SUMMER 1

ATP 6102

EMERGENCY MANAGEMENT AND PREVENTION OF INJURY LAB

TBD

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Office Hours: Monday: 
Tuesday: 
Wednesday: 
Thursday: 
Friday:

Course Description:

ATP 6102, EMERGENCY MANAGEMENT AND PREVENTION OF INJURY LAB. Credit 1 Hours. Prerequisites: Formal acceptance for progression into the Master’s Degree in Athletic Training. Laboratory to accompany ATP 6302; application of theories, skills and practice.

Textbook(s):

Course Objectives:
Upon successful completion of this course students will be able to demonstrate the appropriate knowledge and skill base to understand the basic principles of:

1. Implement disinfectant procedures to prevent the spread of infectious diseases and to comply with OSHA and other federal regulations. (PHP-7).
2. Summarize current practice guidelines related to physical activity during extreme weather conditions. (PHP-12).
3. Obtain and interpret environmental data to make clinical decisions regarding the scheduling, type, and duration of physical activity. (PHP-13).
4. Recognize the signs and symptoms of catastrophic and emergent conditions and demonstrate appropriate referral decisions. (CE-16).
5. Use standard techniques and procedures for the clinical examination of common injuries, conditions, illnesses and diseases including but not limited to: circulatory assessments, abdominal assessments, and other clinical assessments (CE 20h-j).
6. Demonstrate the ability to assess the patient’s ability to respond using primary and secondary surveys, and when appropriate obtain and monitor signs of basic body functions and differentiate between normal and abnormal physical findings/vital signs. (AC-4, AC-5, AC-6, AC-7).
7. Differentiate the types of airway adjuncts and their use in establishing and maintaining an airway as well as when suction is required for airway maintenance. (AC-9, AC-10, AC-11).
8. Perform one and two person CPR on an adult, child and infant and utilize an AED, bag valve and pocket mask, and supplemental oxygen with adjuncts and assess oxygen saturation using a pulse oximeter according to current accepted practice protocols. (AC-13, AC-14, AC-15, AC-17, AC-18).
9. Select and use the appropriate procedure for
10. Use cervical stabilization devices (managing external hemorrhage and wound care. (AC-20, AC-22).e.g. spine board) and techniques (e.g. log roll) necessary for proper positioning and immobilization of a patient with a suspected spinal cord injury. (AC-23, AC-24, AC-25, AC-26).
12. Demonstrate the ability to assist, instruct a patient, and/or utilize a nebulizer, metered-dose inhaler, and/or auto injectable epinephrine. (AC-31, AC-33, AC-35).
13. Identify the signs, symptoms, interventions and when appropriate the return to participation criteria for: sudden cardiac arrest; traumatic brain injury; spine trauma; heat illness; exertional sickling; rhabdomyolysis; internal hemorrhage; diabetic emergency; asthma attacks; systemic/local allergic reaction; seizures; shock; hypothermia/frostbite; drug overdose. (AC-36a-o).
14. Select, implement and apply the appropriate splinting material to stabilize and protect an injured body area. (AC-37, AC-38, AC-39).
15. Identify and determine the criteria used in the decision making process to transport the injured patient for further medical examination, and use appropriate transportation methods. (AC-40, AC-41, AC-42).
16. Instruct the patient in home care and self-treatment plans for acute conditions. (AC-43).
17. Demonstrate testing procedure to obtain baseline data regarding level of general health. (CIP-1)
18. Use obtained data to design, implement, evaluate and modify a program specific to performance and health goals. (CIP-1)
19. Incorporate behavioral change theory to affect health related change. (CIP-1)
20. Refer to other medical and health professionals when appropriate. (CIP-1)
21. Develop, implement and monitor prevention strategies for at risk individuals and large groups to allow safe physical activity in a variety of conditions. (CIP-3)
22. Clinically evaluate and manage a patient with an emergency injury or condition and activate emergency action plan, assessment of vital signs, level of consciousness, secondary assessment, diagnosis and provision of appropriate emergency care. (CIP-6)

**Retention and Progression Procedures & Policy:**

After students have been formally accepted into the Master of Athletic Training Program at the University of Houston the ATS must maintain a G.P.A. of 3.0 or above and receive no more than one grade of “C” in any of the required Master of Athletic Training Program courses. When a student falls below the required G.P.A. and/or receives a grade of “C” in two or more classes, the ATS will be removed from the Master of Athletic Training Program.

Should the student who has been removed from the Master of Athletic Training Program wish to file a grievance, he/she must follow the guidelines as defined at the following link:

http://www.uh.edu/class/students/graduate/academics-planning/policies-procedures/index.php
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Evaluation Methods:

Total Possible:

Grading Scale:

100-93:   A  
92-85:    B  
84-77:    C  
76-69:    D  
<69:      F  

ADA STATEMENT
When possible, and in accordance with 504/ADA guidelines, we will attempt to provide reasonable academic accommodations to students who request and require them. Please call the Center for Students with Disabilities at ext. 3-5400 for more assistance.

ACADEMIC HONESTY
Honesty in your academic work is important in developing professional integrity. Students are to maintain a high standard of academic honesty, including doing your best work and reporting academic misconduct and plagiarism. At all times you must present your own, original work. Any student who commits academic misconduct will receive a zero for that assignment, and depending on the nature of the violation, may fail the class and be reported to the university for disciplinary action.