

Written Protocol and Standing Written Prescription

This standing order and protocol constitutes an agreement by (Physician Name) to supervise the Athletic Training Services provided by (AT Full Name), LAT, ATC solely in her duties at the (Clinic Name) located in Canonsburg, Pennsylvania from (date) until such time that her work at the Clinic ceases or either party wishes to end this supervisory relationship. (AT) will provide care for the patients at the (Clinic) in accordance with the *Chapter 18 issued under sections 6(a) and (d), 8 and 51 of the Medical Practice Act of 1985 (63 P. S. § § 422.6(a) and (d), 422.8 and 422.1 note); section 812.1 of The Administrative Code of 1929 (71 P. S. § 279.3a); and section 3(b) of the Acupuncture Registration Act (63 P. S. § 1803(b)* under the supervision of Dr. (Name), but there is no requirement for Dr. (Name) to be onsite at the time that care is rendered by (AT).

While the primary responsibility of (AT) at the (Clinic) is to provide manual therapy for patients of the Clinic, she also may provide other Athletic Training Services as required. Athletic Training Services may include the rendering of emergency care, development of injury prevention programs, and providing appropriate preventative and supportive devices; assessment, management, treatment, rehabilitation and reconditioning of patients; and the use of modalities such as mechanical stimulation, heat, cold, light, air, water, electricity, sound, massage and the use of therapeutic exercise, reconditioning exercise and fitness programs. All patients seen by (AT) will be evaluated, in advance, by the medical providers in this clinic practice and be diagnosed with conditions that could benefit from the treatment and care provided by (AT).

(AT) will be expected to evaluate and treat each patient in accordance with standard protocols and consistent with her training and education. She will provide Dr. (Name) with a monthly summary of the care provided to the patients during that month and will maintain standard medical documentation in patient files that Dr. (Name) will review on a regular basis. Should (AT) have any questions or concerns about a patient's case, she will contact and/or discuss those questions/concerns with the medical provider on site in the Clinic on that day and provide appropriate updates to Dr. (Name). (AT) will refer any patient who cannot benefit from her services back to Dr.

(Name) or his/her designee for further evaluation and/or care. Should a patient fail to respond to the treatments provided by (AT) after 6 weeks, that patient will be referred back to Dr. (Name) and/or his/her designee.