

Current Trends in Athletic Training

CIF-SS Athletic Administrators Summit

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Introductions

- Chase Paulson, MS, ATC
Diamond Bar High School
909) 594-1405 *33811
cpaulson@wvusd.k12.ca.us
- Heather Harvey, MA, ATC
AB Miller High School
909) 357-5800 *10612
harvhm@fUSD.net

Why We're Here Today



Objectives

Update	Updates in CA regarding AEDs, EAPS, and Wrestling Assessments
Provide	Provide guidelines in the development of an Emergency Action Plan (EAP)
Advocate	Advocate for full time ATs at your site
Review	Review resources

California Interscholastic Health and Safety Laws

- Concussion Laws
 - AB 25
 - AB 1451
 - AB 2127
- Eric Paredes Sudden Cardiac Arrest Prevention Act (AB 1639)

A man with short brown hair, wearing a red polo shirt, is shown from the chest up. He is looking directly at the camera with a slight smile. The background is a warm, out-of-focus indoor setting with some lights visible.

KEEP YOUR HEART IN THE GAME

A Message to Parents & Student Athletes



New California Interscholastic Health and Safety Law

- AB 2009
 - AEDs and EAPs for interscholastic athletics
 - Passed September 21st, 2018
 - To commence July 1st, 2019



AEDs in Schools Background

- Existing law authorizes...
 - School districts to provide specified medical services in connection with athletic events
 - Public schools to solicit and receive non-state funds to acquire and maintain an automated external defibrillator (AED)
- Authorized to give care, but are you?

Sudden Cardiac Arrest Background

- Sudden cardiac arrest (SCA) is the leading cause of death in young athletes¹⁻³
- Best way to prevent SCA is by early defibrillation; survival rates decline 7%– 10% each minute defibrillation is delayed⁴
 - 2006 study reported survival rate of exercise-related SCA measured over 7-year period in US was only 11% in people ages 5 – 22⁵
 - Defibrillation of individuals with SCA in high school setting resulted in 64% survival to hospital discharge (14 student athletes, 22 adults)³

AB 2009 Language

- If a school district or charter school elects to offer any interscholastic athletic program...
 - Written EAP in place that describes the location and procedures to be followed in the event of sudden cardiac arrest and other medical emergencies related to the athletic program's activities/events
 - Written EAP shall be posted in compliance with the most recent pertinent guidelines

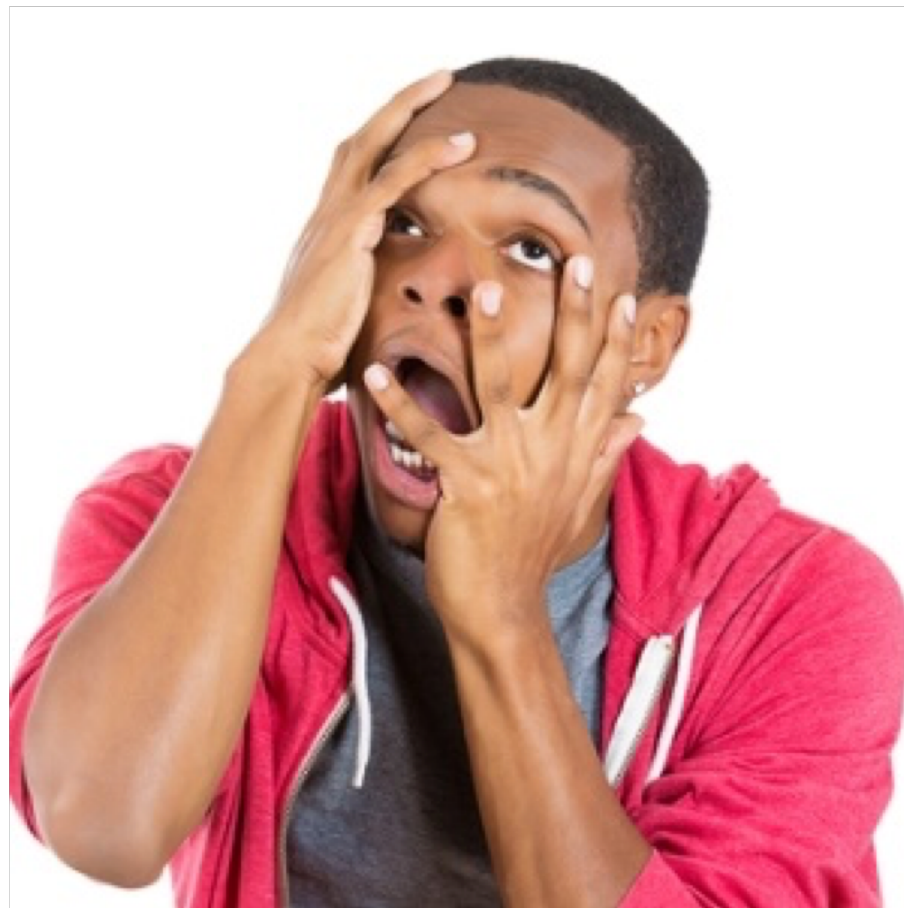
2009 Language, Cont.

- School district or the charter school shall acquire at least one AED for each school within the school district or the charter school
 - AED or AEDs are available for the purpose of rendering emergency care or treatment within a recommended ***three to five minutes*** of SCA to pupils, spectators, other individuals in attendance at athletic program's on-campus activities/events
 - Ensure that the AED or AEDs are available to athletic trainers and coaches and authorized persons at activities/events

2009 Language, Cont.

- Schools to ensure that AED or AEDs are maintained and regularly tested
 - Guidelines set forth by the manufacturer, the American Heart Association, or the American Red Cross
 - According to any applicable rules and regulations set forth by the governmental authority under the FDA and any other applicable state and federal authority

What This Looks Like For You



AED Funding

- Grants, Foundations, Resources, etc.
 - [AED Superstore](#)
 - [AED Grant](#)
 - [Think AED](#)
 - [Philips HeartStart Giving Program](#)
 - [School Health Lease Program](#)
 - [NFHS Foundation Grant](#)

Training and Implementation

- Encouraged to include AED training in required coaches training
 - CPR, First Aid, Concussion Awareness, SCA, **AND** AED
 - Hands-on training
 - Annual rehearsal for SCA events



AED Maintenance

- Manufacturer's recommended maintenance schedule
 - Periodic checks
 - "Ready" light, pads, battery, supplies and accessories, etc.
 - Beeps, chirps, flashing buttons
 - Physical damages
 - Who will be responsible for this?
 - Risk Management
 - Safety Officer
 - Athletic Director
 - Athletic Trainer

Automated External Defibrillator Maintenance Checklist



Date _____ Location _____

Inspection Performed by _____

Criteria	Status	Corrective Action / Comments
AED		
Placement visible, unobstructed and near phone		
Verify battery installation		
Check the status/ service indicator light		
Note absence of visual/ audible service alarm		
Inspect exterior components and sockets for cracks		
Supplies		
Two sets of AED pads in sealed package		
Check expiration date on pad packages		
Pocket mask with one-way valve		
Examination gloves		
Razors		
Absorbent gauze or hand towels		

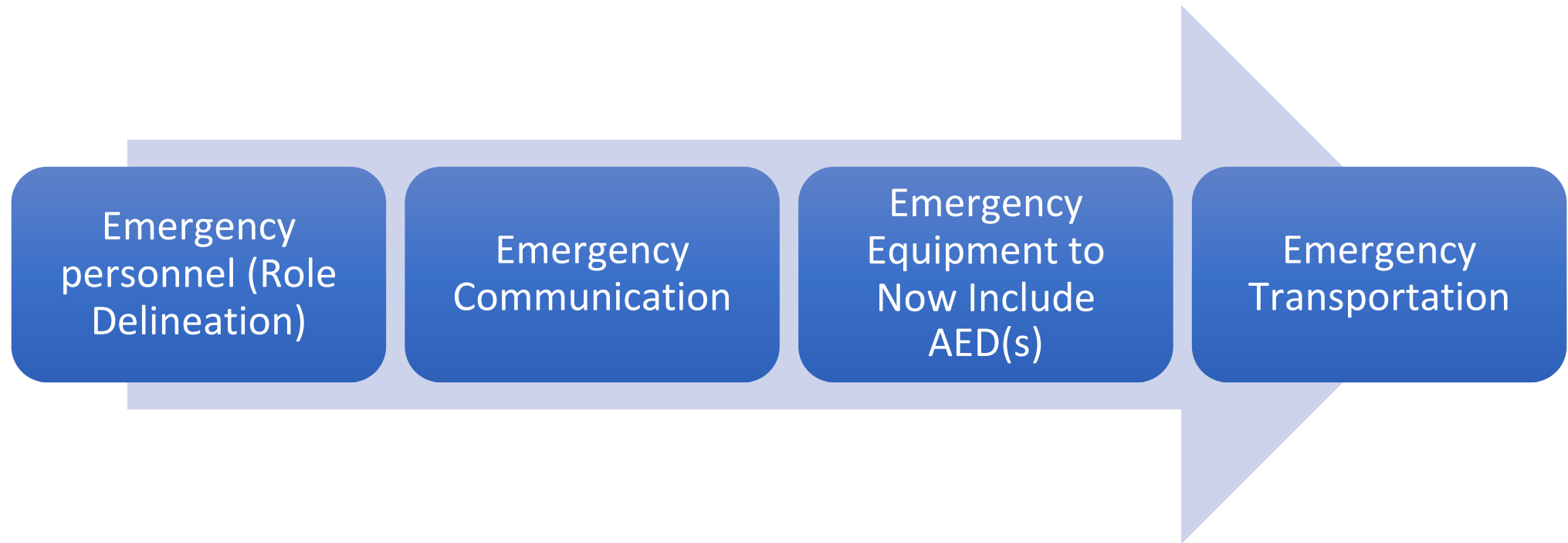
Please refer to manufacturer's User's Manual for more information and proper annual maintenance procedures.

Recognizing the Need for EAPs

- Now it's law!
- Public awareness
- Benefits of a well-developed EAP



Developing Your Plan



Creating or Updating Your EAP

[CIF Emergency Action Planning](#)

[Anyone Can Save A Life](#)

[Cardiac Emergency Response Plan](#)

Components of Your EAP

- Identification of personnel involved⁶
- Specification of equipment needed to respond to emergency
- Establishment of communication system to summon emergency care
 - Identification of mode of emergency transport
 - Specification of the venue or activity
 - Incorporation of the emergency personnel into development of plan

[NATA Preventing Sudden Death in Sports](#)

[NATA Emergency Planning in Athletics](#)



Emergency Personnel

- Personnel will vary
- Chain of Command
 - Who is on your staff?
 - Assign roles for each situation
- Role delineation

Emergency Communication



- Communicating with EMS or local emergency medical services
- Radios? Cell phones?
- Calling 911
 - Who makes the decision?
 - Dispatch questions

Emergency Equipment

- AED on-site and readily available
- Appropriate equipment for the sport or competition
 - Splints, first aid, emergency equipment
 - Equipment-intensive tools
- Regularly check equipment



Emergency Transportation

- Plan for transporting ill or injured student athletes
 - Away events
 - Transportation complications
- Onsite ambulance services
- Documentation



Written EAP VS. Visible EAP



ATHLETIC DEPARTMENT EMERGENCY ACTION PLAN: RESPONSE TEAMS

Athletic Director/Coach Name: _____ School: _____

Facility: _____

Call 911 or your local EMS for all medical emergencies. If unresponsive and not breathing normally, begin CPR and get the AED.

911 TEAM

CALL 911. Explain emergency. Provide location.

Local EMS Number: _____

EMS Access Point: _____

Cross Streets: _____

Responder 1: _____

MEET AMBULANCE at EMS Access Point. Take to victim.

EMS Access Point: _____ Practices _____ Events _____

Cross Streets: _____

Responder 1: _____

CALL CONTACTS. Provide location and victim's name.

Athletic Trainer: _____ Cell: _____

Athletic Director: _____ Cell: _____

Principal: _____ Cell: _____

Assistant Principal: _____ Cell: _____

CPR/AED TEAM

START CPR.

1. Position person on his/her back.
2. Put one hand on top of the other on middle of person's chest. Keeping arms straight, push hard and fast, (100 compressions/minute.) Let chest completely recoil after each compression.
3. Take turns with other responders as needed.

Coach/Advisor: _____

Responder 1: _____

Responder 2: _____

WHEN AED ARRIVES, TURN IT ON AND FOLLOW VOICE PROMPTS.

1. Remove clothing from chest.
2. Attach electrode pads as directed by voice prompts.
3. Stand clear while AED analyzes heart rhythm.
4. Keep area clear if AED advises a shock.
5. Follow device prompts for further action.
6. After EMS takes over, give AED to Athletic Director for data download.

AED TEAM

GET THE AED KIT.

Nearest AED: _____ Practices _____ Events _____

Responder 1: _____

GET THE ATHLETIC TRAINER.

Athletic Trainer: _____

Cell/Contact Method: _____

Typical location: _____

Responder 1: _____

*By law, all athletic coaches, paid and or volunteer, must be currently certified in CPR and First Aid and Concussion Awareness as outlined in Section 5590- 5596 of Title V of the California Code of Regulations and Education Code Sections 35179.5 and 44919. More information can be found at <http://cifstate.org/> under the Health & Safety tab, in the Sports Medicine Handbook.

Your Biggest Resource...

Your Athletic Trainer!



Athletic Trainers

- American Academy of Pediatrics⁷
 - Presence of athletic trainers can have a significant positive impact on student athlete health
 - Resulting in lower injury rates
 - Improved diagnosis and return-to-play decisions for concussion and other injuries
 - Having an AT can also result in fewer recurrent injuries
 - Recommends AT present at all football games and practices

Athletic Trainers, Cont.

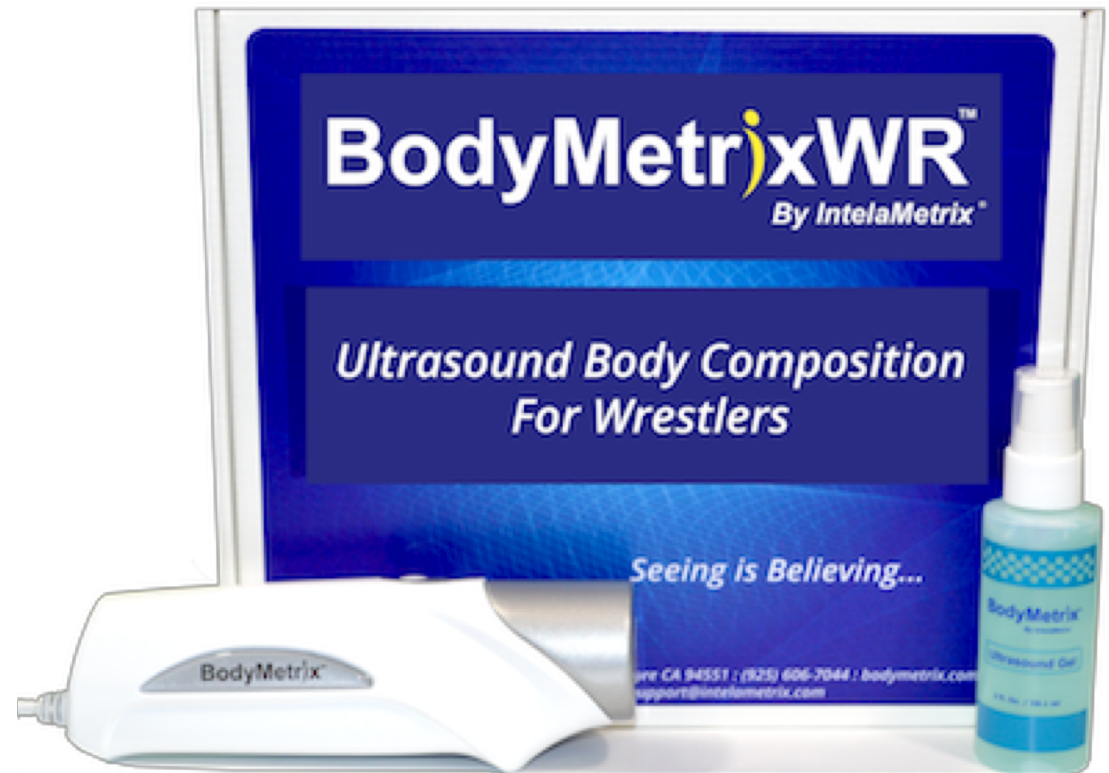
- Athletes at secondary schools with proper medical teams that include an athletic trainer sustain a lower incidence of injuries (both acute and recurring) than athletes at schools without athletic trainers
- Athletes at secondary schools with athletic trainers incur more diagnosed concussions, demonstrating better identification of these injuries⁸
- Full-time ATs in each school

Wrestling Updates

- Weight assessments begin October 15 and end January 15
- Assessors have been completing the annual recertification process since September 21

New Device and Procedure

- US Wand - BodyMetrix will be the only approved method statewide by the 2020-2021 season



New Device and Procedure

- Utilizes a three-point (males) or two-point (females) analysis of subcutaneous body fat combined with height and weight
 - Will allocate wrestlers into the appropriate weight class
 - Ensures they are cutting weight safely without crash dehydration or other unsafe methods

New Device and Procedure, Cont.

- Assessment procedures
 - Tanita procedures – essentially the same
 - US Wand procedures – not hydration specific, can be after practice, does not require USG (urine test)

New Device and Procedures, Cont.

- TrackWrestling changes – boys and girls are completely separate (two logins)
- Report errors to TrackWrestling
- Appeals = same assessor or Section Master Assessor; same procedures (Tanita/US); same form as Initial Assessment
- Forms
 - Individual Profile Data Form – updated language for US Wand
 - Physician Clearance for BF% - updated to add Assessor input and initials

Questions? Comments?

Thank you

- ¹Drezner JA, Chun JS, Harmon KG, Derminer L. Survival trends in the United States following exercise-related sudden cardiac arrest in the youth: 2000-2006. *Heart Rhythm*. 2008 Jun; 5(6):794-9.
- ²Drezner JA, Courson RW, Roberts WO, Mosesso VN, Link MS, Maron BJ. Inter-association task force recommendations on emergency preparedness and management of sudden cardiac arrest in high school and college athletic programs: a consensus statement. *Heart Rhythm*. 2007;4(4):549–565.
- ³Drezner JA, Rao AL, Heistand J, Bloomingdale MK, Harmon KG. Effectiveness of emergency response planning for sudden cardiac arrest in United States high schools with automated external defibrillators. *Circulation*. 2009;120(6):518–525.
- ⁴Marenco JP, Wang PJ, Link MS, Homoud MK, Estes NA. Improving survival from sudden cardiac arrest: the role of the automated external defibrillator. *JAMA*. 2001;285(9):1193–1200.
- ⁵Drezner JA, Rogers KJ. Sudden cardiac arrest in intercollegiate athletes: detailed analysis and outcomes of resuscitation in nine cases. *Heart Rhythm*. 2006;3(7):755–759.
- ⁶Andersen JC, Courson RW, Kleiner DM, McLoda TA. National Athletic Trainers' Association Position Statement: Emergency Planning in Athletics. *Journal of Athletic Training*. 2002;37(1):99-104.
- ⁷LaBella, C., MD, FAAP, Henke, N., Collins, C., & Comstock, R. D., PhD. (2012, October 22). A Comparative Analysis of Injury Rates and Patterns Among Girls' Soccer and Basketball Players At Schools with and without Athletic Trainers From 2006/07-2008/09. Lecture presented at AAP National Conference and Exhibition in Hilton Riverside - Grand Salon D19/D22, New Orleans.
- ⁸Riana R. Pryor, Douglas J. Casa, Lesley W. Vandermark, Rebecca L. Stearns, Sarah M. Attanasio, Garrett J. Fontaine, and Alex M. Wafer (2015) Athletic Training Services in Public Secondary Schools: A Benchmark Study. *Journal of Athletic Training*: February 2015, Vol. 50, No. 2, pp. 156-162.