

**MARYLAND BOARD OF PHYSICIANS  
ATHLETIC TRAINER ADVISORY COMMITTEE  
Tuesday, January 12, 2021  
4201 Patterson Avenue, Baltimore, Maryland, Room 100**

**OPEN MEETING MINUTES  
VIA ZOOM**

**PRESENT:** Brian Perez, ATC, Chair, John Wilckens, MD, Teri Metcalf  
McCambridge, MD, Philip H. Omohundro, MD, Loren C. Shipley, MEd,  
MA, ATC/LAT, Martin Sataloff, ATC, Jeffrey Wright, PT, ATC, CSCS,  
Cheryl Lee-Pow, DC, Heather Weesner, OTR/L CLT, Anna Jeffers,  
Consumer Member

**ABSENT:** Lydia McCargo-Redd, Consumer Member

**STAFF PRESENT:** Ellen Douglas Smith, Deputy Director, Felicia Wright, Allied Health  
Supervisor, Stacey Darin, Esq., Board Counsel, Matthew Dudzic, Health  
Policy Analyst Associate, Linda Monroe, Allied Health Analyst, Margaret  
Jury, Allied Health Analyst Associate

**CALL TO ORDER**

Mr. Perez called the meeting to order at 10:02 a.m.

**APPROVAL OF MINUTES**

On a motion made by Mr. Sataloff and seconded by Mr. Shipley, the Committee approved the  
December 8, 2020 Open Meeting Minutes.

**LEGISLATION, REGULATIONS, AND POLICY UPDATES**

Nothing to report

**BOARD COUNSEL REPORT**

Nothing to report

**UNFINISHED BUSINESS**

**Discussion – Brian Perez, Chair**

- Documentation Required When Requesting Specialized Tasks  
The Committee agreed that documentation should include the following:
  - A completed Specialized Tasks for Evaluation and Treatment Protocols (Appendix  
C1) form;

- A detailed description of the tasks the athletic trainer is being authorized to perform, including a detailed description of the education and training required to perform the task in the practice setting;
  - Copies of any/all competencies, credentials, specialties, or certifications that support the delegation of the specialized task(s); and
  - A procedure log documenting the AT's performance of a minimum of five (5) procedures per assigned specialized task or a written explanation why the procedure log cannot be provided.
- Definition "Specialized Tasks"  
On a motion made by Dr. Wilckens and seconded by Mr. Shipley, the Committee unanimously agreed to recommend that the Board define "Specialized Tasks" as follows, and that the definition be added to regulations.
- "Specialized tasks are tasks that require additional experience, competencies, credentials, specialties or certifications beyond what is found in the basic athletic trainer education program standards."
- Recommended Revisions to Appendixes C1 & C2 of the E&T Protocol  
The Committee directed staff to amend Appendix C1 to reflect the recommended changes from the December 8, 2020 meeting, as well as the following:
- The new definition of "Specialized Tasks";
  - Combine the list of instructions for the AT and SP; and
  - The requirement for the supervising physician to describe in detail the specialized task(s) the athletic trainer is "authorized to perform".

The Committee determined that the List of Athletic Trainers Board-Approved Specialized Tasks should be separated into two task categories. The Committee felt that while ATs learned several of the tasks after they graduated from their educational program that required additional educational and experience, the other tasks were part of the ATs education, but still required additional experience or competencies.

On a motion made by Dr. McCambridge and seconded by Mr. Sataloff, the Committee voted to recommend to the Board the first category entitled "Specialized Task(s) List that requires additional education/certification" The list would include:

- Casting Application
- Casting Removal
- Interpreting a Neuro-Psych Concussion (Immediate Post-Concussion Assessment and Cognitive Testing – Impact); and
- Graston Technique

On a motion made by Mr. Sataloff and seconded by Mr. Wright, the Committee voted to recommend that the Board the second category entitled "Specialized Task(s) List that is part of AT Education but require additional experience or specialization. The list would include:

- Emergency Administration of Nebulizer Treatments

- Manual Reduction of Glenohumeral, Interphalangeal, Patellofemoral Dislocations
- Administering Oxygen; and
- Ability to use a Peak-Flow Meter to Monitor Breathing

The Committee also determined that “simple dislocations” should be removed from the list.

## **NEW BUSINESS**

### **Discussion – Brian Perez, Chair**

#### **Dry Needling**

Mr. Perez asked if performing “Dry Needling” is within the scope of practice of athletic training. Ms. Darin stated that Health Occ. §14-5D-1(m)(3) states that the practice of athletic training does not include the practice of physical therapy, and if dry needling falls within the scope of practice of physical therapy than it cannot be included in the scope of practice of athletic training. Ms. Darin also stated that adding dry needling to the scope of practice would require a change to the statute.

#### **Financial Disclosure / Termination Disclosure Statement Requirements for all Allied Health Committee members:**

Ms. Wright informed the Committee that Financial Disclosure / Termination Disclosures Statements are due by April 30, 2021. She requested that each member complete their Financial Disclosures / Termination Disclosures by next month’s meeting which is scheduled for February 9, 2021.

## **ADJOURNMENT**

There being no further business, the meeting was adjourned at 11:34 a.m.

Submitted by,

*Linda Monroe*

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Allied Health Analyst