# **Athletic Trainers**

(O\*NET 29-9091.00)

### **Significant Points**

- Long hours, sometimes including nights and weekends, are common.
- A bachelor's degree is usually the minimum requirement, but many athletic trainers hold a master's or doctoral degree.
- Employment is projected to grow much faster than average.
- Job prospects should be good in the health care industry, but competition is expected for positions with sports teams.

#### Nature of the Work

Athletic trainers help prevent and treat injuries for people of all ages. Their clients include everyone from professional athletes to industrial workers. Recognized by the American Medical Association as allied health professionals, athletic trainers specialize in the prevention, assessment, treatment, and rehabilitation of musculoskeletal injuries. Athletic trainers often are one of the first heath care providers on the scene when injuries occur, and therefore they must be able to recognize, evaluate, and assess injuries and provide immediate care when needed. They also are heavily involved in the rehabilitation and reconditioning of injuries. Athletic trainers should not be confused with fitness trainers or personal trainers, who are not health care workers, but rather train people to become physically fit. (Fitness workers are discussed elsewhere in the *Handbook*.)

Athletic trainers often help prevent injuries by advising on the proper use of equipment and applying protective or injurypreventive devices such as tape, bandages, and braces. Injury prevention also often includes educating people on what they should do to avoid putting themselves at risk for injuries.

Athletic trainers work under the supervision of a licensed physician, and in cooperation with other health care providers. The level of medical supervision varies, depending upon the setting. Some athletic trainers meet with the team physician or consulting physician once or twice a week; others interact with a physician every day. The extent of the supervision ranges from discussing specific injuries and treatment options with a physician to performing evaluations and treatments as directed by a physician.

Athletic trainers often have administrative responsibilities. These may include regular meetings with an athletic director or other administrative officer to deal with budgets, purchasing, policy implementation, and other business-related issues.

Work environment. The work of athletic trainers requires frequent interaction with others. This includes consulting with physicians as well as frequent contact with athletes and patients to discuss and administer treatments, rehabilitation programs, injury-preventive practices, and other health-related issues. Many athletic trainers work indoors most of the time; others, especially those in some sports-related jobs, spend much of their time working outdoors. The job also might require stand-

ing for long periods, working with medical equipment or machinery, and being able to walk, run, kneel, crouch, stoop, or crawl. Travel may be required.

Schedules vary by work setting. Athletic trainers in nonsports settings generally have an established schedule—usually about 40 to 50 hours per week—with nights and weekends off. Athletic trainers working in hospitals and clinics may spend part of their time working at other locations doing outreach. Most commonly, these outreach programs include conducting athletic training services and speaking at high schools, colleges, and commercial businesses.

Athletic trainers in sports settings have schedules that are longer and more variable. These athletic trainers must be present for team practices and games, which often are on evenings and weekends, and their schedules can change on short notice when games and practices have to be rescheduled. As a result, athletic trainers in sports settings may regularly work 6 or 7 days per week, including late hours.

In high schools, athletic trainers who also teach may work 60 to 70 hours a week, or more. In National Collegiate Athletic Association Division I colleges and universities, athletic trainers generally work with one team; when that team's sport is in season, working at least 50 to 60 hours a week is common. Athletic trainers in smaller colleges and universities often work with several teams and have teaching responsibilities. During the off-season, a 40-hour to 50-hour work week may be normal in most settings. Athletic trainers for professional sports teams generally work the most hours per week. During training camps, practices, and competitions, they may be required to work up to 12 hours a day.

There is some stress involved with being an athletic trainer, as there is with most health-related occupations. Athletic trainers are responsible for their clients' health, and sometimes have to make quick decisions that could affect the health or career of their clients. Athletics trainers also can be affected by the pressure to win that is typical of competitive sports teams.

### Training, Other Qualifications, and Advancement

A bachelor's degree is usually the minimum requirement to work as an athletic trainer, but many athletic trainers hold a master's or doctoral degree. In 2006, 46 States required athletic trainers to be licensed or hold some form of registration.



Athletic trainers apply protective devices such as tape, bandages, and braces to help prevent injuries.

**Education and training.** A bachelor's degree from an accredited college or university is required for almost all jobs as an athletic trainer. In 2006, there were more than 350 accredited programs nationwide. Students in these programs are educated both in the classroom and in clinical settings. Formal education includes many science and health-related courses, such as human anatomy, physiology, nutrition, and biomechanics.

According to the National Athletic Trainers Association, 68 percent of athletic trainers have a master's or doctoral degree. Athletic trainers may need a master's or higher degree to be eligible for some positions, especially those in colleges and universities, and to increase their advancement opportunities. Because some positions in high schools involve teaching along with athletic trainer responsibilities, a teaching certificate or license could be required.

Licensure and certification. In 2006, 46 States required athletic trainers to be licensed or registered; this requires certification from the Board of Certification, Inc. (BOC). For certification, athletic trainers need a bachelor's degree from an accredited athletic training program. In addition, a successful candidate for BOC certification must pass a rigorous examination. To retain certification, credential holders must continue taking medical-related courses and adhere to the BOC standards of practice. In States where licensure is not required, certification is voluntary but may be helpful for those seeking jobs and advancement.

Other qualifications. Because all athletic trainers deal directly with a variety of people, they need good social and communication skills. They should be able to manage difficult situations and the stress associated with them, such as when disagreements arise with coaches, clients, or parents regarding suggested treatment. Athletic trainers also should be organized, be able to manage time wisely, be inquisitive, and have a strong desire to help people.

Advancement. There are a number ways for athletic trainers to advance or move into related positions. Assistant athletic trainers may become head athletic trainers and, eventually, athletic directors. Athletic trainers also might enter a physician group practice and assume a management role. Some athletic trainers move into sales and marketing positions, using their athletic trainer expertise to sell medical and athletic equipment.

# **Employment**

Athletic trainers held about 17,000 jobs in 2006 and are found in every part of the country. Most athletic trainer jobs are related to sports, although an increasing number also work in nonsports settings. About 34 percent of athletic trainers worked in health care, including jobs in hospitals, offices of physicians, and offices of other health practitioners. Another 34 percent were found in public and private educational services, primar-

ily in colleges, universities, and high schools. About 20 percent worked in fitness and recreational sports centers.

#### Job Outlook

Employment is projected to grow much faster than average. Job prospects should be good in the health care industry, but competition is expected for positions with sports teams.

*Employment change*. Employment of athletic trainers is expected to grow 24 percent from 2006 to 2016, much faster than the average for all occupations. Job growth will be concentrated in the health care industry, including hospitals and offices of health practitioners. Fitness and recreation sports centers also will provide many new jobs, as these establishments become more common and continue to need athletic trainers to care for their clients. Growth in positions with sports teams will be somewhat slower, however, as most professional sports clubs and colleges and universities already have complete athletic training staffs.

The demand for health care should grow dramatically as the result of advances in technology, increasing emphasis on preventive care, and an increasing number of older people who are more likely to need medical care. Athletic trainers will benefit from this expansion because they provide a cost-effective way to increase the number of health professionals in an office or other setting.

Also, employers increasingly emphasize sports medicine, in which an immediate responder, such as an athletic trainer, is on site to help prevent injuries and provide immediate treatment for any injuries that do occur. Increased licensure requirements and regulation has led to a greater acceptance of athletic trainers as qualified health care providers. As a result, third-party reimbursement is expected to continue to grow for athletic training services.

As athletic trainers continue to expand their services, more employers are expected to use these workers to realize the cost savings of providing health care in-house. There should be strong demand for athletic trainers in settings outside the sports world, especially those that focus on health care. Continuing efforts to have an athletic trainer in every high school reflect concern for the health of student-athletes as well as efforts to provide more funding for schools, and may lead to growth in the number of athletic trainers employed in high schools.

**Job prospects.** Job prospects should be good for athletic trainers in the health care industry. Those looking for a position with a sports team, however, may face competition. Turnover among athletic trainers is limited. When working with sports teams, many athletic trainers prefer to continue to work with the same coaches, administrators, and players when a good working relationship already exists.

Because of relatively low turnover, the settings with the best job prospects will be the ones that are expected to have the most

#### Projections data from the National Employment Matrix

Occupational Title	SOC Code	Employment, 2006	Projected employment,	Change, 2006-2016	
			2016	Number	Percent
Athletic trainers	29-9091	17,000	21,000	4,200	24

job growth, primarily positions in the heath care industry and fitness and recreational sports centers. Additional job opportunities are expected in elementary and secondary schools as more positions are created. Some of these positions also will require teaching responsibilities. There will be more competition for positions within colleges and universities as well as professional sports clubs.

The occupation is expected to continue to change over the next decade, including more administrative responsibilities, adapting to new technology, and working with larger populations, and job seekers must be able to adapt to these changes.

### **Earnings**

Most athletic trainers work in full-time positions, and typically receive benefits. The salary of an athletic trainer depends on experience and job responsibilities, and varies by job setting. Median annual earnings of wage-and-salary athletic trainers were \$36,560 in May 2006. The middle 50 percent earned between \$28,920 and \$45,690. The lowest 10 percent earned less than \$21,940, while the top 10 percent earned more than \$57,580.

Many employers pay for some of the continuing education required for athletic trainers to remain certified, although the amount covered varies from employer to employer.

# **Related Occupations**

The American Medical Association recognizes athletic trainers as allied health professionals. They work under the direction of physicians and provide immediate and ongoing care for injuries. Also, they provide education and advice on the prevention of injuries and work closely with injured patients to rehabilitate and recondition injuries, often through therapy. Other occupations that may require similar responsibilities include emergency medical technicians and paramedics, physical therapists, physician assistants, registered nurses, licensed practical and licensed vocational nurses, recreational therapists, occupational therapists, respiratory therapists, chiropractors, podiatrists, and massage therapists.

There also are opportunities for athletic trainers to join the military, although they would not be classified as an athletic trainer. Enlisted soldiers and officers who are athletic trainers are usually placed in another program, such as health educator or training specialist, in which their skills are useful. (For information on military careers, see the *Handbook* statement on job opportunities in the Armed Forces.)

#### **Sources of Additional Information**

For further information on careers in athletic training, contact: ➤ National Athletic Trainers Association, 2952 Stemmons Freeway, Dallas, TX 75247. Internet: http://www.nata.org
For further information on certification, contact:

➤ Board of Certification, Inc., 4223 South 143rd Circle, Omaha, NE 68137. Internet: http://www.bocatc.org