THE SPORTS MEDICINE TEAM: COMMUNICATION AND RETURN TO PLAY PROTOCOL

Brett Schulz LAT;CMSS
Sport and Spine Physical Therapy
Conflict of Interest

• I have no commercial, financial, or research relationships or interests within the past 12 months that affect my ability to provide a fair and balanced presentation for the proposed CME activity.
Outline

• (I) Who are the members of the sports medicine team.
• (II) Why the information (communication) is important.
• (III) HIPPA compliant information.
• (IV) New EMR programs and how they can help.
• (V) Return to play protocol or requirements.
Sports Medicine Team

Athlete

Athletic Trainer

School

Parent

Physician
Sports Medicine Team

- Physical education
- Athletic Director
- Coach
- Nurse
- Teacher
- Strength coach
School requirements

- If a physician hold or removes a student from competition or practice, the coach/advisor must receive clearance from a physician before the student can participate in practices, meets, games, meetings, or events.
Sports Medicine Team

- Physician
- Primary
- Neurologist
- Podiatrist
- Orthopedist
- Chiropractor
- Dentist
- Nurse Practitioner
- Physical Therapist
- Physician Assistant
- Dermatologist
- Athletic Trainer
Communication of PHI

**PHI delivery**
- Mail
- email
- Print hand deliver
- Fax
- Electronic transfer
- courier

**Reasons**
- Referrals
- Lab
- Billing
- Transfer of care
- School accommodations or files
Communication

- HIPPA- Privacy Rule establishes national standards to protect individuals’ medical records and other personal health information and applies to health plans, health care clearinghouses, and those health care providers that conduct certain health care transactions electronically.
- FERPA- The Family Educational Rights and Privacy Act is a federal privacy law that gives parents certain protections with regard to their children’s education records.
 Protected Health Information

• Any information whether oral or recorded in any form or medium, that:

• (1) Is created or received by a health care provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse; and

• (2) Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or past, present or future payment for the provision of health care to an individual.
Individually Identifiable Health Information

- Information that is a subset of health information, including demographic information collected from individual, and:
- (1) Is created or received by a health care provider, health plan, employer, or health care clearinghouse; and:
- (2) Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of the health care to the individual; and
- (i) That identifies the individual; or
- (ii) With respect to which there is a reasonable basis to believe the information can be used to identify the individual.
Order: 72 (home)
Payor: UMR / Plan: UMR NCHA PPO ASPIRUS NETWORK / Product Type:
PREFERRED PROVIDER ORG (PPO) /
Date: 8/20/2018       Time: 11:25 AM

ORDERS:
Patient may return to practice without any restrictions starting 08/20/18.

DIAGNOSIS:
Encounter Diagnoses
Name
• Neck pain

Primary? Yes
1. If you are still having symptoms of concussion, you may need extra help to perform school or work related activities. As your symptoms decrease during recovery, the extra help or support can be removed gradually.

2. Inform personnel around you (teachers, nurse, co-workers, psychologist / counselor, supervisors, and administration) about your injury and symptoms.

   Personnel should be instructed to watch for:
   - Increased problems paying attention or concentrating
   - Increased problems remembering or learning new information
   - Longer time needed to complete tasks or assignments
   - Greater irritability, less able to cope with stress
   - Symptoms worsen (headache, tiredness, etc) when doing work or school related tasks

**The following are recommended at the present time:**

_X_ Cleared to return to school and activities of daily living without restrictions but needs to go through WIAA progression to be able to do dance without restrictions. School trainer can supervise.

Provider Signature: __________ Date: 10/19/2018
Note samples

This notice verifies that the above named student was seen and treated in our emergency department on the above printed date. The student will be able to return to school on March 15, 2018.

The student has the following restrictions:
no physical education for one week.

These restrictions apply through __________
After this date, the student should be able to participate fully in all school activities.

NOTE: If symptoms continue beyond this date, the student needs to follow up with the referral physician for further evaluation.
Documentation Solutions

Athletic Training EMR programs

- Presagia
- Athletic Trainer System (ATS)
- Sportware
- Healthy Roster
- CSMi
- CORE-AT

Advantages

- Documentation capabilities
- Injury surveillance
- Participation updates
- Medical records security
- Referral resources
**Test Athlete**
DOB: 09/18/2006
DC Everest Senior High School Status: Waiting For Assessment
Strength & Conditioning

### INJURIES

### INJURIES WITH INCIDENT REPORTS

<table>
<thead>
<tr>
<th>Injury Date</th>
<th>Reported By</th>
<th>DC Everest Senior High School Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/10/2018</td>
<td>Brett Schulz</td>
<td>Returned To Play and Closed</td>
</tr>
<tr>
<td>9/29/2017</td>
<td>Larry Gordon</td>
<td>Not Cleared</td>
</tr>
<tr>
<td>9/18/2017</td>
<td>Brett Schulz</td>
<td>Limited Activity</td>
</tr>
</tbody>
</table>

### OTHER REPORTED INJURIES

<table>
<thead>
<tr>
<th>Injury Date</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/6/2018</td>
<td></td>
</tr>
</tbody>
</table>
**Test Athlete**

DOB: 09/18/2006
DC Everest Senior High School Status: Waiting For Assessment
Strength & Conditioning

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### FOLLOW-UP SERVICES

<table>
<thead>
<tr>
<th>Service</th>
<th>Dr.</th>
<th>Description</th>
<th>Status</th>
<th>Referral Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office Visit Initial</td>
<td>Dr</td>
<td>Larry Gordon, MD DO</td>
<td>Pending</td>
<td>12/7/2018</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Abrasion, Bilateral Cervical Segment, Neck</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Aspirin</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Status: Pending</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office Visit Follow Up, Primary Care</td>
<td></td>
<td>Larry Gordon, MD DO</td>
<td>Pending</td>
<td>12/7/2018</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Strain, Right Vastus Lateralis, Hip, Lower Extremity</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Aspirin</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Status: Pending</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**DOCUMENT TYPES**

Document types allow you to collect standardized documents and forms for all your athletes and view reports regarding compliance.

<table>
<thead>
<tr>
<th><strong>Concussion school form</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Required:</strong> No</td>
</tr>
<tr>
<td><strong>Review Required:</strong> No</td>
</tr>
<tr>
<td><strong>Instructions:</strong> Print and scan for nurse</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Scat 5</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Required:</strong> No</td>
</tr>
<tr>
<td><strong>Review Required:</strong> No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>School/Sport note</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Required:</strong> No</td>
</tr>
<tr>
<td><strong>Review Required:</strong> No</td>
</tr>
<tr>
<td><strong>Instructions:</strong> Can upload or print for school or coach restrictions or return. Will need to back space to add name and typing note.</td>
</tr>
</tbody>
</table>
# Injury Breakdown

**Sport & Spine Physical Therapy**  
08/01/2018 - 01/02/2019

Total Injuries: 199

<table>
<thead>
<tr>
<th>Injury</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concussion, Brain, Head</td>
<td>17</td>
<td>8.54%</td>
</tr>
<tr>
<td>Sprain, Ankle, Lower Extremity</td>
<td>15</td>
<td>7.54%</td>
</tr>
<tr>
<td>Strain, Thigh, Lower Extremity</td>
<td>11</td>
<td>5.53%</td>
</tr>
<tr>
<td>Impingement, Shoulder, Upper Extremity</td>
<td>7</td>
<td>3.52%</td>
</tr>
<tr>
<td>Contusion, Knee, Lower Extremity</td>
<td>6</td>
<td>3.02%</td>
</tr>
<tr>
<td>Others</td>
<td>143</td>
<td>71.86%</td>
</tr>
</tbody>
</table>

![Pie chart showing injury distribution:  Concussion, Brain, Head (8.54%), Sprain, Ankle, Lower Extremity (7.54%), Strain, Thigh, Lower Extremity (5.53%), Impingement, Shoulder, Upper Extremity (3.52%), Contusion, Knee, Lower Extremity (3.02%), Others (71.86%).]
Return to Play Protocol

- Appropriate healing and readiness for return to participation.
- Progressive exercise and tolerance for activity progression.
- Functional assessment- balance and strength testing.
- Limitations with return to practice/game.
August 27, 2018

To Whom It May Concern:

Dalton was in my clinic for an appointment today. Dalton has been medically cleared to practice and compete at full capacity. All functional tests were within normal limits. He has been advised to continue stretching as prescribed. Please contact me if you have any questions.
Return to Sports

Patient Name: [Redacted]  Date: October 17, 2018

☐ May resume full contact sports on [DATE].

☒ May resume limited participation on [DATE].

☒ Limitations: Can resume lifting today, shoulder strengthening exercises. No throwing for 4 weeks. After 4 weeks he may begin pitching program, but start with simple pitches, low pitch counts. No sliders, curves until mid-Jan 2019, then increase as tolerated under the discretion of the coach.

[COMMENTS]

☐ Must use the following protective gear:

[COMMENTS]

☐ Is not cleared for sports/gym at this time.

☐ Follow up on [DATE].

[COMMENTS]

Return to School/Work
Conclusion

• Number of persons involved in care of athlete.
• Develop procedures for releasing PHI.
• Know who information is being released to. Appropriate information to be beneficial to accommodations requested.
• Release patient to appropriate level of abilities.