# The Athletic Trainer's checklist

**Know More. Do More.**

**Understanding Substance Misuse in Teens**

When a student athlete has been injured or had surgery — sports-related or not — your role as athletic trainer is to support the child's treatment plan and encourage getting off of powerful and potentially dangerous opioid medicines. Here is what you need to KNOW and DO:

## KNOW MORE | Be educated and teach about opioid painkillers and addiction.

- **AT: Expand your professional skills in Sports Medicine** — including knowledge gaps in opioid safety in athletes and addiction.
- **AT: Practice talking to different audiences, balancing your message to parents and student athletes about opioids** — that is, they can be valuable to the recovery process, but they must be monitored by parents, and athletes must get off of them as soon as pain is bearable.
- **AT: Reinforce the Monitor-Secure-Transition-Dispose message** among athletes, parents, school officials and community leaders.
- **AT: Review and distribute resources** for parents on how to care for an athlete who has been prescribed opioid medicines.
- **FOR PARENTS: Educate and empower** parents to ask questions and communicate with their child's doctor about opioid medicines.
- **FOR PARENTS: Be advocates for addiction prevention by educating** and empowering athletes, parents, coaches, teammates, school officials and community leaders.
- **FOR ATHLETES: Support a culture of "See something. Say something."** Expect athletes to be mature and caring teammates.
- **FOR ATHLETES & PARENTS: Educate athletes and parents about the deadly dangers of mixing powerful medicines with alcohol and other drugs.**

## KNOW MORE | Know your facts about alcohol and other drug misuse.

- **AT: Keep current on data relevant** to your athletes' age group.
- **AT: Keep current on different drugs misused and abused in your community;** as one ends, another arises.

## KNOW MORE | Know and help address the risk factors and dangers of misuse.

- **AT: Know the additional risk factors that can increase the chance of addiction** — family history of addiction or alcoholism; recreational drug use, former alcohol, drug or medicine misuse; depression history; behavioral health stressors; history of substance abuse.
- **AT: Know how addiction rewires the adolescent brain forever,** especially in people ages 12 through 24, and can set lifetime addiction patterns.
- **AT: Provide "seeker" education** for parents — that is, instruct them to be on the lookout for relatives, friends, etc., who are looking to steal opioid meds or try them out of "curiosity."
- **AT: Observe student athletes who are ill or have been injured** for post-injury/grief or depression patterns. Keep athletes involved with their peer group and team.
- **AT: Communicate concerns** you have about an athlete's recovery or warning signs of substance misuse with their parents.
- **FOR ATHLETES & PARENTS: Educate athletes and their parents about how to talk with the doctor** about a child's personal risk factors if opioids are prescribed.
- **FOR ATHLETES: Educate and empower other athletes to spot their own risk factors** and make healthy choices when they've been prescribed opioid medicines.

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## DO MORE | Communicate with athletes and parents about pain management treatment.

- **AT: Reinforce key pain management messages** — that is, know the alternatives to powerful prescription painkillers, get off opioid meds as soon as they can, and play an active part in rehabilitation.
- **AT: Know and use other pain management techniques**, including acetaminophen and ibuprofen, ice, massage, manual therapy and rehabilitation.
- **AT: Use rehabilitative and injury recovery** athletic trainer professional techniques to full recovery.
- **AT: Make a point of knowing the plan to get** a student athlete off of opioids and help monitor or track the athlete's progress.
- **AT: Learn about specific injury pain medication (opioid)** transition timelines per doctor's orders.

## DO MORE | Set appropriate rehabilitation and recovery priorities.

- **AT: Put in place opioid-free supportive pain management strategies** for the injured athlete.
- **AT: Set rehabilitation and recovery goals** that prioritize getting off opioid medicines to a pain-free state.
- **AT: Set return-to-play criteria** that are free of prescription pain medicines and prevents premature return to play or can trigger pain/re-injury cycle.
- **AT & ATHLETE: Track opioid use** each day and get off opioids as part of the recovery care plan.
- **FOR PARENTS: Identify and communicate pattern of concerns** to parents, such as noncompliance, increase use of meds, other.

## DO MORE | Get involved when a child is heading toward crisis.

- **AT: Professionally recognize addiction as a chronic healthcare condition** that requires support. It's not a personal failing.
- **FOR PARENTS: Communicate to parents your concerns about an athlete's getting off of opioids,** signs of misuse or abuse, or medicine sharing.
- **FOR PARENTS: Provide parent resources for assessment,** including doctor's health plan, school resources and community professionals.
- **FOR PARENTS & ATHLETES: Compile crisis resources** from school, community and hotlines.

## DO MORE | Be prepared in the event of intentional or unintentional overdose.

- **AT: Be trained in using emergency naloxone (Narcan®) intervention.**
- **AT: Always use personal protective equipment (PPE).**
- **AT: Recognize the need for secure scene status** and have emergency responder self-care (Narcan®) on hand.

## Put resources and toolkits to use.

**Review existing school athletic association toolkits and distribute school and athlete toolkits.** Use these toolkits in supporting the care of injured athletes into your overall athletic trainer program.

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