



### AT Program Reminders:

#### Final Clinical Evaluations

Preceptors: It is the students responsibility to arrange a meeting time with you this week to review and complete their final clinical evaluation. All evaluations are due by Friday December 9.

#### Clinical Site/ Preceptor Evaluations

Students: *Please complete the clinical site and preceptor evaluation prior to* meeting with your preceptor to review your individual final clinical evaluation. All evaluations are due by December 9.

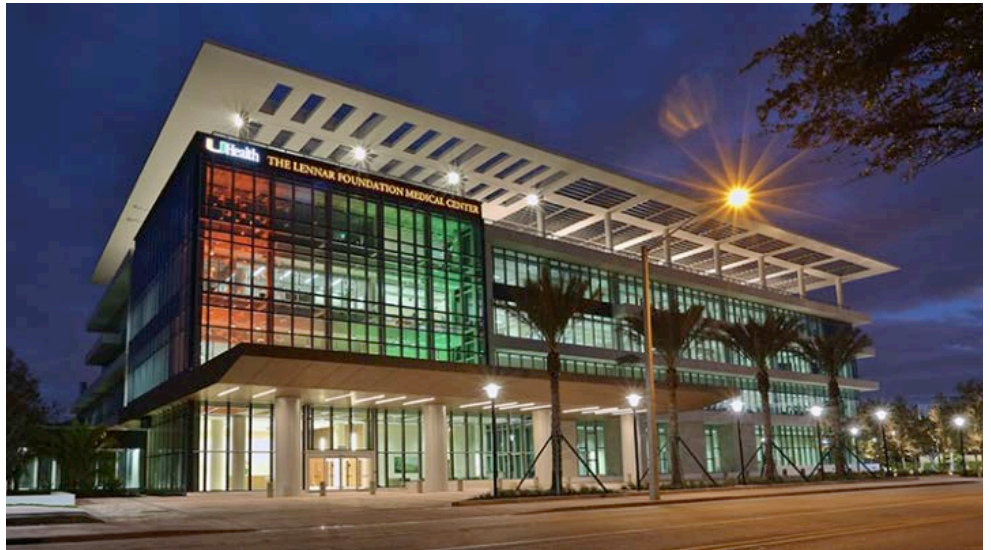
#### Final Exams Begin

Tomorrow, Wednesday December 7 is a reading day. Final exams begin on Thursday December 8 and conclude on Wednesday December 14.

#### Student Clinical Binders

Students' final binders are due to Mr. Tatman's office in Max Orovitz no later than 5 pm on Friday December 9.

### Pre-Wrap - Announcements: Lennar Foundation Medical Center Opens on Coral Gables Campus!



The "when" has arrived. The University of Miami has opened the state-of-the-art Lennar Foundation Medical Center on UM's Coral Gables campus. The UHealth Sports Medicine department moves its primary site to the third floor of the brand new building. With access to a multidisciplinary sports medicine team, UHealth Sports Medicine can provide comprehensive care in one location to all of its patients and student-athletes. Dr. Lee Kaplan was interviewed for e-Veritas in early November, and as he noted at the time the new facility will give UHealth Sports Medicine "the ability to have everything in one place, focused on the total patient experience, from coming in, to physical therapy, to all the radiologic tests and procedures, and to have surgery right there is unique." Dr. Kaplan also wanted to point out that "it isn't just a new building but a lot of new philosophies about the interdisciplinary nature of what we do." This is truly exciting times for the UM AT Program and UHealth Sports Medicine.



**Weekly Clinical Pearl:**

**HOT OFF THE PRESSES: National Athletic Trainers' Association Position Statement: Preventing and Managing Sport-Related Dental and Oral Injuries**

<http://natajournals.org/doi/pdf/10.4085/1062-6050-51.8.01>

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**position statement**

**National Athletic Trainers' Association Position Statement: Preventing and Managing Sport-Related Dental and Oral Injuries**

Trenton E. Gould, PhD, ATC\*; Scott G. Piland, PhD, ATC\*; Shane V. Caswell, PhD, ATC†; Dennis Ranalli, DDS, MDS‡; Stephen Mills, DDS§; Michael S. Ferrara, PhD, ATC, FNATA||; Ron Courson, ATC, PT, NREMT-I, CSCS¶

\*School of Kinesiology, The University of Southern Mississippi, Hattiesburg; †Athletic Training Program, George Mason University, Manassas, VA; ‡School of Dental Medicine, University of Pittsburgh, PA; §Just for Kids Pediatric Dentistry, Scarborough, ME; ||College of Health and Human Services, University of New Hampshire, Durham; ¶Department of Sports Medicine, University of Georgia, Athens

Just today, the NATA released their position statement on preventing and managing sports-related dental and oral injuries. **This comprehensive document makes 31 dental and oral injury prevention, treatment, and management recommendations for ATs.** These recommendations are classified into the following categories: Planning considerations, education, dental and oral injury classification and acute care, mouthguard effectiveness, and mouthguard material, fabrication, and care considerations.

Each of the 31 recommendations is accompanied by a strength of recommendations rating that ranges from categories A to C; Category A is a recommendation based on consistent and good quality patient oriented evidence; Category B is a recommendation based on inconsistent or limited quality patient oriented evidence; and Category C is a recommendation based on consensus, usual practice, opinion, disease-oriented evidence, or case series for studies of diagnosis, treatment, prevention, or screening.

Picture to the right is the position statement's Figure 2 which highlight the tooth identification and numbering system recommended for use by ATs to efficiently and effectively communicate with dental/oral healthcare professionals.

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**Emergency Treatment of Athletic Dental Injuries**

*Professionally-made, properly fitted Custom Mouthguards are recommended for all contact and collision sports. See [www.academyforsportsdentistry.org](http://www.academyforsportsdentistry.org)*

**AVULSION (Entire Tooth Knocked Out)**

Replantation within 5-10 minutes is critical for replantation. Minutes matter. If the root of the tooth has debris on it, rinse the root with water. If the root appears clean, grasp the crown between your thumb and first finger with the smooth flat surface forward. (see diagram above)

If it is an upper tooth place the other hand on top of the person's head to stabilize it then push firmly and hold the tooth in place. When the tooth is seated into its original position, it must be held there by hand or with a wad of wet paper tissue to keep it in place. Do not worry about getting the tooth in 'correctly' it can be adjusted by the dentist later during splinting. Bleeding can be controlled by uninterrupted direct pressure for 5 minutes.

If no one is prepared to replant the tooth, if the injured patient is unwilling or unable to cooperate with immediate replantation, or if the damage to the socket and adjacent teeth is substantial, control bleeding with pressure, place the tooth in liquid such as milk or other storage media to keep it from drying.

**TRANSPORT THE PATIENT AND TOOTH TO A DENTIST IMMEDIATELY.**

Figure 1. Academy for Sports Dentistry treatment card. Reprinted w

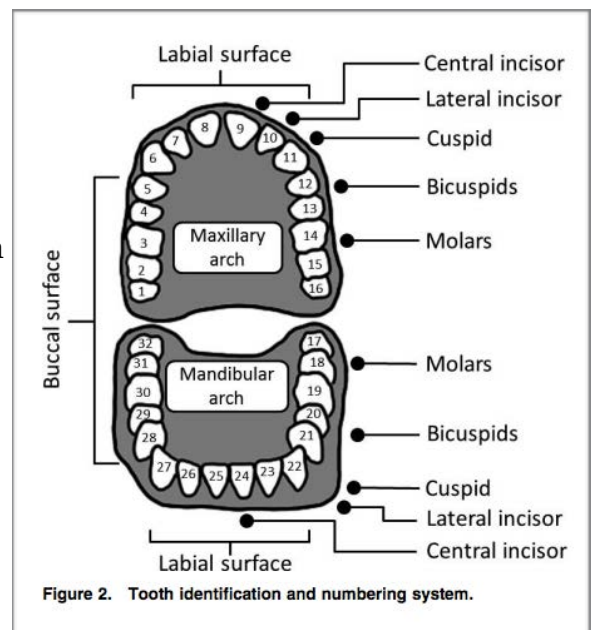
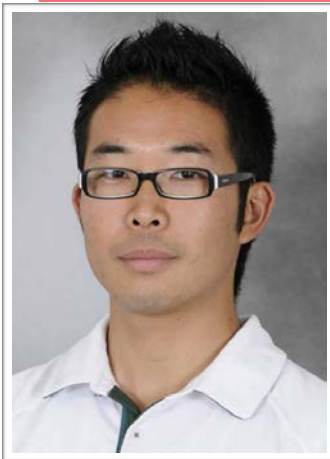


Figure 2. Tooth identification and numbering system.



## Preceptor Profile: **Naoki Negishi, MEd, ATC, LAT**

This week's preceptor profile features the only Utah Jazz fan in all of South Florida: Naoki Negishi. Naoki has been the AT for track and field/cross country team since 2009. Naoki first arrived in the United State from Japan in 2001 where he began his collegiate education at Sam Houston State University. After a year and half, he transferred to The University of Alabama, and completed his undergraduate Athletic Training degree in 2007. Naoki completed the Post-Professional Athletic Training program at University of Virginia in the following year. Naoki began at UM in 2009 after a year-long internship opportunity at University of California, Berkeley where he worked with football and M and W gymnastics teams I joined UM in 2008-09. Naoki continues to be a great example of expanding your education well past your college days. He has completed courses in ART for the LE and Spine, SASTM, muscle activation for LE and muscle energy for pelvis, Kinesiotaping, Postural Restoration, and has his PES and CES certification through the NASM. Naoki's thesis is published in the JAT (Huggins R, Glaviano N, Negishi N, Casa D, Hertel J, Comparison of rectal and aural core body temperature thermometry in hyperthermic, exercising individuals: a meta-analysis. *J Athl Train*. 2012;47(3):329-338.) We asked Naoki to take a half face photo and tell us all a little bit about himself and AT. Here is what he had to say:

### **How do you stay current and ahead of the curve with all the unique techniques out there for ATs?**

I learned and continue learning mainly two things: One is manual therapy techniques and the other is PNF type exercises. I use manual therapy techniques (ex. joint mob, ART, and scraping) to improve joint mobility and PNF type exercises (PRI, Muscle Energy, and Muscle Activation Techniques) to correct muscle activation (inhibition) and/or correct joint alignment. There are so many different techniques, but their fundamental concepts are often overlapped and have similarities while the treatment goals always end up similar.

### **You do a lot of work outside of UM with USA track and field, tell us about that experience:**

There was a small international track meet in Mexico two years ago and USATF decided to send athletes to the track meet at the very last minute, and they struggled to find an AT. They called me up five days before the team traveled to Mexico just because I was available. I guess I did a good job in Mexico because USATF called me up for another international meet in Costa Rica the next year. I had incredible experience during these two trips. I met new people and I learned new skills and treatment strategies. I definitely got more confidence to work with high level athletes. Also, I learned that drivers in Mexico are worse than Miami drivers and Costa Rica's pineapple is the best in the world.



### **Where are the coolest places you have ever visited?**

I visited Eugene, OR ten times in last six years, so I started exploring outside of Eugene a little bit last year. Spencer's Butte and Tamolitch Blue Pool were cool places to visit. I want to visit Crater Lake if I have a chance. The coolest place to visit out of the U.S should be Japan. If you want to see modern Japanese culture, you should go to Tokyo. If you want to see traditional Japanese culture, you should go to Kyoto.

**Any parting words?** Have a great break everyone!

## **AT Weekly Trivia:**

**For Senior Students:** As part of the FMS, what test is thoroughly researched and easily implemented as a tool to test a patient's motor control and functional symmetry to provide objective data in a rehabilitation exercise progression and ultimately RTP decisions?

**For Junior Students:** The liver is located in which quadrant(s) of the abdomen?

**For the inquisitive preceptor:** This measurement tool can be utilized during a PPE to assess lung capacity of a patient with diagnosed asthma or EIB. In addition during a subsequent asthma attack, if the measurement using this tool is decreased 15-50% of baseline, a SABA should be used.

### **Last Week's Answers:**

While protein and carbs provide 4 cal/g, **fat provides 9 cal/g;**

Ecchymosis around the **mastoid process** is indicative of basilar skull fracture;

In high doses, **opioids** can cause CNS and respiratory depression that can lead to respiratory and cardiac arrest. More people died from drug overdoses in 2014 than in any year on record, and the majority of drug overdose deaths (more than six out of ten) involved an opioid. The US Dept. of HHS Opioid Initiative targets three key areas that build on efforts to address the opioid epidemic and seek to expand evidence-informed strategies. The American Heart Association has added additional recommendations for HCP CPR/AED to be familiar with intranasal or intramuscular Naloxone administration..

