

# Los Angeles Unified School District Risk Management - Loss Prevention

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## Preventing Athletic Injuries

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This general guide to preventing athletic injuries has been created through the research of UnitedHealthcare **Student**Resources, a provider of K-12 Student Insurance plans. The presentation contents are not a substitute for appropriate medical advice or treatment.

# K-12 Athletic Injuries

*“The #1 reason adolescents visit emergency rooms is from sports injuries, and roughly \$2-Billion in health care costs could be saved annually by preventing these types of injuries.”*

– **Dr. David Janda**, Director of The Institute for Preventative Sports Medicine – Ann Arbor, Michigan; Author of The Awakening of a Surgeon: A Family Guide to Preventing Sports Injuries and Death.

# Injury Frequency

Research by Harvard University and Massachusetts General Hospital for Children:

- Up to 48% of teen athletes sustain an injury during their High School years.
- Football accounts for most injuries in boys.
- Soccer accounts for most injuries in girls.
- All sports have a risk for serious injury, even non-contact sports.

# Types of Injuries

- **Macro-trauma** – a sudden injury from a major force.  
Examples: Fractures, sprains, strains, tears, cuts, bruises
- **Micro-trauma** – repetitive/overuse injuries occurring over time.  
Examples: Shin splints, shoulder impingement from swinging & throwing, wrist, knee & back stress from jumping and landing

Micro-trauma is **OFTEN IGNORED** to the point of long-term damage.

# Most Common Athletic Injuries

Abrasions

Achilles Tendon Rupture

Ankle Sprains

ACL - Anterior Cruciate  
Ligament Injuries

Blisters

Concussion

Clavicle Fracture (Broken  
Shoulder)

Delayed-Onset Muscle  
Soreness

Hamstring Pull,  
(or Tear or Strain)

Knee Pain

# Most Common Injuries (cont.)

Muscle Cramps

Overtraining Syndrome

Plantar Fasciitis

Shin Splints

Shoulder Tendinitis,  
Bursitis and Impinge-  
ment Syndrome

Sprains

Stress Fracture

Tendonitis

Tennis Elbow

Torn Rotator Cuff

# Student Injury Aptitude

During teen growth and development:

- The skeleton must support increased weight and load.
- Lengthening of bones reduces flexibility.
- Agility, power, speed and motor coordination are inconsistent.
- Structural defects & weaknesses may not appear outwardly.

**Sports pre-participation physical exams are imperative.**



# Controllable Student Dynamics

- Poor physical fitness, nutrition or conditioning.
- Competing while stressed, injured or fatigued.
- Inadequate training and conditioning.
- Ignoring the rules. Horseplay.
- Over-exerting, heroic efforts.
- Being hazed or intentionally hurt by others.

# Correctable Administrative Dynamics

- Hazardous playing fields.
- Play during hazardous weather conditions.
- Inadequate supervision.
- Lack of rules - enforcement.
- Improper, inadequate or poorly fitted safety equipment.
- Ignoring rest, hydration and conditioning protocols.
- Inappropriate demands and expectations.

***Lawsuits arise out of negligence and lack of education.***

# Prevention – Practice and Training

- Require and review sports pre-participation physical exams.
- Before each training or sports event, warm up and then cool down afterward.
- Incorporate flexibility exercises.
- Follow hydration and rest protocols

**Free** – NFHS hydration guidelines at <http://www.nfhs.org/content.aspx?id=3325>.

## Prevention – Practice and Training (cont.)

- Begin training one to two months before sports activity is to begin.
- Gradually increase training intensity, but not more than ten percent each week.
- Ensure activity is within safe ranges for each team member's age and size.
- Use proper, well fitted and well maintained equipment.

## Prevention – ADs & Coaches (and Parents)

- Use cross-training for overall conditioning and to allow specific body areas to rest.
- Insist coaches adhere to appropriate training principles.
- Ensure practices and contests are supervised carefully and rules are strictly enforced.
- Be careful not to emphasize winning beyond safety.
- Recognize limitations, respect injuries and cautiously reinstate.
- Be aware of when conditions present safety issues.
- Stop activity for players when you know pain exists.

## Prevention – Practical Implementation

- Use safer equipment such as “throw-away bases” (that come out of the ground when slid into to reduce risk of broken ankles & legs).
- Maintain playing fields or courts: Tracks without potholes, Fields without pits, Proper lighting.
- Sanitize mats and shared equipment to prevent MRSA.
- Immediately wipe up liquids on slick courts.

## Prevention – Practical Implementation (cont.)

- Have athletic trainers at every event, not just Friday night football.
- Don't assume girl's sports are less risky.
- Teach athletes to listen to their bodies and come forward with concerns.
- Know the proper reporting and claims procedures and report immediately.

# Injury Treatment

**RICE** – Most minor injuries can be treated with **R**est, **I**ce, **C**ompression and **E**levation.

**Always recommend that an athlete seek medical attention when there is:**

- Severe pain or persistent pain more than 2 weeks in a bone or joint.
- Pain that radiates to another area of the body.
- Significant swelling or persistent numbness, tingling or weakness.
- Inability to move the injured body part.
- Potential for or signs of infection.
- Uncertainty or situations beyond your training.



# Healing Times & Reinstatement

Healing times for any injury can be longer if athletes return to activity too soon.

## **Advise students to:**

- Never exercise the injured part if there's pain during rest.
- Return to activity at a very low intensity, and increase only when there is no pain.

## **Concussions**

Even seemingly minor concussions can have devastating results. Prevention of “second impact” syndrome (a very serious condition) includes strictly following the doctor’s orders regarding return to activity.

**Free** – Concussion Management brochure from NFHS at <http://www.nfhs.org/sportsmed.aspx>

# Web & Association Resources

## Academic/Medical Information

[http://www.massgeneral.org/children/adolescenthealth/articles/aa\\_athletic\\_injuries.aspx](http://www.massgeneral.org/children/adolescenthealth/articles/aa_athletic_injuries.aspx)

<http://www.ipism.org/sports-medicine-education.html>

<http://www.aap.org/advocacy/releases/aprsportsinjurytips.cfm>

## General Suggestions for Parents and Students

<http://sportsmedicine.about.com/cs/injuryprevention/a/aa101801a.htm>

<http://sportsmedicine.about.com/cs/injuryprevention/a/aa101402a.htm>

<http://sportsmedicine.about.com/cs/injuries/a/aa011002a.htm?p=1>

## Athletic Association Resources

<http://www.nfhs.org/sportsmed.aspx>

<http://www.niaaa.org/PDF/Professional%20Development%20Book%202007-08.pdf>

# Athletic Injury Insurance Resource

Los Angeles Unified School District does not provide health or accident insurance for injuries to students at school.

However, student accident insurance plans are available from our partner, UnitedHealthcare **StudentResources**.

Both the At-School and the 24-Hour Accident coverage include protection during all interscholastic athletics except for High School Football. There is a separate plan for Football.

Parents may learn more about the plans and enroll at [www.K12StudentInsurance.com](http://www.K12StudentInsurance.com).

# LAUSD Risk Management Contact

Larry Chatman  
Insurance Manager  
Division of Risk Management and Insurance Services  
213-241-2176  
Larry.Chatman@lausd.net