Sports Medicine Club Handbook

Mission Statement

students can learn and experience aspects of Sports Medicine through observation and assistance

daily in the Athletic Training Room. The goal of Sports Medicine Club

prepare students for an education or career in Health Care.

Contact Information

Schaumburg High School

Main Office	(847)-755-4600
Athletics Office	(847)-755-4770
Athletic Training Room	(847)-755-4790

Athletic Training Staff

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ASSOCIATION: OFFICIAL STATEMENT ON PROPER SUPERVISION OF SECONDARY SCHOOL STUDENT AIDES

provides support and guidance to school administrators and athletic trainers in the education and supervision of secondary school students enrolled in sports medicine courses or volunteering in secondary school athletic training programs. The goal of this statement is to continue to foster a positive, safe learning environment where students benefit from the instruction and observation of qualified health care professionals.

Official Statement: The NATA recognizes that allowing secondary school students the opportunity to observe the daily professional duties and responsibilities of an athletic trainer can be a valuable educational experience. This unique experience may expose students to the foundations of various health related careers as well as provide them with important life skills. Regardless of practice setting, it is understood that all athletic trainers must comply with their state practice acts, the BOC Standards of Practice when certified, and the NATA Code of Ethics when a member. These legal and ethical parameters apply and limit the incorporation of student aides outside of the classroom and within the activities of athletic programs. Student aides must only observe the licensed/certified athletic trainer outside of the educational environment. Coaches and school administrators must not allow or expect student aides to assist or act independently with regard to the evaluation, assessment, treatment and rehabilitation of injuries. Additionally, it is paramount that student aides not be expected, asked or ertified athletic

trainers, coaches and administrators must not ask athletic training student aides to engage in any of the following activities:

- (1) Interpreting referrals from other healthcare providers
- (2) Performing evaluations on a patient
- (3) Making decisions about treatments, procedures or activities
- (4) Planning patient care
- (5) Independently providing athletic training services during team travel

Policies & Procedures

All students wishing to participate in the program must read this handbook and sign the commitment letter along with a parent/guardian Sports Medicine Club (SMC) members will formulate a schedule with the AT staff so that they can participate throughout the week SMC are recommended to come in for at least 6 hours a week Days in which a student will be late or absent, the student should communicate in person or email a staff member that they will not be there on their scheduled day

SMC members are encouraged to participate in Schoology tasks that will be focused on weekly learning activities and ask questions regarding each topic Those SMC members who participate in a sport will be excused from hours during their season, but are welcome to complete hours around their sports schedule

SMC Members are encouraged to wear a Schaumburg gear or Sports Medicine top and khaki or black pants/shorts if working events. During non-

Medical information within the ATR must remain confidential and is not to be shared with anyone outside of the SHS staff

Scheduling:

We try our best to accommodate multiple schedules for students in Sports Medicine Club. During the beginning of each season, we will gather information on what days will work best for each student. At that time, we will put together a

Letter to the Parents

Dear Parents/Guardian,

We would like to welcome your son/daughter to the Schaumburg Sports Medicine Club. This is an exciting opportunity for students to gain valuable experiences and provide them with an understanding of the prevention, care, and

Consent Form

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I have read the student handbook and give permission for ______ to participate in the Sports Medicine Program at