SPORTS INJURIES

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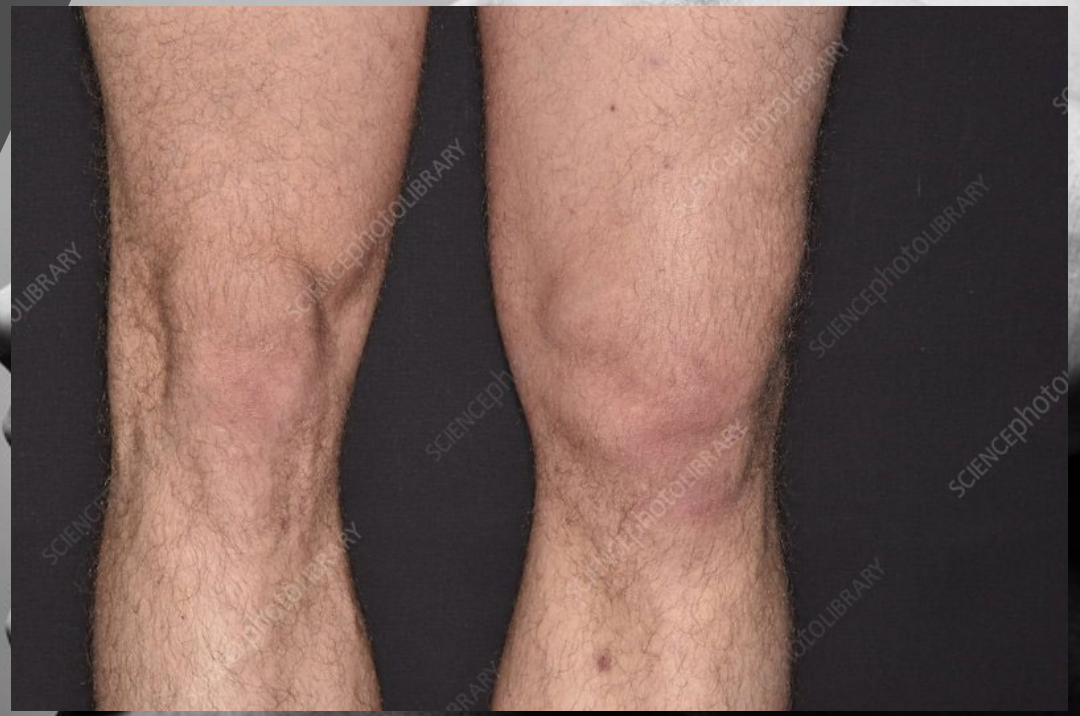
- ❑Common injuries that prompt a call for EMS.
- ❑Identify the type and severity of different injuries.
- ❑Quickly and effectively stabilize patients for transport.

JOINT INJURIES

DISLOCATION

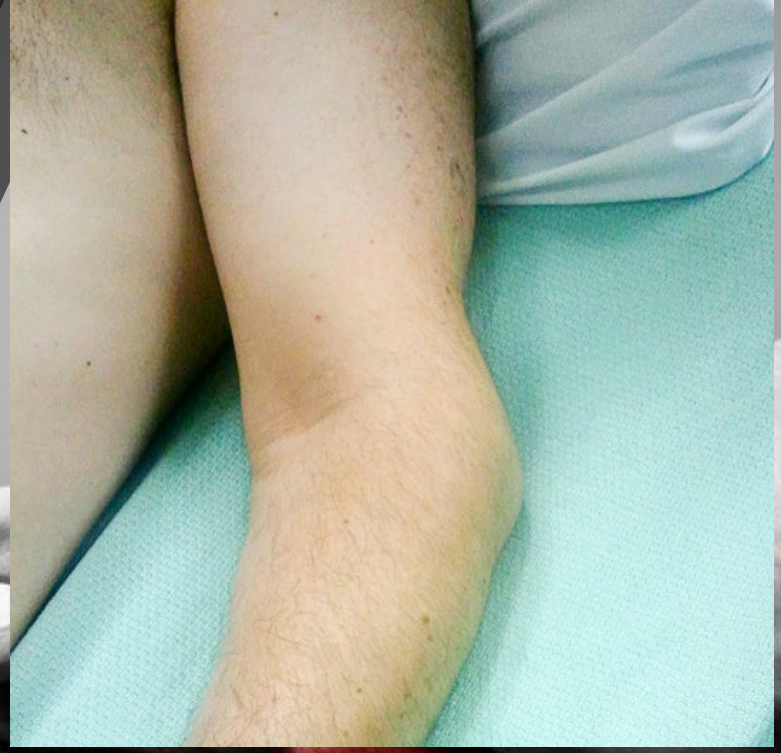
JOINT INJURIES
DISLOCATION

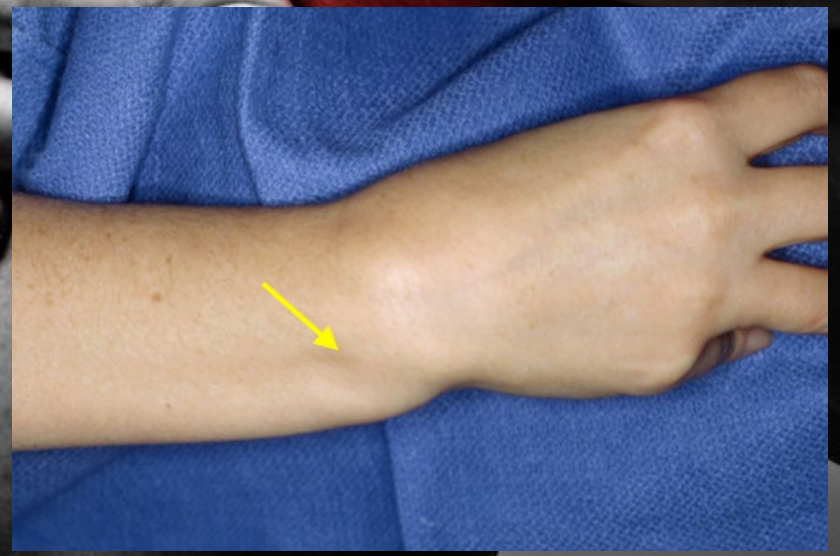
Knee: Dislocation occur in athletes when the foot is planted on the floor and a rapid change of direction or twisting motion occurs. Relocation in the field may be attempted in some situations following med control consultation.



JOINT INJURIES
DISLOCATION

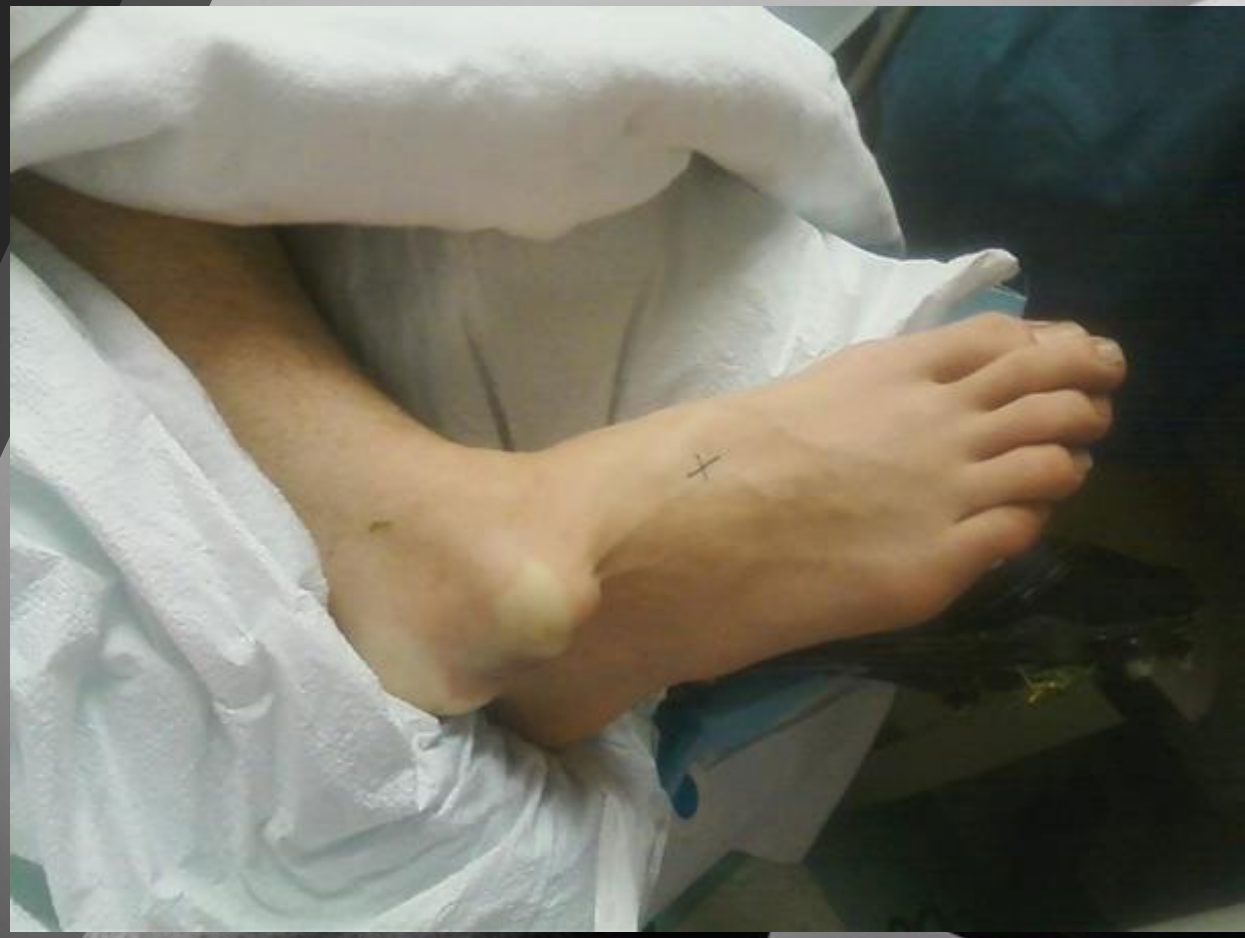
Elbow: Can occur following a direct impact or more commonly, due to a fall onto the outstretched hand or arm. May also involve an injury to the wrist. Dislocation is an emergent injury and relocation should not be attempted in the field.





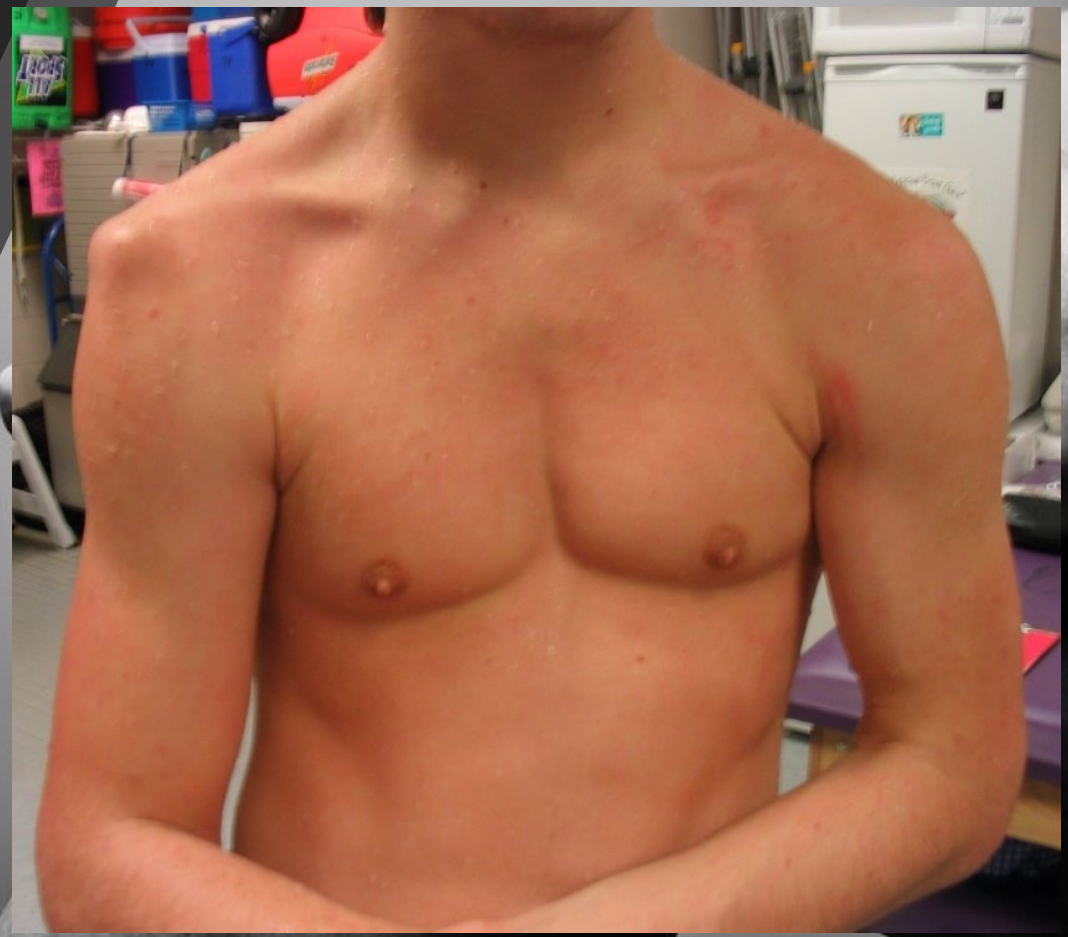
JOINT INJURIES
DISLOCATION

Ankle: Similar MOI to knee injuries. Rapid change in direction or twisting motion while in motion. Often involves multiple ligament and tendon injuries.



JOINT INJURIES
DISLOCATION

Shoulder: Any hard fall onto the shoulder. Forceful hitting, lifting, or throwing or a hit to an outstretched arm. Not uncommon for the joint to relocate on its own following the impact known as a partial dislocation.



FIELD ASSESMENT AND TREATMENT

Assessment

- Compare to the uninjured limb to detect abnormalities such as shortening, swelling or rotation.
- Pain
- Abnormal positioning.
- Obvious deformity.
- Crepitus
- ** Color or temperature changes such as cold to touch, cyanosis.
- ** Loss of distal pulses

FIELD ASSESMENT AND TREATMENT

Treatment

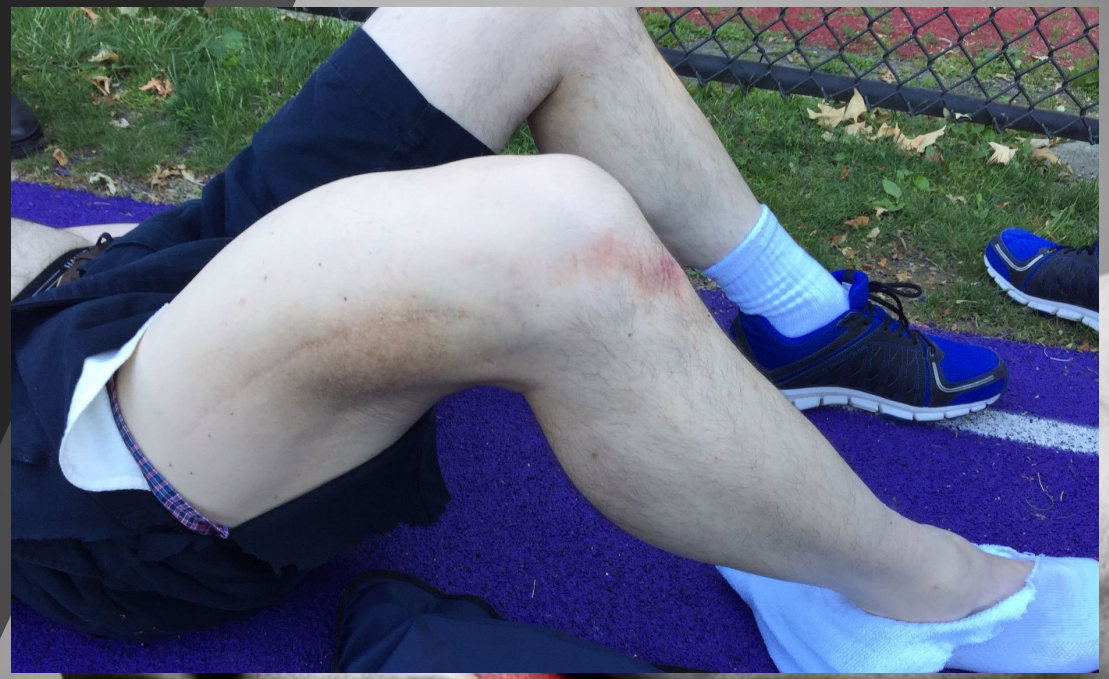
- Stabilization using appropriate immobilization device such as sling and swath, board splints or vacuum splints.
- Pain control
- Relocation of certain dislocations may be indicated in cases of impaired circulation. Requires medical control authorization and knowledge of the procedure.

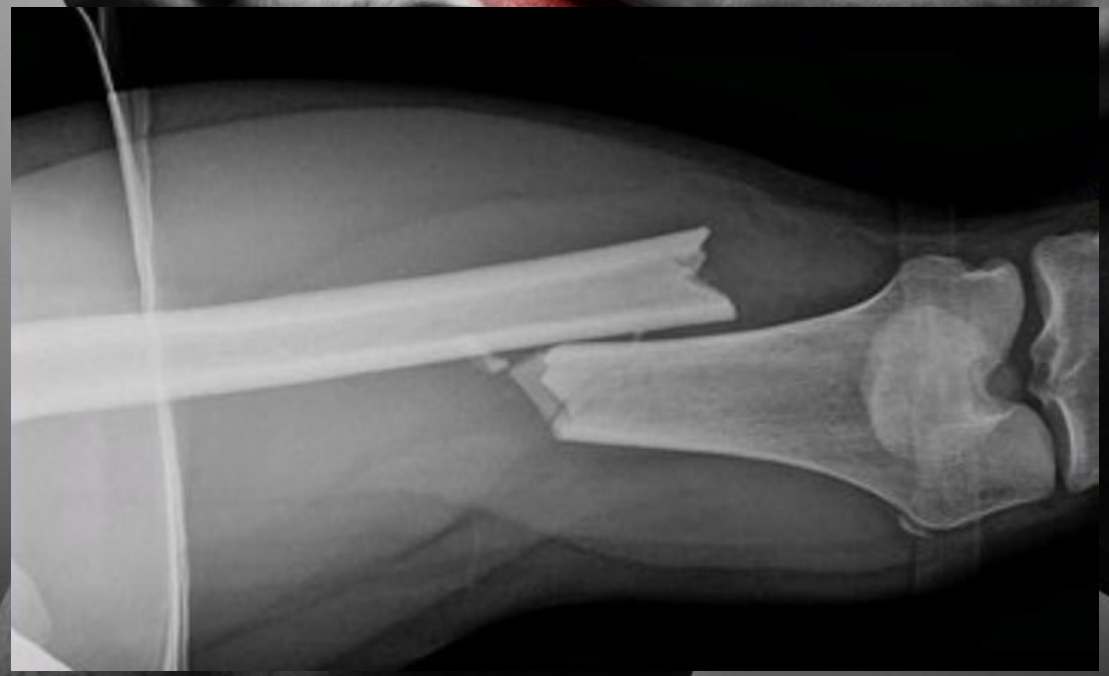
Fractures

Fractures may be open or closed, displaced or non-displaced. Any break poses a risk for significant bleeding. Risk factors for a fracture include overall health, age and genetics.

Fractures

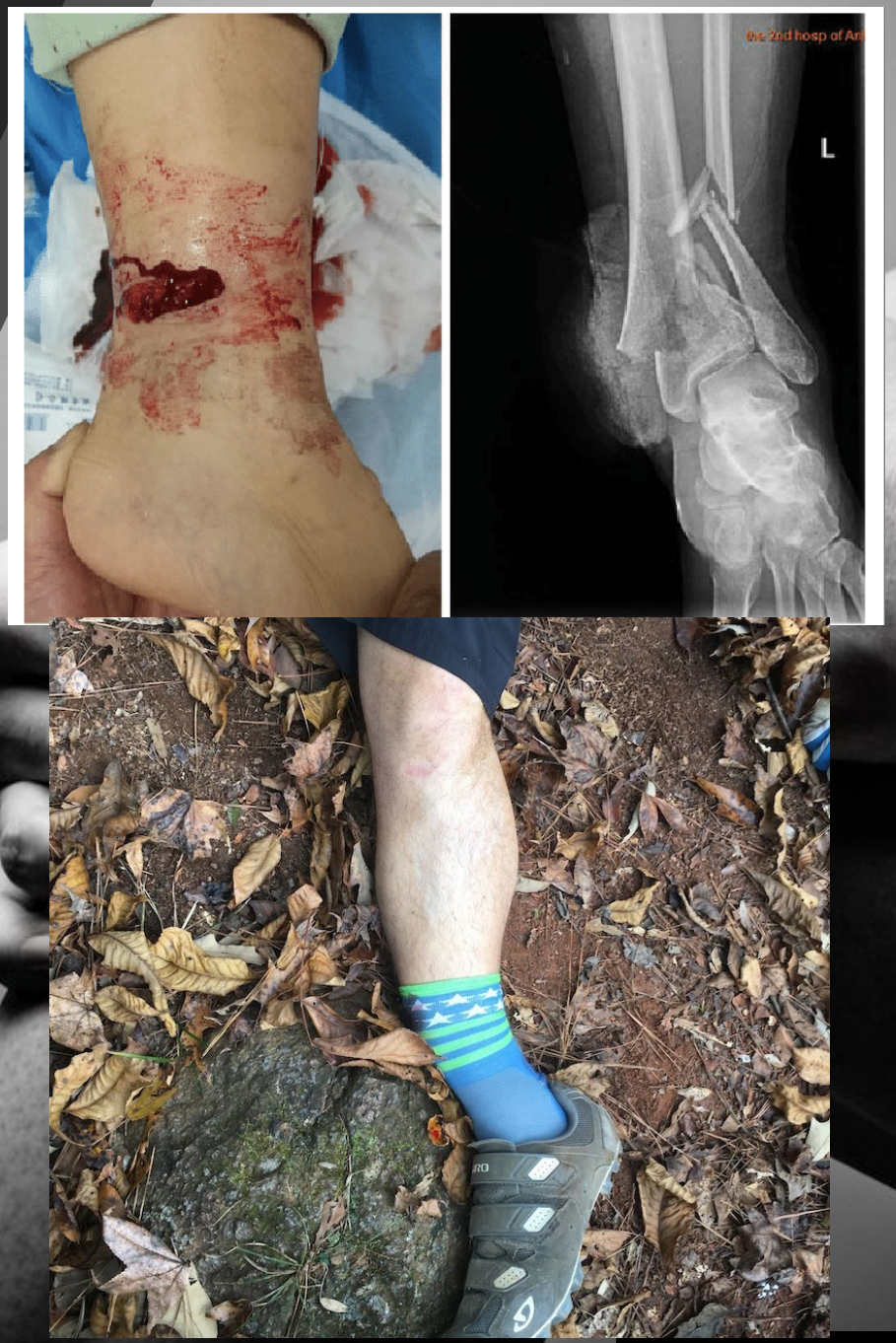
Femur: High mechanism of injury for break to occur. Often the result of direct impact. High risk for life-threatening bleeding.





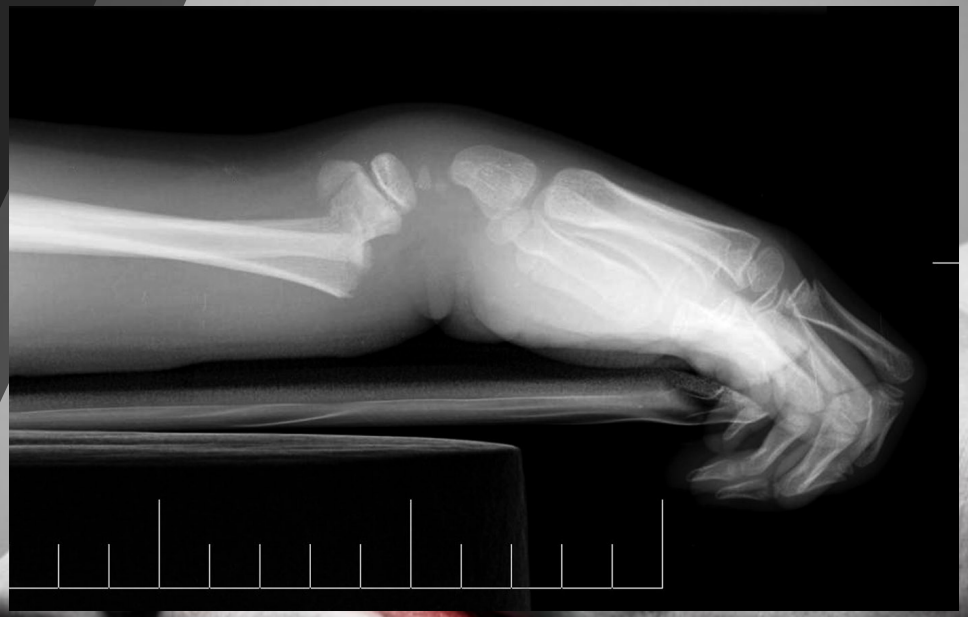
Fractures

Tib-Fib: Occurs from a direct impact or twisting motion of the lower leg. One or both bones may break.

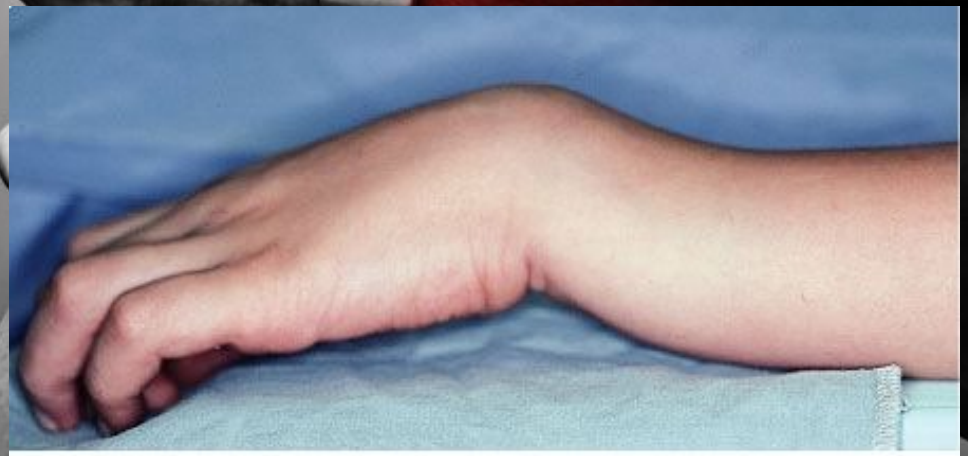


Fractures

Wrist: Often seen when falling on an outstretched hand or from direct impact. This MOI can also result in a break to the clavicle, ulna or radius.

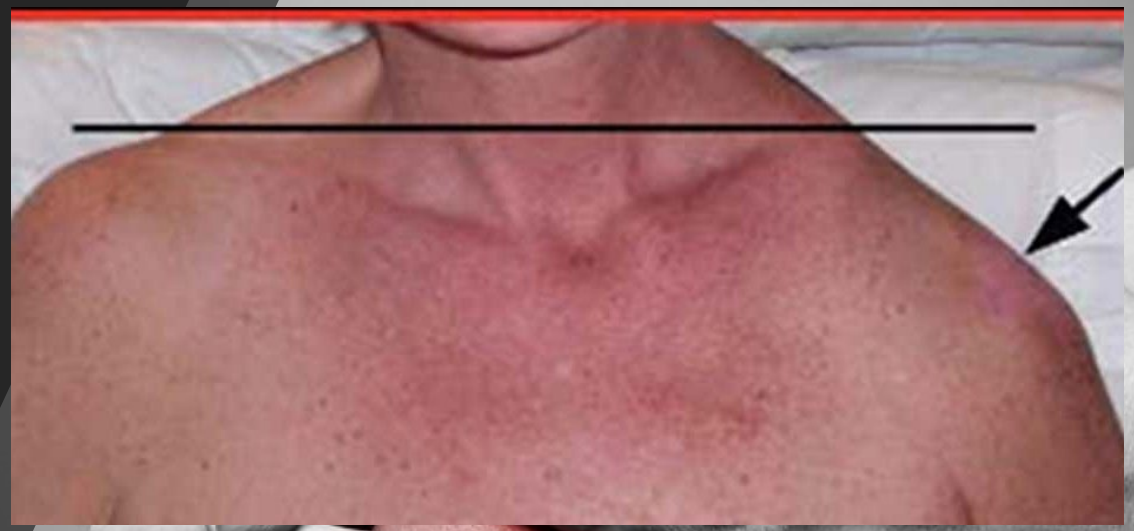


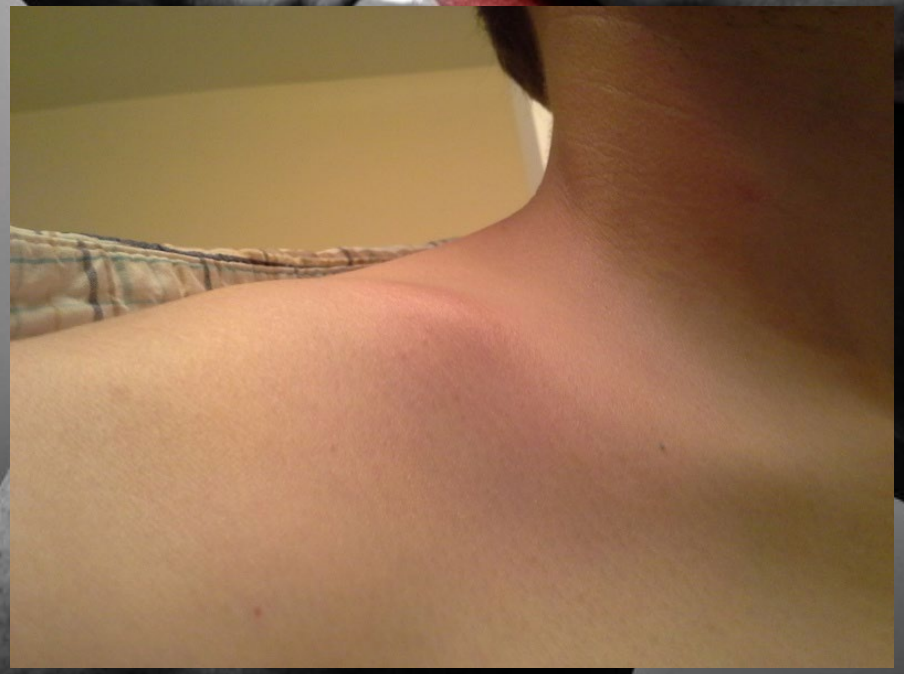
Colles Fracture



Fractures

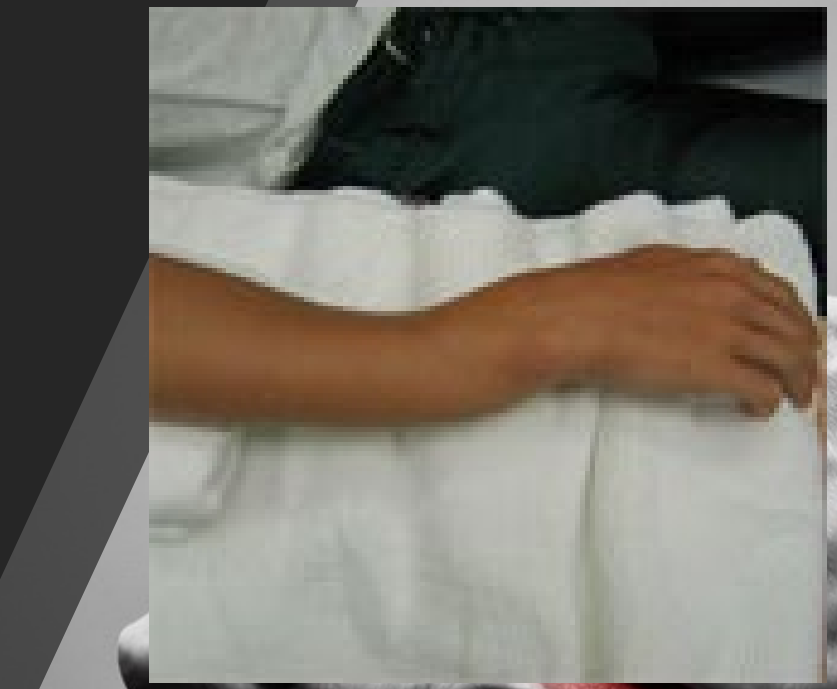
Clavicle: Direct impact or fall onto outstretched hand. May not be obvious. Sagging of the shoulder downward and forward as the broken collarbone is no longer providing support.

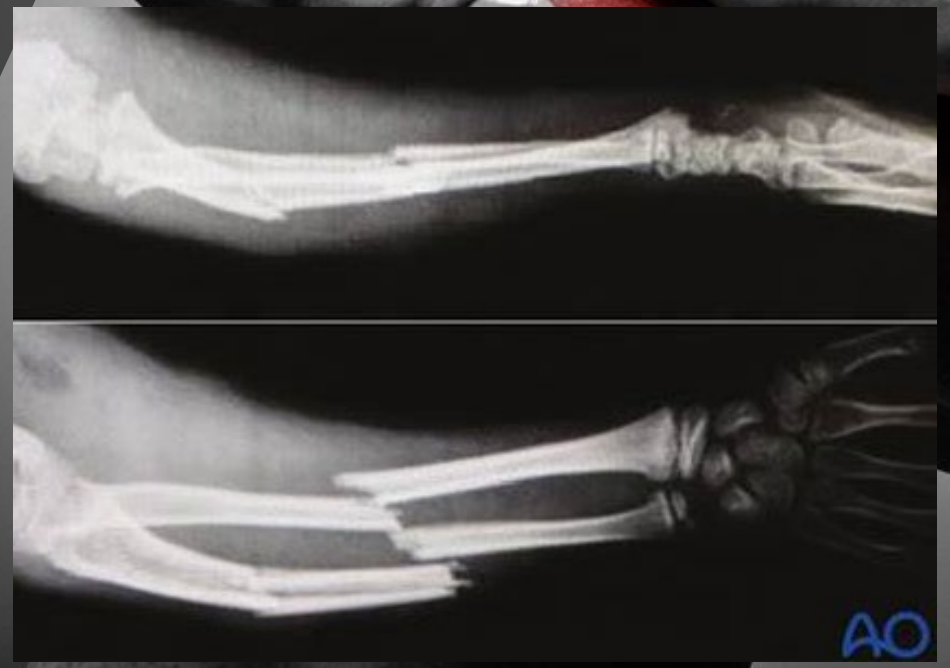




Fractures

Radius and Ulna: May look similar to a Colles fracture. Location of the break and direction of deformity can help differentiate between the two.





FIELD ASSESMENT AND TREATMENT

Assessment

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FIELD ASSESMENT AND TREATMENT

Treatment

- Stabilization using appropriate immobilization device such as sling and swath, board splints or vacuum splints.
- Pain control
- Bleeding control measure in cases of open fractures.
- Consider traction splint in closed displaced femur fractures.

CONCUSSION

A type of traumatic brain injury caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move rapidly back and forth. This sudden movement can cause the brain to bounce around or twist in the skull.

CONCUSSION

Signs and Symptoms

Headache and Dizziness

Ringing in the ears

Nausea and Vomiting

Altered Mental Status\LOC

Blurry vision

Confusion

Amnesia surrounding the event

Slurred speech

Dazed appearance

Forgetfulness, such as repeatedly asking the same question

CONCUSSION
Treatment

Pre-Hospital treatment is often supportive and involves treating the symptoms of the concussion.

Continue monitoring for deterioration in condition.

- Repeated vomiting or nausea
- Fluid or blood draining from the nose or ears
- Seizures or convulsions
- Pupils of unequal sizes
- Slurred speech
- Continued AMS or LOC
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