

# AHS Sports Medicine

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**Children's**<sup>SM</sup>  
Healthcare of Atlanta  
*Dedicated to All Better*

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# Children's Healthcare of Atlanta and AHS

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- CHOA provides an athletic trainer to AHS to cover home sporting events and practices.
- AHS provides banners and ads for CHOA in sporting venues and programs
- Contact sports have priority over “non” contact sports when more than one game occurring at the same time.
- Athletic trainer is not an employee of Fulton County Schools.



# Team Physician

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Dr. David Marshall, MD, is the team physician for Alpharetta HS.

His practice is Children's Orthopedic of Atlanta

- Closest office is off Old Milton Pkwy at the Pediatric Center
- Sports medicine trained physician
- Concussion Specialist
- Physician Extender for Dr. Marshall
  - Dave Kloehs 678-357-0738
- Children's Orthopedic of Atlanta is a separate business from CHOA. Dr. Marshall works with AT's and is very supportive of what they can do.



# AHS Injury Protocol (Home events)

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- When an athlete gets hurt at practice or a game, contact the AT by cell phone or in person. Make sure to inform the AT of what body part, what caused the injury, and how severe it appears.
- Let the AT evaluate the injury and decide a course of action.
- AT will communicate with parents and coaches on status of the injury.

(If a medical emergency, call 911 before calling the AT)



# Injury Protocol (away games)

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- If a player gets hurt during an away game, then ask the AT at that school to evaluate the player, to provide first aid or taping, and for injury ice for the bus ride home.
- Contact the AHS athletic trainer to inform them of the player's injury and what the visiting team's AT recommended.
- Every school in our region and most in metro Atlanta have certified athletic trainers.



# Concussions

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- Concussion is a form of traumatic brain injury (TBI). This injury can occur as a result of a blow to or around the head that causes acceleration forces to the brain. This movement of the brain within the skull causes a functional disturbance in how the brain works or processes information (also known as transient alteration in cognitive functioning).



# Concussions

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- State law, HB 284, requires that schools have a concussion policy that includes the following components:
  - ~Prior to the beginning of each athletic season, an information sheet that informs parents or legal guardians of the risk of concussions must be provided.
  - ~If a youth athlete (ages 7 to 18) participating in a youth athletic activity exhibits signs or symptoms of a concussion, he must be removed from play and evaluated by a healthcare provider.
  - ~Before a youth athlete can return to play, he must be cleared by a healthcare provider trained in the management of concussions.





# Concussions

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- AT's are healthcare providers that can evaluate a player.
- AHS uses ImPact Baseline concussion testing on its athletes.
- Testing is good for 2 years. Test freshman and juniors, plus any “new” students to the team.



# What to do when a concussion suspected...

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- If you as a coach think a player may have a concussion call the AT immediately. Do NOT let the player back into practice or a game until they have been evaluated and cleared.
- Sideline concussion test is given right after the initial injury and decision is made about return to play.
- If the player has a suspected concussion, then the AT will give warning sign sheet to student or parent with further instructions.
- Referral to Dr. Marshall for follow up is advised.



# Concussion Return to Play...

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- Per the doctor's orders, the player will be retested on the ImPact concussion test to compare against baseline. This PLUS other criteria will determine the next course of action.
- All concussed players should follow the no screen rule – No texting, watching TV, or tablet/laptop usage during the symptomatic phase. Limit homework and take frequent breaks.
- Parent will need to contact the school about modifications for the student in class.



# Concussion Return to Play...

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- Once the student has been cleared by a healthcare professional, they will begin a return to play progression.
- After clearance, most progressions back to sports take 5-7 days. At any time during progression any symptoms return, then the player will start the progression again once the symptoms are resolved.
- CHOA has created guidelines for return to play that most physicians use that are sport specific for the athlete. Find these at [choa.org/concussion](http://choa.org/concussion)



# GHSA Heat Guidelines

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- WBGT reading is taken at intervals throughout fall practices. A special device is used to calculate the WBGT. The AT will take the WBGT reading prior to the start of practice and continually throughout practice. If an activity revision is required, then the AT will notify the coaches. Any time during practice if an activity revision is necessary, the coaches will be notified by the AT.



# WBGT Reading and Activity Guidelines

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- Under 82.0 ..... Normal Activities - Provide at least three separate rest breaks each hour with a minimum duration of 3 minutes each during the workout.
- 82.0 - 86.9 ..... Use discretion for intense or prolonged exercise; watch at-risk players carefully. Provide at least three separate rest breaks each hour with a minimum duration of 4 minutes each.
- 87.0 - 89.9 ..... Maximum practice time is 2 hours. For Football: players are restricted to helmet, shoulder pads, and shorts during practice, and all protective equipment must be removed during conditioning activities. If the WBGT rises to this level during practice, players may continue to work out wearing football pants without changing to shorts. For All Sports: Provide at least four separate rest breaks each hour with a minimum duration of 4 minutes each.



# WBGT Readings and Activity Guidelines

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- 90.0 - 92.0 ..... Maximum practice time is 1 hour. For Football: no protective equipment may be worn during practice, and there may be no conditioning activities. For All Sports: There must be 20 minutes of rest breaks distributed throughout the hour of practice.
- Over 92.1 ..... No outdoor workouts. Delay practice until a cooler WBGT level is reached.

Practices are defined as: the period of time that a participant engages in a coach-supervised, school-approved sport or conditioning-related activity. Practices are timed from the time the players report to the practice or workout area until players leave that area. *If a practice is interrupted for a weather-related reason, the “clock” on that practice will stop and will begin again when the practice resumes. – GHSA Heat Policy*



# Heat Illness – Heat Cramps

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Painful, involuntary muscle spasms that occur during heavy exercise in hot environments

Muscles most often affected are the calves, quads, arms, abdominals, and back.





# Heat Cramps: First Aid

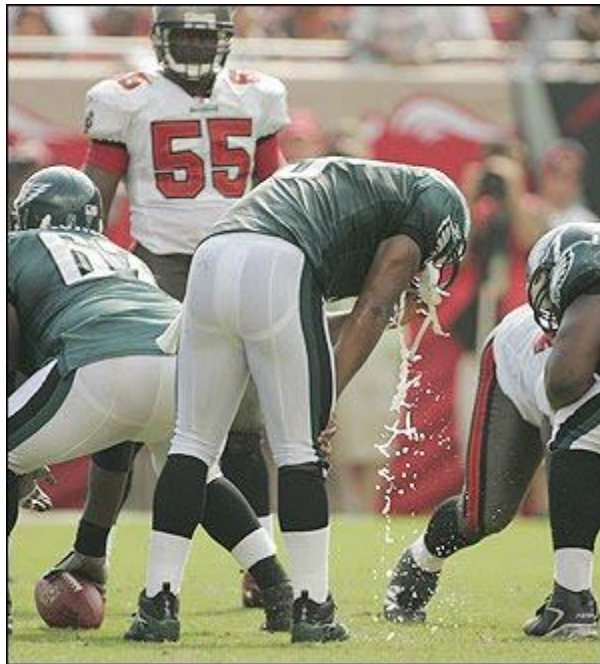
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- Rest and cool down in shade.
- Drink water or sports drink. Sip it!
- Massage and stretch affected area.
- If cramps do NOT go away in one hour, call a doctor.
- Recognition at this point is critical to prevent further injury.



# Heat Illness – Heat Exhaustion

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After heat cramps have been left untreated, symptoms progress and include:

- Extreme thirst
- Feeling faint
- Nausea
- Heavy sweating
- Ashen or grey appearance
- Rapid, weak heart beat
- Low blood pressure
- Cool, moist skin
- Low-grade fever



# Heat Exhaustion – First Aid

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- Get the student out of the sun into shade or an air conditioned location.
- Lay the student down on their back with their feet elevated.
- Remove excessive amount of clothing or equipment.
- Drink small amounts of water often.
- Cool the student off by spraying or sponging down with cool water.

**\*\*\*Monitor closely!!! Heat exhaustion can quickly become Heat Stroke. When in doubt, Call 911!**



# Heat Illness – Heat Stroke

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- Heat Stroke is a medical emergency, Call 911!

Symptoms:

- Dry, hot, red skin
- Rapid heartbeat, shallow breathing
- Dizziness, nausea
- Loss of consciousness
- Irritability, belligerence
- Seizures
- Coma

Monitor Airway, Breathing and Circulation while waiting for EMS.  
Use Ice towels to cool body.

