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The Correct Title is "Exercise Physiologist"

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So here we are with a dream to build, hope to fulfill, visions to realize, and a future to construct.

-- Em Olivia Bevis

HEARD WHAT YOU SAID, but I disagree. Exercise physiology is not a sub-discipline of kinesiology. That is as misinformed as saying exercise science is exercise physiology. Yes, I understand that many exercise physiologists are interested in helping athletes improve their performance. But, exercise physiology is much more than just athletics. It is also about mind and body health.

As "the" 21st century healthcare profession, exercise physiologists are the key healthcare professionals in prescribing exercise medicine. Moreover, from the perspective of the American Society of Exercise Physiologists (ASEP), the first-ever professional organization of exercise physiologists, exercise physiology (1) is the, "... comprehensive delivery of treatment services concerned with the analysis, improvement, and maintenance of the physiological mechanisms underlying physical and mental health and fitness through regular exercise, the rehabilitation of heart disease and other chronic diseases and/or disabilities via the prescription of exercise medicine, and the guidance of athletes and others interested in athletics and sports training."

No, you are not an exercise physiologist when you graduate with an exercise science or related degree (such as kinesiology, human performance, sports science, etc). Anyone who says otherwise is not thinking straight. No, and you should know that if you were to have a degree in exercise physiology, you are not a physiologist or an exercise scientist. No, it is not logical to refer to an exercise physiologist as an "applied exercise physiologist" or a "clinical exercise physiologist". There is no

specific degree title designation for either in the ASEP organization. Since the socalled "clinical" and the "applied" are exercise physiology graduates with the same degree program, both can do the same professional career work whether it is cardiac rehabilitation in a hospital setting or working with athletes to improve their athletic performance.

Moreover, to press the point further, it is important to point out that exercise physiologists work for corporate wellness programs, rehabilitation clinics, hospitals fitness programs, athletic centers in academic settings, community organizations, and private fitness facilities. Exercise physiologists seek to improve the overall mind-body health of their clients and patients so they can live an active and productive life. They do so by teaching and assisting clients and patients in performing exercises to either prevent or treat chronic diseases and disabilities. Exercise physiologists educate and explain the procedures involved in different stress tests that are used to measure oxygen consumption, cardiac output, stroke volume, tissue extraction, blood pressure, percent body fat, and other physiologic indicators of health and fitness to develop the best exercise plans. Either singly or collectively with a physician, they will interpret the test results and write an initial and follow-up exercise prescriptions.

If exercise physiologists, regardless of whether they have a bachelor's degree or a PhD degree, locate and engage in a job doing one or more of the following, then it is logical that exercise physiologists do not work just in cardiac rehabilitation or engage in just research and yet, they are nonetheless exercise physiologists! Consider, for example, there are exercise physiologists as sports directors, strength coaches, directors and managers of state and national teams, college professors, researchers, administrators, managers of health and wellness programs, directors of corporate fitness and wellness programs, health and fitness club instructors, health and fitness directors in correctional services and in police organizations, fitness directors and managers in the military, sports managers, consultants, sport psychologists, personal health and fitness consultants, sports psychologists, exercise nutritionists, exercise counselors, health and fitness promoters, sports consultants, and affiliates with international organizations. Clearly, exercise physiologists do more than cardiac rehabilitation (2).

This thinking is no different from other healthcare professionals. For example, physical therapists are physical therapists! They are not clinical physical therapists. Medical doctors are physicians. They are not clinical physicians, that is, by title. It is unfortunate but the use of the word "clinical" to define the undergraduate or master prepared exercise physiologist was believed necessary by sports medicine to make sure the doctorate exercise physiologists stood apart from the non-doctorate exercise physiologists. It was a mistake then and is still a mistake today. There is no reason to delimit the professional work of an exercise physiologist. But, of course this thinking depends on the credibility of the academic major and its course work at

each of the three levels: undergraduate, master, and doctorate. That is why the ASEP leadership worked with key academic and non-academic exercise physiologists to develop accreditation guidelines (3).

The ASEP accredited exercise physiology program of study at the undergraduate and master levels prepares a healthcare professional who is educated to work with clients and patients with or without chronic diseases. From the ASEP perspective, each student graduating from an ASEP accredited exercise physiology program is required to sit for the ASEP Exercise Physiologist Certified exam. Passing the exam provides the college graduate with the official designation of being a Board Certified Exercise Physiologist (4) who is held accountable to the ASEP Standards of Practice (5).

The Standards of Practice are essential for the continued improvement of the professional practice of exercise physiology. They are intended to define professional competencies required for accepted and safe exercise physiology practice in the United States. The ASEP Standards have been written to assist individuals in the general public, healthcare community, fitness, and athletic industry by providing the information regarding the practice of exercise physiology.

The need for accreditation and board certification is great, and ASEP has provided the transition from the old exercise science way of doing things to what is consistent with other updated and well-recognized healthcare professions. Contrary to some ideas and services of various organizations, ASEP is not looking for The Biggest Edge to be number one – that is, the biggest and most popular organization. Instead, ASEP exists to work on behalf of the students of exercise physiology and what is important to the growth and sustainability of the profession of exercise physiology.

The ASEP accreditation has helped to provide the conditions necessary for exercise physiologists to develop robust and admired higher education programs. It is a process of reviewing academic programs throughout the U.S. to evaluate their educational quality. The ASEP accredited status means that students of exercise physiology and their parents can have confidence that the degree is what it should be to help ensure the public has confidence in the Board Certified Exercise Physiologist. It indicates to prospective employers that a student's educational program has met the accepted standards to enter the profession of exercise physiology.

Being part of a profession also means having membership in a profession-specific organization. Without question, exercise physiologists should be members of the American Society of Exercise Physiologists because it is the professional organization of exercise physiologists. It is as simple that, yet so many exercise physiologists continue to turn a blind eye to ASEP membership. Why? While there

are several reasons linked to the change process and learning to think differently, a major factor stems from the lack of being educated by the academic exercise physiologists that the professional organization exists to strengthen the members' professional network, further their career options, and help ensure their professionalism and credibility. Thus, it makes sense that being Board Certified will help put exercise physiologists a huge step ahead of their competition, particularly in regards to finding exercise physiology career opportunities.

Networking is critical, and joining ASEP provides the opportunity to create professional relationships from which exercise physiologists can become leaders and mentors to students who participate in national meetings, forums, and discussion boards. In particular, the ASEP annual meetings provide great opportunity to mix and mingle with other ASEP exercise physiologists. Making contact with other exercise physiologists throughout the United States can help with understanding the hurdles that slow the recognition of exercise physiologists as members of a healthcare profession who are responsible for prescribing exercise medicine. Also, forging ties with others who have similar professional interests in promoting and improving the profession of exercise physiology is a rich and ongoing resource, inspiration, and opportunity that many exercise physiologists might not have the opportunity otherwise.

It should be clear from the ASEP website that leadership expects every exercise physiologist to earn the ASEP Board Certification to be recognized as a healthcare professional who is responsible to the ASEP Code of Ethics (6) when treating clients and patients of all ages with and without medical problems. The leadership believes that the best evaluation of each client and/or patient is carried out by Board Certified Exercise Physiologists. They understand how to develop individualized exercise prescriptions to reduce discomfort, promote movement, and prevent disability. This is done to encourage safe participation in regular exercise programs that promote a healthier lifestyle. They are taught how to provide care for their clients and patients in settings that may include their own private practices or that of hospitals, home health agencies, and/or fitness facilities. The expectation is to restore, help maintain, and promote the client/patient's optimal health, wellness, and physiological function.

John looked at me and asked his final question: "Why is it taking so long for ASEP to be recognized as the professional organization of exercise physiologists?" I said, let me share with you what I said in regards to the change process in a 2013 in **PEPonline**: "While the road to exercise physiology professionalism started in 1997, it will take decades for exercise physiologists to understand the importance of supporting their own profession. This point is inevitable. The change process is always very slow. You may recall that the professionalization of physical therapists was initiated in 1881 when the Sargent School in Boston instituted a formalized training program. Yet, it took more than 30 years (January 15, 1921) before the

American Physical Therapy Association was founded. Then, it wasn't until 1935 that the first Code of Ethics for Physical Therapy was published (7). There isn't any question that physical therapy has evolved into a profession with powerful lobbying efforts and a commitment to the highest quality of healthcare (8)."

Moving from the traditional way of thinking about exercise physiology and the different titles for an exercise physiologist is not something that happens overnight. It is a process of transitioning from what we thought was the right way to think about exercise physiology to a new way of thinking and performing our work. Because change is inherently unsettling for most people, the ASEP way to think about exercise physiology is not necessarily comfortable at the individual level. It requires the exercise physiologist to accept new ideas, perspectives, and put into practice new ways of thinking and behaving. In a nutshell though, the process is an ongoing one. So, prepare yourself for the need to continue to address status quo issues. Also, learn to be flexible in considering new ideas in refining the changes necessary to help ensure success for the students of exercise physiology. Thank you.



References

- 1. *American Society of Exercise Physiologists.* (2016). Definition of Exercise Physiology. Available at https://www.asep.org/index.php/about-asep/ definition/
- 2. Boone, T. (1999). Defining the Exercise Physiologists. *Professionalization of Exercise Physiologyonline*. Available at https://www.asep.org/asep/asep/may2.htm
- 3. *American Society of Exercise Physiologists.* (2016). Accreditation. Available at https://www.asep.org/index.php/professional-services/ accreditation/
- 4. *American Society of Exercise Physiologists*. (2016). EPC Mission and Purpose: ASEP Board of Certification. Available at https://www.asep.org/index.php/epc-online/epc-missionpurpose/
- 5. *American Society of Exercise Physiologists.* (2016). Standards of Practice. Available at https://www.asep.org/index.php/organization/practice/
- 6. *American Society of Exercise Physiologists.* (2016). Code of Ethics. Available at https://www.asep.org/index.php/organization/code-ethics/
- 7. Murphy, W. (1995). *Healing the Generations: A History of Physical Therapy and the American Physical Therapy Association*. Alexandria, VA: American Physical Therapy Association.

8.	Scarpaci, J. (2007). Guest Editorial: Musing on Professionalism. <i>Journal of Physical Therapy Education</i> . 21;3:3-5.
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