

Dear Chair Williamson and Members of the House Rules Committee,

OSPA is opposed to the proposed removal of athletic trainers from the proposed list of qualified health care professionals in SB1547.

In the recent hearings of this bill after passage by the Senate, misinformation about an Athletic Trainer's education and expertise, and then concern about an Athletic Trainer's ability to remain objectively patient-centered amid possible pressures from coaches, parents, and school officials to return an athlete to play have jeopardized this bill's most important addition to Oregon's current concussion legislation.

Of all the groups of professionals listed in SB1547, an athletic trainer is arguably the most qualified and educated in concussion identification, evaluation, management, and return. All athletic trainers have, at a minimum, a bachelor's degree and pass a national certification exam. The entire profession will require a master's degree for entry level certification within the next few years.

The regulation of athletic trainers in Oregon predates the existence of concussion management law in the state. The practice of athletic training is so interconnected to concussion management that ATs are the only profession of those in SB1547 which require, by rule, frequent updated concussion continuing education (OAR 331-150-0005).

There's a reason that the NFL and NFL team physicians trust athletic trainers to manage concussion and serve as spotters of concussion signs and behaviors in every game. They are qualified and they are good at it.

As for concerns that an athletic trainer will be subject to and unable to withstand unreasonable pressure to return a concussed individual to play sooner than is safe, it is ignorant to think that the other professions will not face similar pressure, and insulting to think that only athletic trainers would be vulnerable to it. In present practice, according to existing law, the athletic trainer is the professional designated and permitted to return a player to participation upon evaluation on site, after ascertaining that the player does not have a concussion. That situation is as pressure packed as eventual decision making on progressive managed return to play, yet seems to have been overlooked by proponents of the amendment.

Any bill which would permit a lesser trained and regulated medical professional to evaluate and clear a person with concussion to return to sports participation, while barring an athletic trainer to do so is bad policy and bad precedent.

As such, OSPA opposes passage of SB1547 if it is amended to exclude athletic trainers, feeling the status quo would be in the better interest of Oregon's youth sports participants.

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