Returning to Play?

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Disclosures

No financial disclosures

 I work with WIAA, NFL, Green Bay Packers – this talk represents my personal opinions and not policy for any of the entities

 This will not discuss every option or situation, but helps set a framework for how to approach these tricky issues





Return to Play Issues

Create protocol

- > Work with athletic director (and coaches) to have this in writing
- > School AT / team physician should have final say
 - If disagreement with outside provider reach out by phone to discuss

Communication is key

- > Establish relationships and review protocol with coaches in preseason
 - Athletic Director involvement
- > Preseason athlete and parent meeting to review RTP decisions
- Our goal is not to help the team win games, but to keep the athlete safe, healthy, and able to participate (now and as they age)

Acute problems: Don't play

Purposefully avoiding certain things:

- » Chronic disorders: Uncontrolled seizure, diabetes, etc.
- » Cardiopulmonary disorders
- » Concussion

Contagious illness:

- » Fever
- » Vomiting
- » Diarrhea
- » Skin conditions / Eye drainage

Musculoskeletal:

- » Impaired ROM limping, throwing differently, etc.
- » Impaired strength
- » Inability to effectively
 - Football DB backpedal & turn at full speed
 - Wrestler hold position & shoot





RTP Thought Process

- If you don't think they can go they should not go
- If you think they could go
 - ➤ But athlete says no support them, but figure out situation and rationale later (*more privacy*)
 - But parent says no support them, but figure out situation and rationale later (more privacy)
 - Ideally the preseason meetings should be used to set the expectations establishing when parents can/should come down to the field of play/training room
 - ➤ But coach says no (don't want risk, think player is still off) support them and support the player that will likely feel disappointed, hurt, angry, nervous
 - Circle back with coach to encourage a positive conversation with athlete



