Stamford Health

Parents’ Guide to Caring for the Student Athlete

[Image of children playing soccer]
“Do you know what my favorite part of the game is? The opportunity to play.”

Mike Singletary, *National Football Hall of Fame Member*
Congratulations!

Your child has joined an athletic program, taking a positive step toward fighting off the two major contributors to chronic disease: a sedentary lifestyle and excess weight. Organized sports may not be the best option for everyone, but all children need regular exercise. The physical benefits include increased cardiovascular endurance, muscle strength, coordination and flexibility. Studies have shown that there is a mind-body connection: physical activity can help lead to mental well-being, increased confidence and a sense of accomplishment. Socially, sports offer kids the opportunity to learn to work as part of a team and to form new friendships.

However, it is important that as a parent, you recognize that young athletes are not just small adults. Children’s growing bodies have very different needs, which change as they grow. There is a sizable difference in coordination, stamina and strength. Ensure that your young athlete is properly prepared and that you know what to do in the event of an injury. Then sit back and watch your child discover the thrill of meeting personal challenges.

For more information, call the Orthopedic & Spine Institute at 877.233.WELL (9355).
**GETTING READY TO PLAY**

Get Your Child an Annual Medical Checkup

Although most sports programs don’t require a checkup before participating until middle school or high school, the American Academy of Pediatrics recommends an annual exam for children of all ages. Make sure the healthcare provider understands:

- The activity your child wishes to play — the doctor can ensure that your child can play safely or be redirected to a more appropriate sport

- Symptoms or concerns your child may be having — this is critical for recognizing health issues early, when they can most easily and successfully be addressed

If you need a referral to a pediatrician or specialist, please call Stamford Health’s referral service, 24 hours a day, seven days a week, toll-free at 877.233.WELL (9355).
Parents: Let Your Children Play

If you’ve ever had a child participate in an organized sport, there’s a good chance you’ve had the uncomfortable experience of watching a parent act in an inappropriate or unsportsmanlike manner. Unfortunately, with today’s win-at-all-costs mentality, parents can lose sight of what young people’s athletics are supposed to be about: physical exercise, a learning and social experience, and fun.

It is up to the parents to set the correct tone. Urge your child to challenge himself/herself, to play to the best of his/her abilities and to develop his/her skills. Teach your child that good sportsmanship and appropriate behavior are more important than winning. Lead the way by behaving well and having fun yourself.

Females Are Built Differently Than Males

According to the National Institutes of Health, females are eight times more likely than males to suffer sports injuries. Research indicates this is due to the differences in women’s bodies. For example:

- Wider female pelvises can cause women to be more knock-kneed, which can force kneecaps to go off-track
- A female tendency toward double-jointedness makes it harder for them to hold their bodies in proper positioning, predisposing them to overuse problems
- Females have less muscle mass than males
- The Female Athlete Triad (overtraining and disordered eating, leading to disrupted menstrual cycles) can lead to stress fractures due to loss of bone density
Parents, Urge Your Daughters to:

- Understand their unique risks
- Maintain a healthy diet
- Train as directed by a trusted coach
- Take the necessary steps to avoid injury

Help Your Child Maintain a Healthy Body Weight

Studies have shown that athletes have an increased risk for disordered eating. Skaters, dancers, gymnasts, wrestlers and cheerleaders may feel pressure to slim down to an unhealthy weight; football players and wrestlers may want to bulk up. This can lead to crash dieting, overeating and other harmful eating habits that can result in lifelong unhealthy eating patterns. You can help your child by:

- Talking about the important role of proper nutrition in athletic performance
- Being a role model by demonstrating healthy eating habits
- Calling a healthcare provider if you suspect your child has an eating disorder

Question: “Is My Child Overweight?”

The answer depends on your child’s height, age and body-mass index (BMI), a tool that determines how much fat a person is storing. (The U.S. National Institutes of Health provides a BMI calculator on the Internet at www.nhlbisupport.com/bmi/bmicalc.htm.) Children with a BMI index-for-age at the 90th to 95th percentile are considered overweight. Those above the 95th percentile are considered obese.

Overweight and obese children should not be discouraged from engaging in any type of physical activity — all children need exercise. Ask your healthcare provider or school physical education teacher for suggestions on healthy and appropriate activities for your child.
Nutrition for the Young Athlete

Think of your active child like a sports car, requiring the right kind of fuel to run properly. The more strenuous the sport, the more energy a child needs. Follow the standard food guide pyramid for children for proper nutrition (www.choosemyplate.gov/kids/index.html).

**Tip #1:** Don’t allow your child to skip meals, especially breakfast. Your child needs regularly spaced meals to keep up energy levels.

**Tip #2:** Think carbohydrates. Carbohydrates, found in bread, fruit, vegetables and dairy products, should be the main fuel for active children. Popular protein diets that require limited carbohydrate intake are not appropriate for children.

**Tip #3:** A young athlete needs water, water and more water. Children’s bodies are less efficient than adults’ at regulating body temperature. Regardless of what the temperature is, children need fluids. If your child only drinks when thirsty, he or she may be waiting too long. It is possible to become dehydrated before feeling thirst, so make sure your child always has an easily accessible water bottle. Sports drinks can replenish carbohydrates and lost electrolytes, but should be used in moderation. Avoid drinks with high sugar content.

**Tip #4:** Your child needs time to digest before a game. Your young athlete needs to eat properly on game day but try to time snacks and meals so that he/she has two to three hours for digestion before an event. (Fats and protein take longer to digest so it might be wise to avoid them.) Remember that children will need a well-balanced meal afterwards to restore energy levels.

**Tip #5:** Your child doesn’t need to overload on protein. Most children get more protein (found in meat, fish, poultry, beans and nuts) than they need from a regular diet. Some young athletes try to eat only protein under the erroneous assumption that it will build larger, stronger muscles. Muscle growth, however, requires physical activity.
Meal and Snack Suggestions

**Breakfast:** This meal should be mandatory, ideally consisting of one serving from each food group (e.g. cereal with milk and fruit). If your child tends to skip breakfast, try nontraditional morning items, such as, peanut butter, baked potatoes, spaghetti, or milkshakes made from low-fat ice cream and skim milk.

**Fruits and Vegetables:** Most parents have no trouble getting their kids to eat apples, oranges, bananas, or melons, which all contain important nutrients. It can be harder to interest children in green, leafy vegetables (e.g. lettuce, broccoli, spinach), which contain many important minerals and vitamins. Try tomato juice or cut-up vegetables such as celery, carrots and green peppers served with a low-fat dip. If that doesn’t do the trick, speak with your child’s healthcare provider about multivitamins.

**Dairy Products:** Children need three to four daily servings of dairy foods. If your child refuses to drink milk, try cheese, yogurt or cottage cheese. Lactose-free dairy products are available for children who are lactose-intolerant.

**Snack Foods:** Watch out for snacks high in fat and sugar, such as potato chips, cookies, and candy, which provide only empty calories. Instead, offer fruit, peanut butter, unsalted nuts, cheese, apples, rice pudding, pretzels, guacamole, or yogurt with granola.
The Importance of Sleep

The demands of school, sports and other extracurricular activities often prevent children from getting the one thing they need most: enough sleep. If they are to perform well in all these areas, it is critical that they go to bed at a reasonable hour.

**Elementary School Children** need 11 to 12 hours of sleep a night.

**Preteens** need about 10 hours.

**Teens** need at least nine hours, but don’t be surprised if they crave more. Their bodies are growing and changing at such a rapid pace, they may need the sleep time to recover energy. It may seem exasperating to you when teens sleep the day away on the weekends, but this is normal and healthy.

**Signs Your Child Feels Pressured and Stressed by Athletics:**

- Wants to quit
- Dreads practices and games
- Has frequent stomachaches or headaches
- Has nausea and vomits before a game
- Seems depressed, upset, or withdrawn
- Seems anxious
- Is angry or inappropriately aggressive in play
- Experiences disruptions in sleep

If your child exhibits any of these symptoms, it’s time for a family meeting to address his/her concerns. It’s also time for you to re-examine your behavior to see if you have in any way contributed to the stress.
PREVENTION AND TREATMENT OF INJURY

The Proper Equipment Minimizes Risk of Injury

Your child needs the appropriate gear for each sport. Good sporting gear has been designed specifically to protect your child from the risks in the given activity, and to give your child the best chance to perform well. Ask the coach for a list of what your child will need.

- Only use gear designed for your child’s specific sport. For example, a football helmet should not be used for hockey or skiing.
- Some equipment will differ for boys and girls. Your child’s equipment should be gender appropriate.
- All equipment for a sport should fit correctly and be tailored to your child’s height and weight. If in doubt, have your child fitted by a professional. (Many salespeople in sporting goods stores are quite knowledgeable.)
- Helmets should be new or checked with the manufacturer every season to ensure they meet safety standards. Keep in mind, helmets are designed to prevent skull fractures and do not prevent rotational or shearing forces that may cause concussions.
- Equipment must be maintained. A badly strung tennis racquet or ill-fitting shoes can cause major injuries.
- If your child wears protective eye gear, make sure it is made of polycarbonate plastic, which doesn’t shatter.

Emergency Action Plan (EAP)

- It is important to inquire about the school’s, league’s, or sports facility’s EAP. Be sure to ask if a qualified medical professional (Athletic Trainer) is on-site.
- Is there an Automated External Defibrillator (AED) at the location?
• Are the coaches certified in CPR and first aid?
• How are emergencies handled when someone is injured?

All of the above are important questions to ask prior to having your child participate in any sport or activity.

**Playing it Safe — Warm Up!**

From the ages of six to 18, children’s height will increase by almost half, and their weight can more than triple. Bone grows faster than muscle, so if muscles aren’t warmed up and stretched, they can tear. Many young athletes’ injuries are attributable to muscle tightness during growth spurts. Therefore, in order to avoid injury, it’s critical that your child makes stretching and strengthening exercises an important part of every workout. Ask your child’s coach for a routine to follow at home.

**Stretching:** Playing sports requires flexibility. Young athletes should stretch their muscles before and after an activity to minimize injury risk and increase performance level. Before stretching, the child should first warm up by running in place in order to increase body temperature, which makes stretching easier. Each stretching exercise should be performed three to five times, and held for 10 to 15 seconds each time, with a period of rest in between.

**Strengthening:** Strengthening exercises are important to not only maintain adequate muscle mass but to achieve a balance of strength between muscle groups. Strengthening exercises should be done three times a week, with a day off in-between. Various exercises include weightlifting, resistance training, running, biking, sit-ups, pull-ups or push-ups. (Your child should warm up for 10 minutes before each session.)

It is important to use proper form when performing the exercises to prevent injury. Make sure your child has been properly instructed before beginning any strengthening program. Vigorous strength training with weights should not be performed by anyone under the age of 13.
Heat and Hydration

• Athletes should acclimate themselves to hot weather by gradually increasing their participation over a period of two weeks.

• Rest periods of 15 to 30 minutes should be scheduled during hot weather activities that last longer than an hour.

• Athletic activities should be scheduled during cooler morning or early evening hours.

• Clothing should be white to reflect heat, loose enough to permit heat to escape, and permeable to moisture to allow heat loss through sweat evaporation.

• Athletes should drink four to eight ounces of water every 15 to 20 minutes of an activity. Access to water should never be restricted.

• Children at particular risk should be watched carefully. Athletes with large muscle mass and those with a history of heat problems are particularly prone to heat illness.
Heat Illnesses

Exercise and heat can be a deadly combination, especially for young athletes who may be too intimidated to tell their coach they need a break. There are three types of heat illnesses:

**Heat cramps are the least serious of the heat illnesses.**

**Symptoms:** a painful spasm of the skeletal muscles, occurring most often in the hamstring, calves, and abdominal muscles. These can also produce dehydration, sweating, and a loss of electrolytes.

**Treatment:** water, gentle stretch applied to involved muscles, rest and observation for further symptoms.

**Heat exhaustion is the most common heat illness. A decreased volume of blood circulation causes prolonged overexertion and insufficient water and electrolyte replacement.**

**Symptoms:** profuse sweating; cool, clammy skin; normal body temperature; rapid, weak pulse; pale skin; dizziness and headache; confusion and disorientation.

**Treatment:** move child from hot environment to a cool place (child should not return to the game or activity); remove excess equipment and clothing; get child to drink cool fluids. If the child does not improve rapidly, take him/her to a medical facility for further evaluation.

**Exertional Heat Stroke (EHS) is the least common but most serious heat illness. The cause is multifactoral and the child’s thermoregulatory system is completely overwhelmed and the body can no longer cool itself.**

Core body temperature of 104°F–105°F with associated central nervous system dysfunction:

**Symptoms:** no sweating; rapid, strong pulse; unconscious; if child is conscious, he/she is confused or disoriented; markedly increased body temperature; reddish-colored skin; unusual behavior; vomiting; delirium, etc.
Treatment: THIS IS A MEDICAL EMERGENCY! Call 9-1-1. Seek medical assistance immediately. Rapid cooling of the person suffering EHS is the standard of care. Immediate cold water immersion is the most effective way to treat EHS. The athlete’s recovery and survival are dependent upon immediate and rapid cooling PRIOR to the transport to an emergency facility.

Bruises, Sprains, Strains, Fractures, Lacerations

Even with the most vigilant protection and prevention methods, your child can get injured. The most traumatic injuries usually occur from a single blow to the body.

**Bruise:** swelling and bleeding in the muscle or other body tissues, causing skin discoloration and tenderness.

**Sprain:** a stretch or tear of the ligament, the tissues that connect bones and cartilage.

**Strain:** a stretch or tear of the muscle or tendon, the end of the muscle that connects it to a bone.

It can be hard to tell the difference between a sprain, strain and/or a break. If you have any doubt, call your child’s healthcare provider or go to the emergency room immediately for an x-ray.

Ask your healthcare provider about over-the-counter pain relievers such as acetaminophen (like Tylenol) or ibuprofen (like Motrin). Bruises, sprains and strains should all be taken care of “The RICE Way:”

- **REST:** Make sure your child rests the injured part of the body.
- **ICE:** Apply ice packs. Never apply heat in the first 24–48 hours after an injury. It will increase swelling.
- **COMPRESSION:** Wrap the injured part of the body in a compression bandage for at least two days.
- **ELEVATION:** Keep the injured part of the body elevated above heart level to reduce swelling and healing time.
**Fractures:** a crack, break, or shattering of the bone. Sometimes these are hard to tell from a simple strain or sprain. Indications that the bone is broken — your child heard or felt a bone snap; the injured part moves strangely or looks unnatural; is very painful and/or swollen.

**Treatment:** apply an ice pack and seek immediate medical care. Do not move the child if you suspect he/she has injured his/her neck or back, or if a bone protrudes from the skin. Call for emergency care.

**Small Laceration or Tear:** a cut in the skin causing bleeding.

**Treatment:** minor bleeding — rinse wound gently with mild soap and cover with a sterile bandage. Check the wound daily for infection. If it becomes red, swollen, tender, and warm to the touch or begins to ooze, call your child’s healthcare provider.

**Laceration or Large Cut:** rinse wound by pouring water over it. Do not rub and do not apply a tourniquet. Place a sterile bandage or a clean cloth over it. Apply pressure to the wound for five minutes with your hands. If blood clots through, do not pull the dressing off. Put another dressing over it and continue applying pressure. Call your child’s healthcare provider or take your child to the emergency room if:

- You are unable to stop the bleeding after five minutes of pressure
- You are unable to clean the dirt out of the wound
- The wound is on your child’s face or neck
- The wound seems deep or the edges are widely separated
Is Asthma Serious?

With proper care, your child’s asthma can be well controlled. Children should be able to play and participate in sports, except scuba diving, without coughing or feeling short of breath. However, if asthma is not well controlled it can be life-threatening. Even someone with mild asthma can develop a severe, life-threatening asthma attack. Status asthmaticus is a progressively worsening asthma attack which does not respond to the usual medications. Seek medical care immediately for worsening asthma symptoms that are not relieved by your usual medications. A physician diagnosis of asthma may be misunderstood as an imminent asthma attack by parents.

What Causes Asthma Symptoms?

In children, viral infections such as a cold or the flu are the most common triggers of asthma symptoms.

- Other common triggers include: mold, dust, pollen, pet dander, and cockroach presence.
- Cold air and exercise can also cause asthma symptoms.
- Warming up gradually before physical activity can help prevent symptoms.
- Exposure to cigarette smoke will always make asthma symptoms worse.
Asthma Control

It is important to remember that even when your child feels well and is not having symptoms, he/she still has asthma. There are three important steps to keeping asthma well controlled:

• Know what your child’s asthma triggers are and how to avoid them
• Use long-term controller medicines as prescribed
• Recognize early signs and symptoms of an asthma flare-up and treat it quickly as instructed by your child’s healthcare provider

What is an Asthma Action Plan?

An Asthma Action Plan is a written plan which your child’s doctor will give you to help you know when it is time to increase or change medications. It will show a green zone which is the daily medication schedule when your child is feeling well without any symptoms. A yellow zone will show you what medications to add or increase when an asthma flare-up starts. A red zone will guide you during a severe asthma attack with instructions for medications and seeking medical care.
THE OVERUSE AND OVERTRAINING SYNDROME

Prevention
Overuse is exactly what it sounds like — injuries, such as tennis elbow and shin splints, that occur from using one body part more than others.

Exercise and physical activity are important for your child’s health and wellness. Participating in sports activities that stress different parts of the body help to avoid overuse conditions.

Overuse injuries can be prevented by:
- Slowly increasing the intensity and duration of workouts
- Wearing properly fitting shoes and clothing appropriate to the sport
- Warming up, stretching, strengthening
- Rest periods for the given muscle group used
- Exercises or different activities that target other parts of the body

Recognizing Overuse Injuries
- Gradual onset
- Your child doesn't remember being hit or otherwise injured
- Your child’s sport/activity involves a repetitive activity

The RICE Way: How to Treat Overuse Injuries
Rest, Ice, Compression, Elevation
- Take a break from the activity
- Cross training or participating in a variety of sports should be considered

When to See a Healthcare Provider
- If symptoms persist during daily activity
• If symptoms are severe enough to affect walking
• If symptoms diminish after a week of rest but return soon after your child resumes activity

CONCUSSION AND HEAD INJURY

A concussion is a mild traumatic brain injury that can occur after a direct blow to the head or other blow to the body that can cause an impulsive force. You do not have to be knocked unconscious to have a concussion. Signs and symptoms of a concussion can vary from person to person; no two concussions are alike even in the same person. Sometimes symptoms don’t show up until days after the original trauma.

Head injuries are among the most feared of all sports injuries. The majority of concussions (80%) recover in a short period of time (3 weeks); however it usually takes longer for children and adolescents. The potential for serious injury is always present. The following recommendations can help prevent a seemingly minor injury from becoming a life-threatening one.

• If a concussion is suspected, the athlete should be removed from play (practice or game) immediately and not return the same day of injury. Remember, many signs and symptoms are delayed in presenting, especially among youth and adolescents.
• Seek an evaluation from a qualified healthcare provider who is trained in the evaluation and management of concussion.

What Are Concussion Danger Signs?

Call 9-1-1 or take the athlete to the Emergency Department right away if, after a bump, blow or jolt to the head or body, the athlete exhibits one or more of the following danger signs:
• One pupil larger than the other
• Drowsiness or inability to be awakened
• Worsening headache
• Weakness, numbness or decreased coordination
• Repeated vomiting or nausea
• Slurred speech
• Convulsions or seizures
• Inability to recognize people or places
• Disorientation, increased restlessness or agitation
• Unusual behavior
• Loss of consciousness (even a brief loss of consciousness should be taken seriously)

If your child suffers a head injury, follow these guidelines for concussion management:

• Always follow directions from your pediatrician or primary care provider
• Throughout the day, check in with child for breathing rate, heart rate, skin color and other symptoms — unless specifically instructed to do so, you do NOT need to wake the person up repeatedly
• Limit food consumption to a light diet and clear liquids for 2–4 hours following injury
• Limit over-the-counter painkillers, unless prescribed by a medical practitioner
• Encourage mental and physical rest — academic accommodations may be necessary if the individual has difficulty in school
• Avoid electronic devices, computers, mobile devices, texting, etc. as these may make symptoms worse
• A child should be able to return to school first, before extracurricular activities
• If there is any question about your athlete’s well-being, seek medical attention immediately
The Concussion Center at the Orthopedic & Spine Institute
Chelsea Piers CT, One Blachley Road Stamford  203.276.4123

Stamford Health’s Concussion Center is led by a neuropsychologist who not only evaluates an individual’s symptoms but also administers neurocognitive testing, which is an integral component of concussion management. The Concussion Center also coordinates care with schools as academic accommodations may be needed, and should be handled on an individual basis. Call to make an appointment.

Question: “My Child is Injured. I Don’t Know How Severe it is. How Do I Know Whether to Take Him/Her to the Immediate Care Center or to the Emergency Room?”

The Immediate Care Center and Stamford Health Urgent Care facilities are designed for quick, convenient diagnosis and treatment of non-life-threatening illness and injuries when your doctor is not available. Some examples of what can be treated at these facilities include flu and cold symptoms, sprains, strains, cuts/lacerations, bumps and bruises, sore throats and earaches.

Immediate Care Center at Tully Health Center
32 Strawberry Hill Court, Stamford  203.276.2222
Hours: Monday through Sunday, 7 a.m. to 10 p.m., including holidays
CT Scan and Ultrasound available Monday through Friday, 8 a.m. to 4 p.m.

Stamford Health Urgent Care
497 Westport Avenue, Norwalk  203.276.4888
2001 West Main Street, Stamford  203.276.8540

The Emergency Department at Stamford Health is equipped to handle life-threatening injuries 24 hours a day, seven days a week. If you are not sure which facility to choose, err on the side of caution and head to the Emergency Department.

Emergency Department at Stamford Health
One Hospital Plaza, PO Box 9317, Stamford  203.276.7777
Many Reasons to Call…One Call to Make.

When you make a HealthCall, you get a real person with real answers … not just a recording. Whether you’re looking for a new primary care physician, a specialist referral, or someone who takes your insurance, we can help you, 24 hours a day, seven days a week. If you have questions about any of the services Stamford Health’s Orthopedic & Spine Institute offers, please call. Our knowledgeable professionals will help find the answers to your questions.

Please call toll-free 877.233.WELL (9355).

The Orthopedic & Spine Institute is a proud sponsor of:
For More Information, Visit These Websites:

American Academy of Orthopaedic Surgeons  
www.aaos.org

American Academy of Pediatrics  
www.aap.org

American College of Sports Medicine  
www.acsm.org

American Medical Society for Sports Medicine  
www.amssm.org

American Orthopaedic Society for Sports Medicine  
www.sportsmed.org

American Physical Therapy Association  
www.apta.org

Centers for Disease Control and Prevention  
www.cdc.gov

Kids Health for Parents  
www.kidshealth.org/parent

National Athletic Trainers Association  
www.nata.org  
www.athletictrainers.org

National Institutes of Health  
www.nih.gov

Tufts University Nutrition Navigator  
www.navigator.tufts.edu

WebMD  
www.webmd.com
As a Planetree hospital, we are committed to personalizing, humanizing and demystifying the healthcare experience for patients and their families. Our approach is holistic and encourages healing in all dimensions — mind, body and spirit.

Stamford Health
Bennett Medical Center
One Hospital Plaza
PO Box 9317
Stamford, CT 06904
Phone: 203.276.1000
StamfordHealth.org