

*Feature Story*

The protocol for moving injured players from the ice

By Dr. Rob LaPrade

QUESTION:

I have had several questions about the best protocol to evaluate and remove injured athletes from the ice. This is a good question because the correct treatment of a potentially injured athlete can be very important to their ultimate outcome.

ANSWER:

In the evaluation of an injured athlete, especially one that was checked from behind or that was checked into the boards or tripped into the boards, it is first important to evaluate the basics of any safety evaluation. In this case, evaluation of the ABC's is an essential first step for evaluation of these injured athletes. The ABC's stand for Airway, Breathing, and Circulation. If an athlete is unconscious, it is important to make sure that they are breathing and also to check their pulse. For any athlete who does not appear to have the normal ABC's, the basics of CPR should be initiated and this is beyond the ability to describe it in this article.

For those athletes who are conscious and alert, one of the first and most important things to ask them about is where they hurt. Athletes with any head, neck or back pain should be evaluated very carefully and not moved without assistance. For those athletes who may have a feeling like they have lost their breath or who have extremity pain, it is reasonable at this point to assist them with rolling onto their back so that they can be better evaluated.

One of the most important things to do in injured hockey players, when they are unconscious or alert with neck or head pain, is not to remove their helmet. This is because the helmet provides important support to their spine and if they do have a neck fracture, it can cause motion of the fracture which could lead to permanent nerve damage.

We have done studies in our lab at the University of Minnesota which show that the most significant risk of increased motion in the cervical spine occurs at the mid-level when the helmet is removed. This is the exact level at which the majority of ice hockey spinal fractures occur. Thus, it is important to leave the helmet on to make sure that if the athlete does have a cervical spine fracture that the fracture does not move.

In athletes who do have neck pain and are on their face in the prone position, they should not be moved until people trained and comfortable with proper log rolling technique can help move them into the supine position on their back. At all times, the neck should be stabilized and the helmet should be left in place. This same protocol should be followed in athletes who have low back pain because they may have a thoracic or lumbar spine injury also.

For those athletes who note that they may have had a blow to their chest or simply lost their breath, it is reasonable to allow them to catch their breath prior to attempting to move them.

It is reasonable to assume that anyone who has hit their head has a concussion until proven otherwise. Athletes who have a headache, neck pain, who are disoriented and appear confused should not be allowed to be back into competition. It is important to ask them if they know which rink they are in, what period it is, what the score is and other questions which help to determine

how alert they may be.

To summarize this important topic, in any athlete who may have had a head or neck injury, it is important to leave their helmet on. For athletes who may have isolated extremity pain, splinting of the extremity and assisting them to get off the ice if possible, can be considered. In all cases, in those athletes who may have head or neck pain, however trivial it may seem, it is reasonable to wait for emergency medical services to assist in getting them off of the ice to make sure that there are no significant injuries present.

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