

Athletic Training Fellowship Programs

The Emory Sports Medicine–Innovation Sports Athletic Training Fellowship started in 2003, with the first class of two athletic trainers graduating in July of 2004. The fellowship has since grown to a class of four athletic training fellows and presently has eight graduates. William I. Sterett, MD, at the Steadman-Hawkins Clinic in Vail, CO, and Laura C. Decoster, ATC, at New Hampshire Musculoskeletal Institute, initiated fellowships for athletic trainers about 12 years ago.



At Emory Sports Medicine Center, we replicated the basic framework of the fellowship provided at the Steadman-Hawkins Clinic, which is where two of our surgeons and I previously trained and worked. John W. Xerogeanes, MD, and I wanted to develop a program that would provide athletic trainers with a unique educational opportunity to gain knowledge and skills specific to the needs of sports-medicine physicians. We looked at the elements of an orthopedic sports-medicine fellowship and adapted them for athletic trainers. We started by implementing a journal club and symposium, a biweekly meeting for discussion of recent journal articles and current trends in treatment of orthopedic injuries. Each athletic training fellow spends a minimum of 40 hours with a radiologist learning about imaging studies and takes the national exam to become a certified orthopedic technologist (OTC). After completing a comprehensive course that addresses all facets of working in the operating room, the fellows are granted scrub privileges. Our athletic training fellows are allowed to attend the Emory School of Medicine's summer education program, which includes anatomic dissection, physical exam, clinical correlation, and science lectures on orthopedic topics. The curriculum also includes content relating to casting and splinting, durable medical equipment, and practice business management, which addresses billing for services provided by athletic trainers in the clinic and operating room.

Our physicians feel that an appropriately prepared athletic trainer is the very best option for clinical assistance in a sports-medicine practice—better than a physician assistant or nurse practitioner. Working in the clinical setting, athletic trainers acquire patient histories, perform physical exams, and then report the findings to the physician, which makes the physician's time with the patient more efficient. Athletic trainers can also be relied on to

explain the injury diagnosis to the patient and to relate the nature of a necessary surgical procedure. Patients appreciate having a knowledgeable and readily accessible contact in the physician's practice who they can call get answers to their medical questions.

There is growing interest among numerous organizations for the creation of additional athletic training fellowships. Unfortunately, some might be more interested in the availability of cheap labor than the educational benefits provided by the fellowship. The NATA Post-Professional Education Committee and NATA Clinical-Industrial-Corporate Committee are currently discussing the possibility of developing standards for fellowships, which could enhance recognition of athletic trainers' qualifications in the role of physician extender and thereby increase employment opportunities. I hope that this effort will lead to consistency in terms of the specific knowledge and skills that are developed in fellowships provided by different organizations.

Some kind of accreditation is needed for athletic training fellowships, not only for the existing fellowships that are preparing athletic trainers as physician extenders but also for programs that might provide athletic trainers with specialized knowledge and skills needed for success in other practice settings. We must implement the right "game plan" to increase and enhance our future professional opportunities.

*Forrest Pecha, MS ATC/L, CSCS, OTC
Emory Sports Medicine Center*