



SPORTS MEDICINE SERVICES

Katie Bradtke, MS, ATC, LAT



SPORTS MEDICINE SERVICES

- HCAVa Sports Medicine
 - Serving all Chesterfield County High Schools
 - Certified & Virginia Licensed Athletic Trainers on site
 - Affiliated Sports Orthopedist



SPORTS MEDICINE SERVICES

- 2 Primary Care Sports Medicine Physicians
 - Douglas Cutter, M.D., CAQSM
 - Jennifer Hopp, M.D.
- 2 Physical Therapy Locations
- Certified Strength and Conditioning Specialists
- 24/7 Sports Medicine Hotline

(804) 323 - TEAM

For all athletic related injury questions & connection to our offices for physician & PT appointments.



CONCUSSIONS

- Current research has revealed that concussions and mild traumatic brain injuries can result in:
 - Memory loss
 - Cognitive problems affecting learning
 - Balance/motor skill deficits
 - Increased risk of further injury
 - Increased risk of death



CONCUSSION SIGNS AND SYMPTOMS

- Headache
- Pressure in the head
- Confusion
- Feeling in a fog
- Dizziness/ “seeing stars”
- Nausea
- Vomiting
- Fatigue
- Sensitivity to light and noise
- Temporary loss of consciousness
- Amnesia
- Ringing in the ears
- Slurred speech
- Difficulty concentrating
- Irritability/personality changes
- Sleep disturbances

*Symptoms may arise immediately or have a delayed onset



CONCUSSION INFO CONT'D

- A regular MRI does NOT rule out a concussion
- Concussions can progress in severity and the patient must therefore be closely monitored
- Patient must be evaluated prior to returning to play if a concussion is suspected
- Rest is key – let them sleep
- No activity until cleared by medical provider
 - CCPS Concussion Medical Release Form prior to beginning return to play protocol
- Second Impact Syndrome



RETURN TO PLAY PROTOCOL

- 7 days concussion symptom free
- 5 day progression

Table 1 Graduated return to play protocol

Rehabilitation stage	Functional exercise at each stage of rehabilitation	Objective of each stage
1. No activity	Complete physical and cognitive rest	Recovery
2. Light aerobic exercise	Walking, swimming or stationary cycling keeping intensity <70% maximum predicted heart rate No resistance training	Increase heart rate
3. Sport-specific exercise	Skating drills in ice hockey, running drills in soccer. No head impact activities	Add movement
4. Non-contact training drills	Progression to more complex training drills, eg passing drills in football and ice hockey May start progressive resistance training)	Exercise, coordination, and cognitive load
5. Full contact practice	Following medical clearance participate in normal training activities	Restore confidence and assess functional skills by coaching staff
6. Return to play	Normal game play	

INJURIES – DOCTOR’S NOTE

- If a student-athlete goes to any physician or healthcare provider for care of an injury or illness, they **MUST** provide the athletic trainer with a release letter
 - Including: diagnosis, date of return to play, limitations
 - **CANNOT** participate without this



NUTRITION

- Drink 8 glasses of water per day
 - Bring a refillable water bottle!
 - Bring a sports drink for game days
- Consume a snack 30 minutes – 1 hour before practice



CLOSING POINTS

- HCA Form
- Contact Information
 - Katie.bradtke@HCAhealthcare.com
 - P: (804)560-6500
 - F: 1-844-581-0011



QUESTIONS?

