Editorial

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The “Tactical” Athletic Trainer: Healthcare for the Military

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As a certified and state licensed clinician in the athletic training profession, I administer treatment and therapy based on my educational background. My patients are active individuals including athletes and recreational sports participants. Over my 30+ years, I’ve treated others such as police officers or those involved in dance and performing arts. The educational preparation and job setting, as well as responsibilities for an athletic trainer have changed greatly over the years. Once the traditional setting was mostly high schools, colleges and universities, with a small percentage employed in professional sports.

Over the years the employment settings have changed to include clinics, healthcare facilities within industry, hospitals and fitness centers, law enforcement agencies, and the military. According to the National Athletic Trainers’ Association, 37% of athletic trainers are employed in secondary schools and the college/university setting. Only 2% are employed in the “emerging settings” of Performing Arts, Public Safety, Occupational Health and Military.¹ Given this emerging setting, we need to provide a viable educational curriculum to support the emergence of the “tactical athletic trainer.”

The Tactical Athletic Trainer

The purpose of this editorial is to discuss the “tactical athletic trainer” as well as propose a new way of thinking about how we should educate this person for the emerging job market with the military and law-enforcement. First, some background: The emergence of the “Tactical” athletic trainer may not be new to some, but the importance of this relatively new healthcare provider cannot be more important, than to those serving in the military who have benefited by their care. According to the Merriam-Webster dictionary, the definition of the term “tactical” is or relating to tactics or relating to small-scale actions serving a larger purpose, planning or maneuvering to accomplish a purpose.² If used as an adjective to “relating to,” or constituting actions carefully planned to gain a specific military end, it ideally identifies the role of the tactical athletic trainer in a supporting role for carrying out the mission of providing specific healthcare techniques to achieve the objective of providing therapy or conditioning to injured members of our military. The athletic trainers’ educational preparation has always included the prevention, care and treatment of injuries to active populations, the military would fit into that category. Soldiers will encounter daily activities of running, strength training and conditioning to accomplish their basic training as well as maintaining physical fitness for possible deployment to a combat area. In a historical perspective, ancient games and activities were developed into sporting events to keep early Greeks and Roman soldiers in shape, many of the “early” athletic trainers in those times worked on soldiers/athletes to keep them injury free. Athletic Trainers are ideally prepared to treat not only patients who are athletes but to also treat patients who serve in our nation’s military. Many of the injuries seen in basic training involve lower extremity injuries and the tactical athletic trainer is well suited to be employed. The same strategies we use in the athletic training clinic to assist patients/athletes to return to play, can be applied to our active military members.

Using this concept, any branch of the military could employ a certified athletic trainer to provide a wide range of healthcare delivery that is carefully “planned to gain a specific military end” such as ensuring our military are in the best possible shape to perform each their

objective. It is my opinion that the athletic training profession needs the flexibility to adapt to the needs of the growing demand for tactical athletic trainers. Constant changes in healthcare will force the profession to make changes to the education of the entry-level athletic trainer, thus providing more opportunities to expand our presence in the healthcare market.

Current Status of Tactical Athletic Trainers

A few programs exist at some military bases today, to ensure that recruits, soldiers and their dependents receive the best possible healthcare. The job they do for our military include providing musculoskeletal injury care, injury prevention and Human Performance Optimization functions as well as limited patient care. Additional duties would include triage evaluations for patients with acute injuries and organizing and conducting medically prescribed rehabilitation and conditioning programs. For example new recruits need to be evaluated by the tactical athletic trainer to determine how susceptible they are to injuries. Sometimes identified as “musculoskeletal specialist,” these athletic trainers have been instrumental in educating soldiers on how to prevent injuries as well as provide therapy to reduce recovery time from injuries. These tactical athletic trainers are the first line to providing musculoskeletal care to soldiers during training and provide guidance on diet and nutrition as well as exercise.³ As in all healthcare providers, it’s important for the clinician to possess the ability to assess and diagnosis a variety of conditions (injuries & illnesses), while also determining risk factors, prevention strategies as well as selection of the proper therapeutic modalities or exercise. The skill set needed for this tactical athletic trainer should include more than those that are basic to the education of the entry-level athletic trainer. Currently, the education of the entry-level athletic trainer includes advance first-aid techniques, triage management skills, evaluation and diagnosis of musculoskeletal injuries and general medical conditions, therapeutic modalities and exercise techniques, nutrition, knowledge of pharmaceuticals and lastly administrative techniques. A majority of this curriculum is already in place at every institutional that houses an athletic training curriculum that meets the standards of the Commission on Accreditation of Athletic Training Education (CAATE) programs.⁴ The challenge is to meet all the requirements set forth by the CAATE, as well as including additional courses in advanced exercise physiology, strength and condition techniques. Those institutions that can meet the challenge and assign dedicated faculty to the additional courses will produce a highly trained athletic trainer. In addition to the student seeking Board of Certification (BOC) as an athletic trainer, the curriculum should include specialized course work in the aforementioned areas of advanced exercise physiology, strength and conditioning techniques as well as seeking additional certification through the National Strength & Conditioning Association (NSCA). Another thought, is to have your entry-level athletic trainers earn a master’s degree in exercise physiology. With changes proposed by the CAATE, in 2022 the bachelor’s degree for entry-level athletic training will be replaced with the master’s degree being required by the BOC to sit for the national exam. Perhaps, we as educators considering the master’s entry-level preparation should encourage students to earn a bachelor’s in exercise physiology. This would allow an individual to sit for both the BOC exam and the CSCS exam. Once completed and with these two certifications in hand, the individual would be qualified to be employed as a tactical athletic trainer employed directly with the military or as a Department of Defense sub-contractor (healthcare provider group) serving our military.

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