RESOLUTION 104 - 2011

Subject: Concussion Management in Youth Sports in Wisconsin

Introduced by: [Redacted]

Referred to: Health Insurance Coverage and Access

Whereas, Increasing evidence suggests that athletes who return to play in sports after a concussion but before proper healing are at risk for possible negative long-term outcomes, including chronic traumatic encephalopathy (a form of degenerative brain damage),\(^1\) amyotrophic lateral sclerosis,\(^2\) and depression;\(^3\) and

Whereas, Without proper education, guidelines, and regulation, concerns about student-athletes’ long-term health can be overwhelmed by the sense of competition that athletes, coaches, parents, and even team physicians feel; and

Whereas, Some states have recently passed state legislation that requires coaches to remove any players who show signs of a concussion and that those players need to be cleared by a physician before they can compete again;\(^4\) and

Whereas, National Football League Commissioner Roger Goodell has written to governors across the U.S. asking them to develop concussion legislation in their own states that would cover organized youth sports at all levels;\(^4\) and

Whereas, At least a half-dozen other states are now considering measures to toughen restrictions on youth returning to play after head injuries;\(^4\) and

Whereas, In 2010 both the AMA and the American Academy of Neurology passed policy stating that youth suspected of sustaining a concussion need written approval by a physician before they can return to play or practice;\(^5\) and

Whereas, The Wisconsin Interscholastic Athletic Association (WIAA) has policies that state that high school athletes who have symptoms of concussions should not return to competition the same day without a physician’s written permission, and should not return to play thereafter until cleared by a physician or licensed athletic trainer;\(^6\) and

Whereas, These WIAA policies do not represent official state legislation and thus cannot always be enforced; and

Whereas, The WIAA oversees high school sports teams in Wisconsin, but does not govern (nor does it have the resources to be able to govern) other organized youth sports teams, such as club sports, Little League, etc, and does not cover teams younger than high school age; and

Whereas, it could be even more critical to protect child-athletes younger than high school age from the long-term effects of concussion; and
Whereas, Discussions between the authors of this resolution and the WIAA Medical Advisory Committee led to the Committee’s observation that further education about and awareness of concussion among parents, children, adolescents, and athletic coaches is critical; therefore be it

RESOLVED, That the Wisconsin Medical Society support state legislation that would require that children and adolescents participating in any and all organized sports activities who have symptoms of concussion cannot return to play or practice without a physician’s written permission, and be it further

RESOLVED, That the Wisconsin Medical Society support local and statewide efforts that would increase concussion education for parents, children, adolescents, and athletic coaches participating in any and all organized sports activities.

Fiscal note: Within current budget for first resolve if replaces an existing legislative priority. Second resolve may have potential fiscal impact depending on how Society is asked to support education.

References:

Relevant Policies

Society: None

AMA:
H-470.974 Athletic Helmets
The AMA urges the Consumer Product Safety Commission to establish standards that athletic and recreational helmets, including but not limited to football, baseball, hockey, horse back riding, bicycle and motorcycle riding, lacrosse, and skiing, produced or sold in the United States provide protection against head injury; and that the AMA advocate the use of appropriate and safe clear face guards as a permanent installation on the current bilateral ear protective batter’s helmet to be worn by all baseball and softball players as required safety equipment in all organized baseball and softball for those children from 5 to 14 years of age. (Sub. Res. 16, I-88; Res. 419, A-93; Reaffirmed: CSA Rep. 8, A-03)