



Essential Sports Medicine for Competition 2013-2014

Preparation for the Event

Questions for the LOC:

- Presence of medical staff
- Qualifications of medical staff
- Location of on-site medical staff
- Communication between medical staff and you
- Contact information for medical staff
- Nearest hospital
- Ambulance response time
- Emergency protocol for suspected head/spine injury
- AED location – Do you know how to use it?
- Protocol and preparedness for blood on the ice

Concussion

A concussion is a type of traumatic brain injury, or TBI, caused by a bump, blow, or jolt to the head. Concussions can also occur from a blow to the body that causes the head to move rapidly back and forth. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious.

You can't see a concussion. Most occur without loss of consciousness and some athletes may not experience or report symptoms until hours or days after the injury. Most people with a concussion will recover quickly and fully. But for some people, signs and symptoms of concussion can last for days, weeks, or longer.

Signs Observed by Coaching Staff

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of event, result, or whereabouts
- Moves clumsily
- Answers questions slowly
- Loses consciousness (*even briefly*)
- Shows mood, behavior, or personality changes
- Can't recall events *prior or after* hit or fall

Symptoms Reported by Athlete

- Headache or “pressure” in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Does not “feel right” or is “feeling down”

Warning Signs: If any of these symptoms occur, contact a medical professional immediately or call 911. These symptoms may represent signs of increasing pressure in the brain.

- Increasingly severe headache
- Increasing weakness, numbness or decreased coordination
- Repetitive vomiting
- Slurred speech
- Worsening drowsiness and/or difficulty awakening
- Unequal pupil size
- Convulsions or seizures
- Increasing confusion, restlessness, or agitation



Action Plan

- Remove athlete from the ice
- Ask event specific questions – What competition is this? What rink are you skating in? What were you doing when you fell?
- If a health care professional is immediately available, have the athlete evaluated immediately. Otherwise, ensure athlete and their coach or parent make arrangements for athlete to be seen by a health care professional as soon as possible.
- Inform the parents and/or coach about the athlete's condition. Giving information in verbal format to a concussed athlete is not reliable, as they may not remember or be able to follow instruction.
- Allow athlete to return to play ONLY after being seen and evaluated by proper medical professional. If you have questions or concerns, contact the U.S. Figure Skating Team USA Physicians
- Refer coaches/parents/athlete to websites below for additional information
 - <http://www.cdc.gov/concussion/headsup>
 - http://fs.ncaa.org/Docs/health_safety/ConFactSheetsa.pdf
 - <http://www.cdc.gov/concussion/sports>

Illness

- Fever = Temperature > 100.4°, Consider disqualifying for Temperature > 102°
- Vomiting/Diarrhea/Dizziness/Headache – Consider disqualification if fever > 102, dizziness, and/or looking very ill

Musculoskeletal Injuries:

Sign and symptoms of significant injury

- Deformity
- Inability to bear weight / put pressure on the extremity
- Abnormal skating stroke or landing?

Note: Developmentally immature athletes have “open” growth plates, which are very vulnerable

Action Plan:

- Consider disqualifying athlete if the athlete is unable to demonstrate the ability to perform their elements
- Consider transport to emergency room by ambulance or parent if there is deformity, inability to bear weight or put pressure on the extremity

Blood Concerns

- While no case of transmitting a new infection has been conclusively documented from a sporting contact, theoretically, Hepatitis B/C or HIV could be passed from an infected athlete that is bleeding to another athlete during an athletic event. Sweat, Tears, Saliva, Sputum, Respiratory Droplets from the infected person **have never been identified** as the cause of a new infection
- Greatest risk for becoming infected occurs through sexual activity/IV needle use – not sports
- Pre-event preparation requires the proper care and coverage of existing wounds
- Have proper supplies for universal precautions readily available, including gloves, bandages and disinfectant, and waterproof disposal bags



- During the event, early recognition of bleeding is the responsibility of officials, athlete and medical staff
- The athlete should be removed from the event as soon as practical
- Bleeding should be controlled; wound covered preferably with an occlusive dressing (Tegaderm) that seals all around a wound that might start bleeding again during the event
- Blood on the ice should be scraped off and covered with water to freeze
- Blood on a costume should be treated (hydrogen peroxide, Blood Buster, Formula 10), covered or changed
- Minor cuts and abrasions that are not bleeding and small amounts of blood on a costume do not require stopping the competition
- Confidentiality: only the athlete can decide to share medical information, i.e. they carry an infection

Altitude

Athletes competing at an elevation above sea level (greater than 6,500 feet/2,000 meters) may feel the effects of altitude sickness. Athletes may experience mild symptoms at lower elevations.

Mild Symptoms

- Decreased appetite
- Headache
- Nausea/vomiting
- Trouble sleeping
- Dizziness
- Fatigue
- Exercise capacity is decreased

Late/Severe Symptoms (typically > 8,000 feet)

- Swelling occurs in lung or brain causing more severe symptoms:
 - Significant shortness of breath
 - Severe headache
 - Confusion/change in mental status
 - Lethargy/change in consciousness

Action Plan

- Hydration, hydration, hydration. If symptoms are more severe (typically at > 8,000 feet), arrange for athlete to be transported to lower altitude.

Other Medical Issues

Use your common sense. Take into account whether the athlete is a minor or an adult. If you have a concern about the health and well-being of the athlete, you can request a letter of clearance from the athlete's physician.

U.S. Figure Skating Team USA Physicians – please feel free to call/text/email for guidance

- Jen Burke MD (AZ) 480-221-1567 jendoc11@aol.com
- Mahlon Bradley MD (NY, MA) 978-239-5359 mahlon.bradley@comcast.net
- Sherrie Ballantine-Talmadge DO (IL) 630-988-1577 sballant23@hotmail.com
- Ellen Geminiani MD (MA) 508-269-9241 ellen.geminiani@childrens.harvard.edu
- Roger Kruse MD (OH) 419-262-1025 Roger.KruseMD@ProMedica.org
- Ed Reisman MD (WA) 509-954-7980 Edward.Reisman@providence.org