The Management Plan: Start Active Treatment Versus Immediate Referral

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Disclosures

• I have no financial interest or contractual relationships with any commercial interest relating to this presentation.
• The views expressed in these slides and today’s discussion are my own.

Objectives

• Discuss the value of the athletic trainers in establishing the immediate management plan based on standing orders
• Summarize the positive impact of the initial assessment in the communication process with the team physician
• Describe the mentoring relationship between the team physician and the athletic trainer that creates optimal patient centered care

Overarching goals

• Reduce risk of injury during sports participation
• Provide timely assessment for injured athletes
• Provide treatment, rehabilitation and conditioning for athletes
• Establish plans for return to sports after injury or illness
• Communication with parents, other healthcare providers, and coaches
• Be prepared in the event of a catastrophic injury
How do we best achieve our goals?

- Preparticipation evaluations
- Immediate access to assessment of athletic injuries
- Determine appropriate resources needed for further assessment or initiation of care
- Establishing systems and parameters for ongoing care of the injured athlete
- Creating direct lines of communication and coordination of care
- Create and communicate emergency action plan

Standing orders

- “written protocols, recommendations or guidelines for treatment and care of a physically active individual who is a member of a professional, amateur, school, collegiate or other sports organization, or of a physically active individual who requires treatment, first aid or care in an emergency situation”

Standing orders

1. Furnished and signed by a health care provider
2. Followed by an athletic trainer
3. Reviewed annually
4. Require availability of ongoing communication between the health care provider and the athletic trainer
5. Include
   1. Plan for emergency situations
   2. Appropriate treatment for specific injuries or illnesses
   3. Instructions for the treatment and management of concussions
   4. List of conditions necessitating immediate referral
   5. List of conditions beyond the scope of practice for an athletic trainer

Initial assessment

- Initial encounter - injury or illness occurs on the field/court and athletes presents to the athletic trainer
- Urgency assessed - Determination if Emergency action plan must be initiated
- Further assessment by the AT
  - Detailed history of illness/injury
  - Clinical examination
- Determine if treatment should be initiated vs referral
- Develop initial treatment plan
  - Diagnostic reasoning used to establish rehabilitation plan
  - Long and short term goals created

What treatment can be initiated?

- Taping, splinting, bracing
- Modalities: Cryotherapy, heat, electric stim, ultrasound, compression devices
- Soft tissue mobilization/ instrumented STM
- Joint mobilization
- Rehabilitation exercises
  - Stretching
  - Strengthening
  - Proprioception exercises
  - Sports-specific sequences
Benefits of early assessment and treatment

- Optimize efficiency of care
- Appropriate use of health care resources
- Improve speed of recovery and return to sports
- Limit emotional impact of an athletic injury

How do we ensure athlete safety?

- ATC training and continuing education
- Physician/ATC mentoring
  - This works both directions
- Communication

Mentoring

- Team approach between the athletic trainers and team physician
  - Best if other professionals involved in the athlete's care are included
- Combination of formal didactic education programs, discussion and review of individual athletic injuries, and sideline/training room communication
- Ongoing process

When to refer

- Immediate threats to life/LOC/Seizure→ activate EMS
- Spine injury→ immobilize/stabilize→ activate EMS
- Suspected fracture/dislocation→ immobilize, notify team physician and/or send for urgent evaluation
- Severe sprains, neurologic injury, vascular conditions, recurrent injuries→ notify team physician

- CT practice act: Each person who practices athletic training under standing orders shall make a written or oral referral to a licensed health care provider of any physically active individual who has an athletic injury which symptoms have not improved for a period of five days from the day of injury, or who has any physical or medical condition that would constitute a medical contraindication for athletic training and that may require medical treatment beyond the scope of athletic training.

Emergency action plan

- Guidelines for management of catastrophic injury
- Written plan reviewed annually
  - Separate plans for each athletic facility
  - Plan for transportation from venue
  - List of personnel and responsibilities for each event
  - List of emergency equipment and location (i.e., AED, medical kit, splint equipment)
  - Documentation needed for post emergency
  - Outline training and refresher courses needed for first responders

Thank you!
References


