Student Note-Taking Guide to Accompany



Concepts of Athletic Training FOURTH

Ronald P. Pfeiffer Brent C. Mangus Student Note-Taking Guide to Accompany

Day 128-4: Student



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How This Book Can Help You Learn

All of us have different learning styles. Some of us are visual learners, some more auditory, some learn better by doing an activity. Some students prefer to learn new material using visual aids. Some learn material better when they hear it in a lecture; others learn it better by reading it. Cognitive research has shown that no matter what your learning style, you will learn more if you are actively engaged in the learning process.

The Student Note-Taking Guide will help you learn by providing a structure to your notes and letting you utilize all of the learning styles mentioned above. Students don't need to copy down every word their professor says or recopy their entire textbook. Do the assigned reading, listen in lecture, follow the key points your instructor is making, and write down meaningful notes. After reading and lectures, review your notes and pull out the most important points.

The Student Note-Taking Guide is a great learning tool that follows the chapter topics presented in your textbook, Concepts of Athletic Training. The main topics covered in the lectures are listed in the Table of Contents. No more skimming through chapter after chapter trying to find the term you need to understand! If your instructor is using the PowerPoint slides that accompany the text, this guide will save you from having to write down everything that is on the slides. There is space provided for you to jot down the terms and concepts that you feel are most important to each lecture. By working with your Guide, you are seeing, hearing, writing, and, later, reading and reviewing. The more times you are exposed to the material, the better you will learn and understand it. Using different methods of exposure significantly increases your comprehension.

This Guide is the perfect place to write down questions that you want to ask your professor later, interesting ideas that you want to discuss with your study group, or reminders to yourself to go back and study a certain concept again to make sure that you really got it.

Having organized notes is essential at exam time or when doing homework assignments. Your ability to easily locate the important concepts of a recent lecture will help you move along more rapidly, as you don't have to spend time rereading an entire chapter just to reinforce one point that you may not have quite understood.

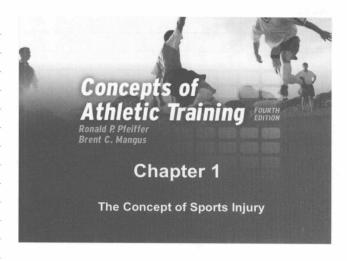
This Guide is a valuable resource. You've found a wonderful study partner!

Note-Taking Tips

- 1. It is easier to take notes if you are not hearing the information for the first time. Read the chapter or the material that is about to be discussed before class. This will help you to anticipate what will be said in class, and to have an idea of what to write down. It will also help to read over your notes from the last class. This way you can avoid having to spend the first few minutes of class trying to remember where you left off last time.
- 2. Don't waste your time trying to write down everything that your professor says. Instead, listen closely and write down only the important points. Review these important points after class to help remind you of related points that were made during the lecture.
- 3. If the class discussion takes a spontaneous turn, pay attention and participate in the discussion. Only take notes on the conclusions that are relevant to the lecture.
- 4. Emphasize main points in your notes. You may want to use a highlighter, special notation (asterisks, exclamation points), format (circle, underline), or placement on the page (indented, bulleted). You will find that when you try to recall these points, you will be able to actually picture them on the page.
- 5. Hearing something repeated, stressed, or summed up can be a signal that it is an important concept to understand.
- 6. Organize handouts, study guides, and exams in your notebook along with your lecture notes. It may be helpful to use a three-ring binder, so that you can insert pages wherever you need to.
- 7. When taking notes, you might find it helpful to leave a wide margin on all four sides of the page. Doing this allows you to note names, dates, definitions, etc. for easy access and studying later. It may also be helpful to make notes of questions you want to ask your professor about or research later, ideas or relationships that you want to explore more on your own, or concepts that you don't fully understand.
- **8.** It is best to maintain a separate notebook for each class. Labeling and dating your notes can be helpful when you need to look up information from previous lectures.
- 9. Make your notes legible, and take notes directly in your notebook. Chances are you won't recopy them no matter how noble your intentions. Spend the time you would have spent recopying the notes studying them instead, drawing conclusions and making connections that you didn't have time for in class.
- 10. Look over your notes after class while the lecture is still fresh in your mind. Fix illegible items and clarify anything you don't understand. Do this again right before the next class.

Contents

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Ronald P. Pleifler and Brent C. Mangus

Concepts of Athletic Training (AURILL)





In the United States, 6.7 million public high school children are involved in sports activities annually.



Concepts of Athletic Training Park

Title IX Education Assistance Act of 1972



- Since its passing, female sports participation increased by 700%.
- Research indicates injuries are sports specific, NOT gender specific.

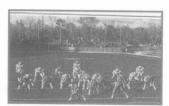
Notes

Concepts of Athletic Training

General Injury Data

According to a Pennsylvania study, rates of athletic injuries among of high school students were:

- Football 46.7%
- · Boys' basketball 10%
- Wrestling 9.68%
- · Girls Basketball 7.5%



Concepts of Athletic Training

General Injury Data (continued)

In a two-year study of a community sports program, children participating in soccer had the highest rate of injury, followed by baseball, football, and softball.

Contusions were the most common injury.

Concepts of Athletic Training



Definition of Sports Injury



- No universally acceptable definition.
- •The majority of today's definitions use "time loss" criteria as the major determinant.

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P. Charles	NCAA Definition of Sports Injury
	Sports Injury: Occurs as a result of participation in organized intercollegiate practice or game. Requires medical attention by a team athletic trainer or physician. Results in restriction of athlete's participation for one or more days after the injury.
	Time lost does not reflect injury's severity. No standard length of time must be lost to qualify as a specific level of injury severity.
	Ronald R Pleiffer and Brent C. Mangus Concepts of Athletic Training Country Acute Injuries
	Acute Injury - "injury characterized by rapid
	onset, resulting from a traumatic event" • Acute injuries typically involve significant trauma followed by pain, swelling, and loss of function.
	Critical Force - "magnitude of a single force for which the anatomical structure of interest is damaged"
	Concepts of Athletic Training County
	Chronic Injuries
	Chronic Injury - "injury characterized by a slow, insidious onset, implying a gradual development of structural damage" Chronic injuries develop over time and are often associated with repetitive, cyclic activities such as running. These injuries are commonly called "overuse injuries." Common sites include the Achilles tendon, patellar tendon, and the rotator cuff

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Soft Tissues





Soft Tissues
Muscles
Fascia
Tendons
Joint capsules
Ligaments
Blood vessels
Nerves

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Catastrophic Injury

Catastrophic Injuries:

- Involve damage to the brain and/or spinal cord.
- · Can be life threatening or permanent.
- Can occur as a direct or indirect result of sports participation.

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Connective Tissue Injuries

Sprains are injuries to ligaments.

- · First-degree: mild with no swelling
- Second-degree: ligament damage, pain, and dysfunction
- Third-degree: complete tear of ligament(s)

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	Ronald & Pleiffer and Brent C. Mangus Concepts of Athletic Training (Parker)
	Connective Tissue Injuries
	Strains are injuries to tendon, muscle, or musculotendinous junction.
	First-degree strain: mild with no swelling, pain noticeable with use
ig .	Second-degree strain: more extensive soft-tissue damage, pain, and moderate loss of function Third-degree strain: complete rupture, significant
	swelling & loss of function
	_
	Connective Tissue Injuries
	Confucienc are commonly referred to ac
	Contusions are commonly referred to as "bruises."
	 Contusions are associated with pain, stiffness, swelling, ecchymosis, and hematoma.
	May result in myositis ossificans.
	CONTROL OF THE PROPERTY OF THE
	-
	Concepts of Athletic Training (Marie)
	Skeletal Tissue Injuries
	Fractures are breaks or cracks in a bone.
	Types of Fractures
	Closed Open
	• Stress
	Salter-Harris

Notes	Ronald P. Pleiffer and Brent C. Mangus
	Concepts of Athletic Training
1 8- - (14) 1 (14) 1	Dislocations
	Dislocation - "displacement surfaces or bones comprises."
	Subluxation: partial Luxation: total displ
	All dislocations should be treated by a physician.
	Ronald P. Pteiffer and Brent C. Mangus Concepts of Athletic Training
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Injury Recognition
	Coach's role:
	Treat any suspected injury until proven otherwise. Recognize and discriminat medical referral from those such attention.
	Schools or sponsoring agency shound to hire an NATABOC-Certified Al
	Ronald P. Pfeiffer and Brent C. Mangus Concepts of Athletic Training
	Epidemiology of Sport
	Epidemiology - "study of th diseases, injuries, or other human populations for the identifying and implementing prevent their development."
	Scientific studies of sports relatively recent trend.



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- e injuries that require that do not require

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- injuries are a

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e Maraika	Epidemiology of Sports Injuries
	Sports injury epidemiology involves determining risk factors that play a causative role in the injury.
	 Hypotheses are developed to test for statistical relationships between risk factors and injury.
	Ronald P. Pleiffer and Brent C. Mangus Concepts of Athletic Training (SURTH)
	Classification of Sports
	American Academy of Pediatrics has developed categories of sports.
	Contact/collision Limited contact/impact Non-contact
	Concepts of Athletic Training Parks Extent of Injuries: Tackle Football
	 34% of players injured; offensive players have higher risk than defensive players. Hip, thigh, and leg regions injured most often. 2.4% of injuries required surgery, and of those 59.4% involved the knee.

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Ronald P. Pleiffer and Brent C. Mangus Concepts of Athletic Training ton



Extent of Injuries: Tackle Football

- Contusions, strains, sprains, and fractures are common injuries.
- Older players have higher risk than younger ones.
- Spinal cord and brain injuries are a major concern.

Concepts of Athletic Training Family

Extent of Injuries: Basketball

- During the 2002 school year, one million high school children participated in basketball (male and female combined).
- Players have a high risk for lower extremity injuries.
- Ankle sprains are the most common injury.
- Girls have higher risk of knee injuries than boys and are more likely to require surgery.



Concepts of Athletic Training



Extent of Injuries: Baseball

In 2002, over 450,000 high school boys participated.

Nearly 12% sustained injuries. Forearm/wrist/hand or shoulder/arm were often injured.

Of these injuries, most were strains or sprains.



Notes	
	Concepts of Athletic Training (1988) Extent of Injuries: Baseball
	 Children between the ages 5 and 14 have increased vulnerability to chest impact injuries from balls. Eye injuries from pitched balls are a concern. Chronic elbow injuries are a concern for adolescent pitchers. Sidearm pitching presents the greatest risk for elbow problems.
	Concepts of Athletic Training County Extent of Injuries: Wrestling
	 In 2002, there were over 240,000 high school participants. About 27% sustained injuries. Collisions with opponents and mats, and takedown and escape maneuvers resulted in various injuries. Shoulder/arm, knee, and forearm/wrist/hand were injured most often. Most of these injuries were strains & sprains. Friction burns, skin infections, and "cauliflower ear" are also common injuries.
	Concepts of Athletic Training (Series) Extent of Injuries: Volleyball
	 During 2002, nearly 400,000 high school girls participated.
	 Nearly 15% were injured, most of these injuries were sprains.
	Ankle/foot region is most often injured.

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Ronald R Pteiffer and Brent C. Mangus Concepts of Athletic Training Common



Extent of Injuries: Soccer

In the United States, there are 12 million participants under 18 years of age.

During the 2002 season almost:

- 340,000 high school boys participated.
- 300,000 high school girls participated.



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Extent of Injuries: Soccer (continued)



Contusions are the most common injury, with the knee, ankle, and shin most often injured.

- Heading may result in injury, but no reliable research to confirm this hypothesis.
- Improperly constructed, movable soccer goals have been involved in a number of severe injuries and deaths.

Notes	Concepts of Athletic Training FOURTH Ronald P. Pfeiffer Brent C. Mangus
	Chapter 2
	The Athletic Health Care Team
	Ronald P. Pleiffer and Brent C. Mangus Concepts of Athletic Training FARTHER Sports Medicine
	Definition: "A field that uses a holistic, comprehensive, and multidisciplinary approach to health care for those engaged in sporting or recreational activity.
	Practitioners include primary care physicians, orthopedic surgeons, athletic trainers, sports physical therapists, dentists, exercise physiologists, conditioning coaches, and sports nutritionists.
	Ronald P. Pfeiffer and Brent C. Mangus Concepts of Athletic Training POWERS Key Team Members
	Coaches
	Team Physicians
	NATABOC-Certified Athletic Trainer