

Advisory Board on Athletic Training

Virginia Board of Medicine

June 8, 2017

10:00 a.m.

Advisory Board on Athletic Trainers

Board of Medicine
June 8, 2017, 10:00 a.m.
9960 Mayland Drive, Suite 201
Richmond, Virginia

Call to Order – Michael Puglia, AT

Emergency Egress Procedures - Alan Heaberlin

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Roll Call – ShaRon Clanton

Approval of Minutes of October 6, 2016

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Adoption of the Agenda

Public Comment on Agenda Items (15 minutes)

New Business

1. Athletic Trainers Who Work at Youth Sports Events.
Sara Whiteside, AT

2. Cross State Border Coverage
Sara Whiteside, AT

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3. Letter from David Ross, MD, Regarding Reducing Risk from
Subconcussions

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Announcements

Next meeting date: October 5, 2017 @ 10:00 a.m.

Adjournment

PERIMETER CENTER CONFERENCE CENTER
EMERGENCY EVACUATION OF BOARD AND TRAINING ROOMS
(Script to be read at the beginning of each meeting.)

PLEASE LISTEN TO THE FOLLOWING INSTRUCTIONS ABOUT EXITING THESE PREMISES IN THE EVENT OF AN EMERGENCY.

In the event of a fire or other emergency requiring the evacuation of the building, alarms will sound.

When the alarms sound, leave the room immediately. Follow any instructions given by Security staff

Board Room 1

Exit the room using one of the doors at the back of the room. **(Point)** Upon exiting the room, turn **RIGHT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

Board Room 2

Exit the room using one of the doors at the back of the room. **(Point)** Upon exiting the room, turn **RIGHT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

You may also exit the room using the side door **(Point)**, turn **Right** out the door and make an immediate **Left**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

Board Rooms 3 and 4

Exit the room using one of the doors at the back of the room. **(Point)** Upon exiting the room, turn **RIGHT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

Training Room 1

Exit the room using one of the doors at the back of the room. **(Point)** Upon exiting the room, turn **LEFT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

DRAFT UNAPPROVED

**ADVISORY BOARD ON ATHLETIC TRAINING
MINUTES**

October 6, 2016

The Advisory Board on Athletic Training met on Thursday, October 6, 2016, at 10:00 a.m. at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Henrico, Virginia.

MEMBERS PRESENT: Michael Puglia, AT, Chair
Sara Whiteside, AT, Vice-Chair
Deborah Corbatto, AT
Jeffrey Roberts, MD

MEMBER ABSENT: The Citizen Member seat is vacant

STAFF PRESENT: William L. Harp, M.D., Executive Director
Alan Heaberlin, Deputy Director for Licensure
Denise Mason, Licensing Specialist

GUESTS PRESENT: Matthew Gage, AT, President of VATA

CALL TO ORDER

Mr. Puglia called the meeting to order at 10:18 a.m.

EMERGENCY EGRESS PROCEDURES

Mr. Heaberlin announced the Emergency Egress Instructions.

ROLL CALL

Roll was called and a quorum declared.

APPROVAL OF MINUTES OF JUNE 9, 2016

Ms. Corbatto moved to approve the minutes of June 9, 2016. The motion was seconded and carried.

ADOPTION OF AGENDA

Ms. Corbatta moved to approve the agenda. The motion was seconded and carried.

PUBLIC COMMENT ON AGENDA ITEMS

There was no public comment.

NEW BUSINESS

1. Delivery Methods of Epinephrine for Athletic Trainers.

Mr. Puglia led the Advisory Board in a discussion regarding the price increases for the EpiPen. Mr. Puglia explained that, currently, most schools use the EpiPen as well as EMS services but due to the cost increases, many of these organizations have decided to no longer obtain these devices. The Advisory Board discussed alternative means of epinephrine delivery including other brands of auto injectors as well as a standard needle, syringe and glass vial. The authority of athletic trainers to possess and administer epinephrine for anaphylactic shock in 54.1-3408(F) was reviewed as well as 54.1-3408(U). It was noted that for an athletic trainer to administer epinephrine by injection would require the direct and immediate supervision of a physician. No action was required.

2. Sports Medicine Licensure Clarity Act.

Mr. Puglia led the Advisory Board in a discussion regarding US Senate and US House companion bills that "In General. -If a covered sports medicine professional provides covered medical services to an athlete, an athletic team, or a staff member of an athlete or athletic team in a secondary State, such services shall be deemed to have been provided in the primary State..." The Advisory Board briefly discussed the pros and cons of such legislation and noted that if these bills passed, new regulations for the practice athletic training in Virginia may be needed. No action was required.

3. Concussion Safety Protocol.

Ms. Corbatta provided the concussion protocol for George Mason University that she developed and was recently approved by the NCAA. No action was required.

4. BOC Standards of Professional Practice.

Mr. Puglia noted that he had recently come upon recently updated standards and is still reviewing them to determine if there were any changes from the previously published standards. It was

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noted by Dr. Harp that if an athletic trainer were to come before the Board for a disciplinary hearing, these new standards could play a role in determining if the standard of care in the case. No Action was required.

ANNOUNCEMENTS

Ms. Mason informed the Advisory Board that there are currently 1,556 Athletic Trainers that hold an active license with the Board of Medicine, and 1 that holds an inactive license.

NEXT MEETING DATE

February 2, 2017

ADJOURNMENT

The Advisory board meeting was adjourned at 11:32 a.m.

Michael Puglia, AT, Chair

William L. Harp, M.D., Executive Director

Denise Mason, Licensing Specialist

§ 54.1-2901. Exceptions and exemptions (from licensure) generally.

A. The provisions of this chapter shall not prevent or prohibit:

30. Any practitioner of one of the professions regulated by the Board of Medicine who is in good standing with the applicable regulatory agency in another state or Canada from engaging in the practice of that profession when the practitioner is in Virginia temporarily with an out-of-state athletic team or athlete for the duration of the athletic tournament, game, or event in which the team or athlete is competing;

18VAC85-120-75. Temporary authorization to practice.

Upon written request from an applicant and his employer and for good cause shown, an applicant who provides documentation of current NATABOC certification and, if licensed or certified by another jurisdiction in the United States, documentation that his license or certificate is current and unrestricted, may be granted temporary authorization to practice as an athletic trainer for 45 days pending submission of all other required documentation and issuance of a license. At the discretion of the board, additional time, not to exceed 15 days, may be allowed to complete the application process.

18VAC85-120-85. Registration for voluntary practice by out-of-state athletic trainers.

Any athletic trainer who does not hold a license to practice in Virginia and who seeks registration to practice on a voluntary basis under the auspices of a publicly supported, all volunteer, nonprofit organization that sponsors the provision of health care to populations of underserved people shall:

1. File a complete application for registration on a form provided by the board at least five business days prior to engaging in such practice. An incomplete application will not be considered;
2. Provide a complete record of professional certification or licensure in each state in which he has held a certificate or license and a copy of any current certificate or license;
3. Provide the name of the nonprofit organization, the dates and location of the voluntary provision of services;
4. Pay a registration fee of \$10; and
5. Provide a notarized statement from a representative of the nonprofit organization attesting to its compliance with provisions of subdivision 27 of §54.1-2901 of the Code of Virginia.

Heaberlin, Alan (DHP)

Subject: FW: Reducing risks from subconcussions

From: David Ross [<mailto:dross@vaneuropsychiatry.org>]

Sent: Friday, May 26, 2017 8:34 AM

To: Board of Medicine <medbd@DHP.VIRGINIA.GOV>

Subject: Reducing risks from subconcussions

To: Virginia Board of Medicine

Please forward this to the appropriate person overseeing athletic trainers and physicians working with sports concussion programs.

My name is David Ross. I am a licensed physician in Virginia. I am a neuropsychiatrist and brain injury specialist from Midlothian.

Recent research has found that subconcussions cause brain damage. Subconcussions are the 600 head hits that a football player gets during the season. These cause brain damage and shrinking, even if the athlete never has a full-blown concussion. This situation constitutes an important public health issue for our young athletes in Virginia and throughout the country.

Fortunately, we now have a way of detecting the effects of subconcussions on the brain so that we can monitor the risk. Our company developed NeuroGage[®], software which measures MRI brain volume over time. We can use it to measure an athlete's brain before and after the season. If the brain shrinks, the athlete should consider sitting out next season, or at least getting another MRI just before the next season, to make sure the brain volume has returned to normal.

Would you be willing to talk with me further about these important issues? I am hoping that you would support my talking with athletic trainers or physicians working with sports concussion programs about these topics.

Best wishes,

David

David E. Ross, M.D.

(804) 594-7046

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CEO, NeuroGage LLC, www.NeuroGage.com

Clinical Assistant Professor, Virginia Commonwealth University

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