

SUMMER 2

ATP 7302

GENERAL MEDICAL CONDITIONS

TBD

Instructor: Rehal Bhojani, MD, CAQSM
Office: 17510 W. Grand Parkway, Suite 310 Sugarland, TX
Phone: (281) 725-5868
Email: rehal.bhojani@memorialhermann.org
Office Hours: Monday:
Tuesday:
Wednesday:
Thursday:
Friday

Course Description:

ATP 7302. GENERAL MEDICAL CONDITIONS. Credit 3 Hours. Prerequisites: Formal acceptance for progression into the Master's Degree in Athletic Training. Focuses in the identification and treatment of medical conditions of the nervous, urinary, endocrine, reproductive, respiratory, gastrointestinal, cardiovascular, integumentary systems. Emphasis placed on the role the Athletic Trainer has in the prevention, evaluation, diagnosis, treatment and rehabilitation of associated conditions as directed by a supervising physician.

Textbook(s):

Cuppet, M & Walsh, K (2011). General Medical Conditions in the Athlete, 2nd Edition. Publisher: Mosby. ISBN: 978-0323059213

O'Connor, DP & Fincher, L (2008). Clinical Pathology for Athletic Trainers: Recognizing Systemic Disease, 2nd Edition. Publisher: SLACK, Inc. ISBN: 978-1556427701

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. Identify modifiable/non-modifiable risk factors and mechanisms for injury/illness. (PHP-3)
2. Explain the precautions and risk factors associated with physical activity in persons with common congenital and acquired abnormalities, disabilities, and diseases. (PHP-5)
3. Identify the necessary components and explain the role of the pre-participation physical exam in identifying conditions that predispose the athlete to injury or illness. (PHP-8, PHP-9)
4. Demonstrate the ability to use a glucometer to monitor blood glucose levels and a peak flow meter to monitor asthma symptoms in order to determine participation status and make referral decisions. (PHP-15, PHP-16)
5. Explain the etiology and prevention guidelines associated with the leading causes of sudden death during physical activity, including but not limited to cardiac arrhythmia or arrest; asthma; traumatic brain injury; exertional heat stroke; hyponatremia; exertional sickling and anaphylactic shock. (PHP-17a-g)
6. Describe the normal structures and interrelated functions of the body systems. (CE-1)
7. Describe the normal anatomical systemic and physiological changes associated with the lifespan. (CE-2).
8. Identify the common congenital and acquired risk factors and causes of musculoskeletal injuries and common illnesses that may influence physical activity in pediatric, adolescent, adult and aging populations. (CE-3).
9. Obtain a thorough medical history that includes the pertinent past medical history, underlying systemic disease, use of medications, the patient's perceived pain, and the history and course of the present condition. (CE-13)
10. Use clinical reasoning skills to formulate an appropriate clinical diagnosis for common illness/disease and orthopedic injuries/conditions. (CE-17).
11. Incorporate the concept of differential diagnosis into the examination process. (CE-18).
12. Determine criteria and make decisions regarding return to activity and/or sports participation based on the patient's current status. (CE-19).
13. Use standard techniques and procedures for the clinical examination of common injuries, conditions, illnesses and diseases including but not limited to: respiratory assessment, circulatory assessments, abdominal assessments, and other clinical assessments (CE 20g-j)
14. Assess and interpret findings from a physical examination that is based on the patient's clinical presentation, to include: cardiovascular, pulmonary, gastrointestinal, genitourinary, and ocular function (use of ophthalmoscope); function of the ear, nose and throat (use of otoscope); dermatological assessment; and other assessments (e.g. temperature) (CE-21i-p)
15. Determine when findings warrant a referral. (CE-22)

16. Obtain and monitor signs of basic body functions and differentiate between normal and abnormal physical findings/ vital signs. (AC-6, AC-7)
17. Assess oxygen saturation using a pulse oximeter according to current accepted practice protocols to guide decision making. (AC-18)
18. Determine when use of a metered-dose inhaler is warranted and instruct the patient in the use, based on a patient's condition. (AC-32, AC-33).
19. Explain the importance of monitoring a patient following a head injury, including the role of obtaining clearance from a physician before further patient participation. (AC-34).
20. Demonstrate the ability to assist, instruct a patient in the use of an auto injectable epinephrine. (AC-35).
21. 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).
22. Identify and describe the basic signs and symptoms of mental health disorders, substance abuse, and personal/ social conflict and the role of various mental health care providers and the ability to identify and refer clients/patients to these health care providers (PS-11, PS-12, PS-13, PS-16)
23. Identify the components that comprise a comprehensive medical record and a pre-participation physical exam. (HA-9, HA-23)
24. Describe a plan to access appropriate medical assistance on disease control, notify medical authorities and prevent disease epidemics. (HA-24)
25. Develop, implement and monitor prevention strategies targeting upper and/or lower extremity and emergent conditions for at risk individuals and large groups to allow safe physical activity in a variety of conditions. (CIP-3)
26. Perform a comprehensive general medical clinical examination in order to formulate a differential diagnosis and/or diagnosis and implement the appropriate treatment strategy to include medications. (CIP-5)
27. Determine whether referral is needed and identify potential restrictions in activities and participation. (CIP-5)
28. Formulate and communicate an appropriate return to activity protocol. (CIP-5)

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>

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.