrity of bony landmarks of the knee
- 6 - K8 : identify, palpate, and interpret the integrity of soft tissue of the knee.
- 6 - K9 : administer commonly used special tests to make a differential assessment of the following:
  - a. uniplanar stress tests (e.g., valgus stress test, varus stress test, Lachman test, anterior drawer test, posterior drawer test, posterior sag sign)
  - b. multiplanar (rotational) stress tests (e.g., Slocum test, Hughston's test, lateral pivot shift maneuver)
  - c. meniscal tears (e.g., McMurray's test, Apley's test)
  - d. patellofemoral dysfunction (e.g., grind test, apprehension test)
  - e. intra-extracapsular swelling (e.g., sweep test, ballotable patella)

- 6 - A1 : obtain the medical history of an ill or injured athlete or other physically active individual suffering from foot, ankle, or leg pathology.
- 6 - A2 : observe and identify the clinical signs and symptoms associated with the following common injuries, illnesses, and predisposing conditions:
  - a. overuse injuries; b. Achilles tendon rupture; c. compartment syndromes; d. apophysitis; e. dislocation or subluxation; f. foot type/structure; g. fracture; h. deep vein thrombosis; i. neuroma; j. osteochondritis dissecans; k. sprain; l. strain; m. toe structure/alignment; n. weight-bearing versus non-weight-bearing alignment; o. gait
- 6 - A7 : identify, palpate, and interpret the integrity of bony landmarks for the foot, ankle, and lower leg.
- 6 - A8 : identify, palpate, and interpret the integrity of soft tissue of the foot, ankle, and lower leg.
- 6 - A9 : administer the following commonly used special tests to make a differential assessment:
  - a. compression test      e. talar tilt test
  - b. percussion test      f. Thompson test
  - c. anterior drawer test    g. Tinel's sign
  - d. Kleiger's test      h. Homans' sign

#### Acute Care of Injuries and Illnesses

- 1 - 1 : The student will demonstrate the ability to implement an EAP for an activity, setting, or event.
- 2 - 1 : The student will demonstrate the ability to
  - a. manage open and closed wounds
  - b. apply direct and indirect pressure to control bleeding
  - c. clean, debride, and protect an open wound
  - d. apply superficial skin closures
  - e. properly apply and remove gloves and other personal protective equipment
  - f. properly dispose of biohazardous waste
  - g. apply appropriate dressings
  - h. apply ice, compression, and elevation to an acute sprain, strain, or contusion
- 3 - 1A : The student will demonstrate the ability to
  - a. select and apply an appropriate splint to a sprain, strain, fracture, subluxation, and dislocation
- 3 - 1B : The student will demonstrate the ability to
  - b. stabilize and spine board or body splint an adult or child with a suspected spinal injury
- 4 - 1 : The student will evaluate and manage the following:
  - a. heat exhaustion      c. heat stroke
  - b. heat syncope      d. hypothermia

#### Pharmacology

- 2 - 1 : Locate the phone number and address of the nearest poison control center and replicate the reporting of a drug overdose or poisoning situation. The report should state the following information:
  - a. name and location of person making the call
  - b. name and age of person who has taken the medication
  - c. name and dosage of the drug taken
  - d. time the drug was taken
  - e. signs and symptoms associated with overdose or poison situation, including vital signs
- 3 - 1 : Replicate the following procedures for using an emergency epinephrine injection to prevent anaphylaxis:
  - a. identify indications for an epinephrine injection
  - b. demonstrate proper use through verbal and nonverbal instruction
  - c. identify signs and symptoms that might indicate an allergic reaction to or overdose of epinephrine
  - d. demonstrate proper storage of epinephrine injectable
  - e. demonstrate proper disposal of used injection system
- 3 - 2 : Replicate the following procedures for using an emergency bronchodilator (inhaler) to prevent asthma attacks:
  - a. identify indications for use of a bronchodilator
  - b. demonstrate proper use through verbal and nonverbal instruction
  - c. identify signs and symptoms that might indicate an allergic reaction to or overdose of a bronchodilator
  - d. demonstrate proper storage of a bronchodilator

#### Therapeutic Modalities

- 1 - 1 : The student will perform a physical examination to identify the current inflammatory stage.
- 1 - 2 : The student will perform a physical examination and interview to identify the indications, contraindications, and precautions to various treatment protocols.
- 2 - C1 : The student will demonstrate the ability to select the appropriate parameters for and then prepare and apply the following:
  - a. cold whirlpool treatment      e. ice immersion
  - b. controlled cold therapy unit    f. ice massage
  - c. ice pack      g. cryokinetics
  - d. vapo-coolant spray
- 2 - H1 : The student will demonstrate the ability to select the appropriate parameters for and then prepare and apply the following:
  - a. moist heat pack      c. contrast bath
  - b. paraffin treatment    d. warm whirlpool treatment

#### General Medical Conditions and Disabilities

- 1 - 1 : Obtain a basic medical history that includes the following components:
  - a. previous medical history      d. current medication history
  - b. previous surgical history      e. relevant social history
  - c. pertinent family medical history    f. chief medical complaint
- 1 - 4 : Palpate the four abdominal quadrants to assess for the following:
  - a. guarding and rigidity
  - b. pain

1 - 91 : Recognize the signs, symptoms, and predisposing conditions associated with the following diseases and conditions:  
The Skin  
[See List]

Gastrointestinal Tract

1 - 96 : Recognize the signs, symptoms, and predisposing conditions associated with the following diseases and conditions:  
 a. appendicitis                      f. gastritis  
 b. colitis                                g. gastroenteritis  
 c. constipation                        h. indigestion  
 d. diarrhea                            i. ulcer  
 e. esophageal reflux                j. irritable bowel syndrome

**PROFICIENCIES EVALUATED:**

None

**VI. OUTLINE FOR COURSE CONTENT:**

See attached sheet

**VII. COURSE ASSIGNMENTS AND REQUIREMENTS:**

- A. Reading assignments are given daily from the textbook and handouts.
- B. Handouts and Internet assignments are given to correspond with the chapter readings.
- C. Review sheets/study guides are given out before the exams. The student is expected to complete these review sheets and turn them in to the instructor on time.
- D. Homework assignments will be given.
- E. Ten article abstracts will be due throughout the semester.
- F. Two projects must be completed by the end of the semester.

**VIII. GRADING AND EVALUATION PROCEDURES:**

<b>Examinations – 50%</b>	
Unit I Test	100pts
Unit II Test	100pts
Unit III Test	100pts
Unit IV Test	<u>100pts</u>
Total Points =	400pts
<b>Seminars/Projects/Papers – 30% (must choose 2 projects)</b>	
Project 1 - Doctor's Lecture/Seminar (AT Students mandatory)	120pts
Project 2 - AT Observation	120pts
Project 3 - Research Paper	120pts
Project 4 – Ten Article Summaries	<u>120pts</u>
Total Points =	240pts
<b>Quizzes/Assignments – 15%</b>	
7 Quizzes	70pts
5 Assignments	<u>50pts</u>
Total Points =	120pts
<b>Course Notebook – 5%</b>	
Completed Course Notebook	<u>40pts</u>
Total Points =	40pts
<b>TOTAL OVERALL POINTS =</b>	<b>800pts</b>

Examinations: Worth 400 pts.

There are four units within this course. At the end of each unit there will be a unit test. Each test will be worth 100 points. The final exam is non-comprehensive. There will be a review for each unit test consisting of short answer questions. You may complete the review and turn it in for a possible 5 points added to that test grade.

Seminars/Projects/Papers: Worth 120 pts. Ea.(You must choose & complete 2 out of the 4 projects listed)

**Project#1–Doctor's Lecture/Seminar:**

There will be doctor's seminars throughout the semester. Times and dates will be announced at the beginning of the semester. You must attend 4 seminars and write a one page summary of what the doctor discussed and how well you thought he/she did. (This project is mandatory for pre-professional level athletic training students)

**Project #2-AT Observation:**

You must attend/observe ten competitions and keep a record of attendance on an ATEP Event Form. This must be done with a Program Staff Athletic Trainer. Supervising coaches will not count. You must keep a log/journal of what you observe for each competition.

**Project #3-Research Paper:**

You must type a research paper covering a specific sports injury. This paper is to be six pages in length, double-spaced & 12pt font. The paper's subject must be approved by the instructor.

**Project #4-Ten Article Summaries:**

To be read and reviewed: These ten articles must be from professional medical journals or trusted medical Internet sources. Each article must have a Title, specific Author(s), Abstract, and full Bibliography. "Information Sheets" or "ESPN injury reports" will not be accepted as an article. A one-page summary with a copy of the article must be submitted to the instructor in a binder/folder. Keep all articles together in the same binder/folder.

**Quizzes/Assignments:** Worth 120 pts.

Quizzes: There will be announcements of quizzes throughout the class. There will be 7 quizzes worth up to 10 points each.

Assignments: There will be 5 class specific assignments worth 10 points each.

**Course Notebook:** Worth 40 pts.

You must keep every assignment, article, project, quiz, etc., in a course notebook. All notebooks will be checked/turned in at the end of the semester to be evaluated. A three-ring binder is preferred.

**IX. SELECTED BIBLIOGRAPHIES:**

1. Arnheim, D., Modern Principles of Athletic Training, 10th ed., Time/Mirror/Mosby, 1999.
2. Broother, J., Thibodeau, G. , Athletic Injury Assessment, 4<sup>th</sup>, Time/Mirror/Mosby, 1993.
3. AAOS, Athletic Training and Sports Medicine, American Academy of Othopaedic Surgeons, 2nd., 1991

**X. ATTENDANCE POLICY:**

Attendance is mandatory, must contact instructor regarding family, personal or illness situations.  
Three unexcused absences – dropped one letter grade  
Six unexcused absences – dropped from course

**XI. DISABILITY ACCOMODATIONS:**

Students requesting accommodations for disabilities must go through the Academic Support Committee. For more information, please contact the Director of Disability Resources and Services, Halladay Student Services Building, Room 303D, (903) 886-5835

**XII. BEHAVIOR POLICY:**

\*\*All students enrolled at the University shall follow the tenets of common decency and acceptable behavior conducive to a positive learning environment. (See Student's Guide Handbook, Policies and Procedures, Conduct)

**HHPA/HHPK 213 - Course Outline**  
**Prevention & Care of Athletic Injuries**  
 T & R - 11:00 AM - Field House, Rm 201  
 SPRING 2006

Week	Da	Activities	Daily Topics/Assignments due
1 (1/17)	T	Course Introduction	Review Syllabus; Tape tearing
	R	Intro to Taping	Basic taping of ankle
2 (1/24)	T	Chapter 1 – Concept of Sports Medicine	What is Sports Medicine? Injury Definitions/Classifications; Statistics
	R	Chapter 2 – The Sports Medicine Team Chapter 3 – The Law & Sports Injury	Sports Medicine Team; Sports Law; AT Education; AT Settings; <b>Quiz #1</b>
3 (1/31)	T	Chapter 4 – Sports Injury Prevention	Fitness Components; Periodization
	R	Chapter 4 – Sports Injury Prevention	PPE's; Key Terms; <b>Quiz #2</b> Debunking Fitness/Training Myths; <b>Assignment #1</b>
4 (2/7)	T	<b>EXAM I</b>	<b>Review I</b>
	R	Chapter 7 – Emergency Plan & Initial Injury Evaluation	EAP's; Primary Survey
5 (2/14)	T	Chapter 8 – The Injury Process	Secondary Survey; <b>Assignment #2</b> Tissue Types; Mechanical Forces
	R	Chapter 8 – The Injury Process	Tissue Healing Phases
6 (2/21)	T	Chapter 17 – Skin Conditions in Sports	Pain Modulation; Cryo/Thermo Therapy Wound Care; OSHA-Univ. Prec.
	R	Chapter 17 – Skin Conditions in Sports	Burns, Infections, Dermatitis; <b>Quiz #3</b>
7 (2/28)	T	Chapter 18 – Thermal Injuries	Heat & Cold Illnesses-Eval & Treat <b>Assignment #3</b>
	R	Chapter 19 – Other Medical Concerns	Common Diseases/Illnesses/Conditions URI/LRI's
8 (3/7)	T	<b>EXAM II</b>	<b>Review II</b>
	R	Chapter 9 – Injuries to the Head, Neck & Face	Head/Neck Anatomy; Intracranial Injuries
		<b>SPRING BREAK</b>	<b>NO SCHOOL</b>
9 (3/21)	T	Chapter 9 – Injuries to the Head, Neck & Face	Assessment/Treatment; Ear/Nose/Teeth; <b>Quiz #4</b>
	R	Chapter 10 – Injuries to the Thoracic Through Coccygeal Spine	Spinal Anatomy & Injury Assessment
10 (3/28)	T	Chapter 11 – Injuries to the Shoulder Region	Shoulder Anatomy; Common Injuries
	R	Chapter 11 – Injuries to the Shoulder Region	Injury Assessment; <b>Quiz #5</b>
11 (4/4)	T	Chapter 12 – Injuries to the Arm, Wrist & Hand	Lower Arm Anatomy; Common Injuries,
	R	Chapter 12 – Injuries to the Arm, Wrist & Hand	<b>Assignment #4</b>
12 (4/11)	T	<b>EXAM III</b>	<b>Review III</b>
	R	Chapter 13 – Injuries to the Chest & Abdomen	Thorax/Abdomen Anatomy Common Injuries & Assessment
13 (4/18)	T	Chapter 14 – Injuries to the Hip & Pelvis	Hip/Pelvis Anatomy; Common Injuries
	R	"	Injury Assessment; <b>Quiz #6</b>
14 (4/25)	T	Chapter 15 – Injuries to the Thigh, Leg & Knee	Upper Leg Anatomy; Common Injuries
	R	"	Injury Assessment; <b>Assignment #5</b>
15 (5/2)	T	Chapter 16 – Injuries to the Lower Leg, Ankle & Foot	Lower Leg Anatomy
	R	"	Common Injuries; Assessment; <b>Quiz #7</b>
16 (5/9)	T	<b>FINAL EXAM; 10:30-12:30PM</b>	<b>Review IV; Notebooks/Projects Due All Projects &amp; Course Notebooks Due</b>