# Minutes Alabama Board of Athletic Trainers Alabama State Board of Medical Examiners Advisory Council July 27, 2021

# **ABAT Members Present**

R. T. Floyd Chris King Kyle Southall

### **ABME Members Present**

Beverly Jordan, M.D. (virtual/TEAMS) Eric Law, M.D. James Robinson, M.D.

### **Members Absent**

## **Others Present**

Matt Hart (ABME)
Leah Taylor (ABAT)
Amy Dorminey (ABME-Virtual/TEAMS)
Amanda Hargrove (ABME-Virtual/TEAMS)
Carla Kruger (ABME-Virtual/TEAMS)

Chris King, Advisory Council President, declared a quorum present and called the meeting to order at 5:04 p.m. He welcomed everyone and thanked them for their attendance.

Mr. King called for a review of the minutes of the July 1, 2021, meeting.

Dr. James Robinson made a motion that the minutes of the July 1, 2021, meeting of the ABAT-ABME Advisory Council be accepted as written and presented. Dr. Eric Law provided the second to the motion, and it passed unanimously with favorable votes from Dr. James Robinson, Dr. Eric Law, Mr. Chris King, Mr. Kyle Southall, and Dr. R. T. Floyd. (Dr. Beverly Jordan joined the meeting virtually a short time following this vote.) These minutes are attached hereto and made a part hereof. (Attachment 1) Mr. Hart reported that the ABME approved during their regular Board Meeting the prior week the newly developed General Protocol contained in the minutes and as recommended by the Advisory Council. Mr. King reported that the members of the Alabama Board of Athletic Trainers will be reviewing them and voting at their meeting which follows this meeting.

Chris King reported that Matt Hart had continued to work on draft rules on Physician Supervision of Athletic Trainers (Attachment 2) and requested that he lead the Council through the them. Mr. Hart explained that he was presenting an updated draft of rules which would create stronger relationships between supervisory physicians and athletic trainers for future expansion as well as establish a set of standard and expanded protocols for various areas of practice. He invited the members to ask questions and make comments as he when through the document because feedback is very important in the development process. Discussion followed with many thoughts and ideas exchanged on the topics of standard practice protocols for various

areas of practice, supervisory physician registration and minimum requirements, the ratio of athletic trainers to physician requirements, qualifications of the supervising physician, physician presence, and reporting requirements. Mr. Hart will update the draft document based upon the feedback and guidance given during the discussions for presentation at the next meeting.

Mr. King then provided a verbal report regarding the current ratio of athletic trainers registered to supervisory physicians. He stated there are 167 different physicians supervising 910 athletic trainers statewide. The vast majority of the physicians supervise fewer than 10 athletic trainers, 18 supervise between 10-20 athletic trainers, and 9 supervise between 20-64. Discussion followed and it was agreed that 10-15 athletic trainers per physician was a very reasonable and manageable number. A popular idea was discussed whereby supervisory physicians whose situation would justify supervising more than the maximum number established could request a waiver. These discussions will continue during the development process.

Chairman Chris King tabled until the next meeting the discussion to establish a procedure to address the construction of each specific setting of practice and then presented questions from two sources regarding scope of practice. (Attachment 3) Discussion followed and it was determined that the new general protocol does not include the procedures in question and, therefore, fall outside the scope of practice of an athletic trainer. Through further discussion it was agreed that, if the on-site physician wants to use an athletic trainer in the additional role of a Medical Assistant and provides the necessary training to perform the various procedures, provides the necessary supervision, and is willing to assume responsibility for that person in that role, the procedures would then be allowable in the role of a Medical Assistant to perform. It is the desire of the Advisory Council to have secondary protocols developed at a later date that will address questions such as those presented.

Mr. King called for any other business. There being none, the next meeting date was discussed. It was decided to delay setting the date and location until later. Further meeting information will be announced at a later date.

Dr. Eric Law moved and Dr. James Robinson seconded that the meeting be adjourned. The motion carried unanimously. The meeting adjourned at 6:40 p.m.

Respectfully submitted,

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hris King, Chairman