

**Southwest Baptist University**  
**ATH 3114 Assessment: Above Diaphragm**  
**Competencies/Proficiencies – 4<sup>th</sup> Edition**

**Diagnosis**

- DI-C6 Describe common techniques and procedures for evaluating common injuries including taking a history, inspection/observation, palpation, functional testing, special evaluation techniques, and neurological and circulatory tests.
- DI-C7 Explain the relationship of injury assessment to the systematic observation of the person as a whole.
- DI-C8 Describe the nature of diagnostic tests of the neurological function of cranial nerves, spinal nerves, and peripheral nerves using myotomes, dermatomes, and reflexes.
- DI-C9 Assess neurological status, including cranial nerve function, myotomes, dermatomes and reflexes, and circulatory status.
- DI-C10 Explain the roles of special tests in injury assessment.
- DI-C11 Explain the role of postural examination in injury assessment including gait analysis.
- DI-C12 Describe strength assessment using resistive range of motion, break tests, and manual muscle testing.
- DI-C13 Describe the use of diagnostic tests and imaging techniques based on their applicability in the assessment of an injury when prescribed by a physician.
- DI-C15 Describe and identify postural deformities.
- DI-C16 Explain medical terminology and abbreviations necessary to communicate with physicians and other health professionals
- DI-C17 Describe the components of medical documentation (e.g. SOAP, HIPS and HOPS).
- DI-P1 Obtain a medical history of the patient that includes a previous history and a history of the present injury.
- DI-P2 Perform inspection/observation of the clinical signs associated with common injuries including deformity, posturing and guarding, edema/swelling, hemarthrosis, and discoloration.
- DI-P3 Perform inspection/observation of postural, structural, and biomechanical abnormalities.
- DI-P4 Palpate the bones and soft tissues to determine normal or pathological characteristics.
- DI-P5 Measure the active and passive joint range of motion using commonly accepted techniques, including the use of a goniometer and inclinometer.
- DI-P6 Grade the resisted joint range of motion/manual muscle testing and break tests.
- DI-P7 Apply appropriate stress tests for ligamentous or capsular stability, soft tissue and muscle, and fractures.
- DI-P8 Apply appropriate special tests for injuries to the specific areas of the body as listed above.

- DI-P9 Assess neurological status, including cranial nerve function, myotomes, dermatomes and reflexes, and circulatory status.
- DI-P10 Document the results of the assessment including the diagnosis.

### **Medical Conditions**

- MC-P1 Obtain a medical history of the patient that includes a previous history and a history of the present condition.
- MC-P2 Perform a visual observation of the clinical signs associated with common injuries and/or illnesses including deformity, edema/swelling, discoloration, and skin abnormalities.
- MC-P3 Palpate the bones and soft tissues, including the abdomen, to determine normal or pathological characteristics.
- MC-P4 Apply commonly used special tests and instruments (e.g., otoscope, stethoscope, ophthalmoscope, peak flowmeter, chemical “dipsticks” [or similar devices]) and document the results for the assessment of:
- MC-P4a Vital signs including respiration (including asthma), pulse and circulation, and blood pressure
- MC-P4b Heart, lung, and bowel sounds
- MC-P4c Pupil response, size and shape, and ocular motor function
- MC-P4d Body temperature
- MC-P4e Ear, nose, throat and teeth
- MC-P4f Urinalysis

### **Acute Care**

- AC-C4 Know and be able to use appropriately standard nomenclature of injuries and illnesses.
- AC-C6 Differentiate the components of a secondary assessment to determine the type and severity of the injury or illness sustained.
- AC-C7 Identify the normal ranges for vital signs.
- AC-C8 Describe pathological signs of acute/traumatic injury and illness including, but not limited to, skin temperature, skin color, skin moisture, pupil reaction, and neurovascular function.
- AC-C12 Describe the characteristics of common life-threatening conditions that can occur either spontaneously or as the result of direct trauma to the throat, thorax and viscera, and identify the management of these conditions.
- AC-C14 Identify the signs and symptoms associated with internal hemorrhaging.
- AC-C16 Describe the injuries and illnesses that require medical referral.
- AC-C19 Identify the signs and symptoms of head trauma, including loss of consciousness, changes in standardized neurological function, cranial nerve assessment, and other symptoms that indicate underlying trauma.
- AC-C20 Explain the importance of monitoring a patient following a head injury, including obtaining clearance from a physician before further patient participation.
- AC-C21 Define cerebral concussion, list the signs and symptoms of concussions, identify the methods for determining the neurocognitive status of a patient

who sustains a concussion and describe contemporary concepts for the management and return-to-participation of a patient who sustains a concussion.

- AC-C22 Identify the signs and symptoms of trauma to the cervical, thoracic and lumbar spines, the spinal cord, and spinal nerve roots, including neurological signs, referred symptoms, and other symptoms that indicate underlying trauma and pathology.
- AC-C23 Describe cervical stabilization devices that are appropriate to the circumstances of an injury.
- AC-C24 Describe the indications, guidelines, proper techniques and necessary supplies for removing equipment and clothing in order to evaluate and/or stabilize the involved area.
- AC-C25 Describe the effective management, positioning, and immobilization of a patient with a suspected spinal cord injury.
- AC-P4 Perform a secondary assessment and employ the appropriate management techniques for non-life-threatening situations, including but not limited to:
  - AC-P4b Closed-head trauma (using standard neurological tests and tests for cranial nerve function)
  - AC-P4g Thoracic, respiratory, and internal abdominal injury or illness
  - AC-P4h Acute musculoskeletal injuries (i.e. sprains, strains, fractures, dislocations)
  - AC-P4i Spinal cord and peripheral nerve injuries
  - AC-P4l Allergic, thermal, and chemical reactions of the skin (including infestations and insect bites)

### **Professional Development**

- PD-C14 Interpret the current research in athletic training and other related medical and health areas and apply the results to the daily practice of athletic training.