Athletic Trainer Protocol for College Tennis

Tennis matches officially begin with the warm up (where applicable) and continue until completed. If a player is injured, a medical time out will be taken for Trainers to treat player injuries.

The Basics

1. Always introduce yourself before the match to the Head Coaches and Head Referee. Specify where you will be located, and how (cell, etc.) to communicate with you.

2. Trainer must always take a medical training bag when called to a court.

3. Do not interrupt play on adjacent courts when entering or leaving the injured player’s court. Wait for points to end before crossing any court’s playing area.

4. In all divisions, a player may be treated on any changeover or set break. This treatment is not considered a medical timeout. The USTA provision allowing a medical timeout during the warmup and a second timeout during the match no longer applies.

5. For NCAA Women’s Division I medical timeouts, a player may have only one medical timeout. A player who needs an additional medical timeout shall be retired. Once the trainer starts talking to the player or touches the player, the trainer has a maximum of five minutes for diagnosis and treatment. The maximum amount of time for treatment shall be three minutes. (ITA Regulation I.H.1c, Page 270, 2014 Friend at Court.)

In NCAA Men’s Division I, once the trainer starts talking to the player or touches the player, the trainer has a maximum of three minutes for diagnosis and treatment. A player may have only one medical timeout. If a player takes a medical timeout, the player shall forfeit one point. Once the trainer starts talking to the player or touches the player, the trainer has a maximum of three minutes for diagnosis and treatment. The maximum amount of time for treatment shall be three minutes. (ITA Regulation I.H.1d, Page 270, 2014 Friend at Court.)

In all divisions other than Division I, medical timeouts follow the USTA Regulation for medical timeouts with two exceptions: The USTA limit on the number of changeovers and set breaks on which a player may be treated does not apply; and once the trainer starts talking to the player or touches the player, the trainer has a maximum of five minutes for diagnosis and treatment. (Note the maximum amount of time for treatment is three minutes.)

6. The trainer may stay by the court (not on the court) and may continue to treat the player on any changeover.

7. For all non-Division I play, only 1 timeout per injury during match play (i.e. a player could injure a wrist, then injure an ankle and receive timeouts for each, but not a second timeout if either were reinjured). If injured during warm up, player may take a second timeout for same injury during match play.

8. Cramping in any part of the body is considered a body injury and receives only 1 medical timeout, regardless of additional cramping in different parts of the body.

Bleeding Timeouts and Sickness Protocol

1. All blood and sickness (vomit, etc.) must be completely cleaned from the court before play can continue. This timeout has a 15 minute limit. Referee has discretion to move the match to another court.

2. A bleeding injury must be treated promptly, within the 15 minute time limit allowed to completely treat the bleeding and clean the court of any residue and materials.

3. Subsequent bleeding of the same injury, if not stoppable, will be grounds for the referee to end the match by retiring the bleeding injured player.