

Evaluation of Non-Life Threatening Injuries

■ Sports Medicine I

Non-Life Threatening Injuries

- Medical evaluation must be comprehensive
- In athletic training setting, two formats of evaluation are used
 - HOPS
 - SOAP



HOPS Format

- Determine if serious injury occurred
- There are four steps
 - H (History)
 - O (Observation)
 - P (Palpation)
 - S (Special Tests)



HOPS Format (History)

- Involves asking questions
- Helps ATC in assessing injury
- Helps MD in a diagnosis

■ Examples

- Mechanism of injury (How did it happen?)
- Location of pain (Where does it hurt?)
- Sensations experienced (Did you hear a pop or snap)
- Previous injury (Have you injured this structure before)

HOPS Format (Observation)

- Compare uninjured to the injured structure
- Look for
 - Bleeding
 - Deformity
 - Swelling
 - Discoloration
 - Scars
 - Other signs of trauma



HOPS Format (Palpation)

- Physical inspection of injury
 - Always palpate away from injured site first
 - Then palpate affected area
 - Should try to pinpoint exact location of pain
 - Use bilateral comparison
- Examples
 - Neurological stability (motor and sensory)
 - Circulation function (pulse and capillary refill)
 - Anatomical structures (palpate)
 - Fracture tests (palpation, compression, distraction)

HOPS Format (Special Test)

- Looking for joint instability, disability and pain
- Examples
 - Joint stability
 - Muscle/Tendon
 - Accessory anatomical structures (bursa, capsule etc.)
 - Inflammatory conditions



SOAP Format

- Another standardized procedure that provides comprehensive review of MOI
- S (Subjective)
- O (Objective)
- A (Assessment)
- P (Plan)



SOAP Format

- Subjective- (history) ask detailed questions
- Objective- involves visual, physical and functional inspections
- Assessment- reviews probable cause and mechanism of injury
- Plan-Outline of action to care of the injury

Basic Treatment Protocol

- PRICES
- Protection- Protect injury from further damage
- Rest- rest the injury (dependent on severity)
- Ice- Aid in controlling bleeding and associated swelling
- Compression- Compression wrap to control swelling
- Elevation- keep higher than the heart; helps with excessive swelling
- Support- first aid splint, sling, crutches, etc

ICE

■ Ice Packs

- Done using plastic bags filled with ice
- Cover with a wet towel
- Should be done for 15 min
- Two hours between treatments
- Six or more times a day

■ Cold Water Immersion Bath

- Use bathtub or whirlpool
- Water temperature between 50 and 60 degrees
- 10 minutes
- Six or more times a day

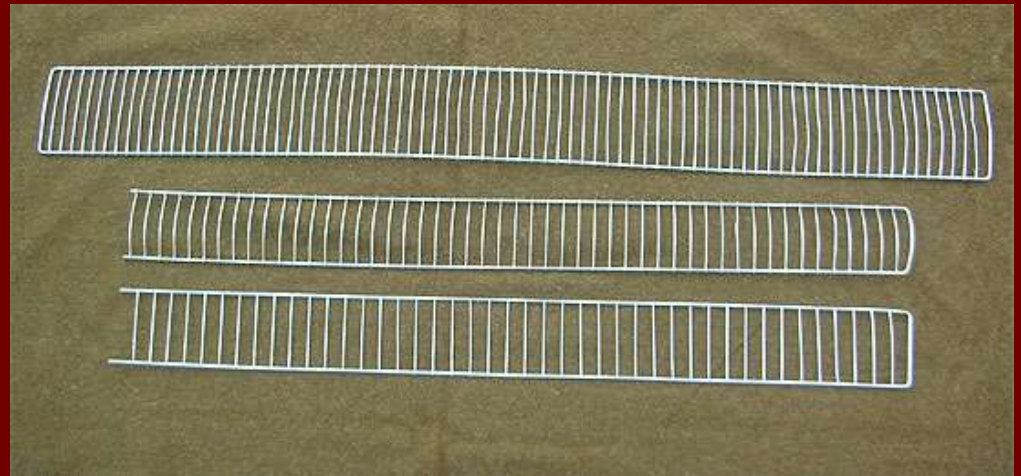


First Aid Splinting

- Splints are intended to protect the injury from further damage
 - Fixation Splints
 - Vacuum Splints
 - Pneumatic (Air) Splints
 - Traction Splints

Fixation Splints

- Most common adaptable splints utilized
- Examples
 - Board
 - Wire ladder
 - SAM
 - Pillow
 - blankets



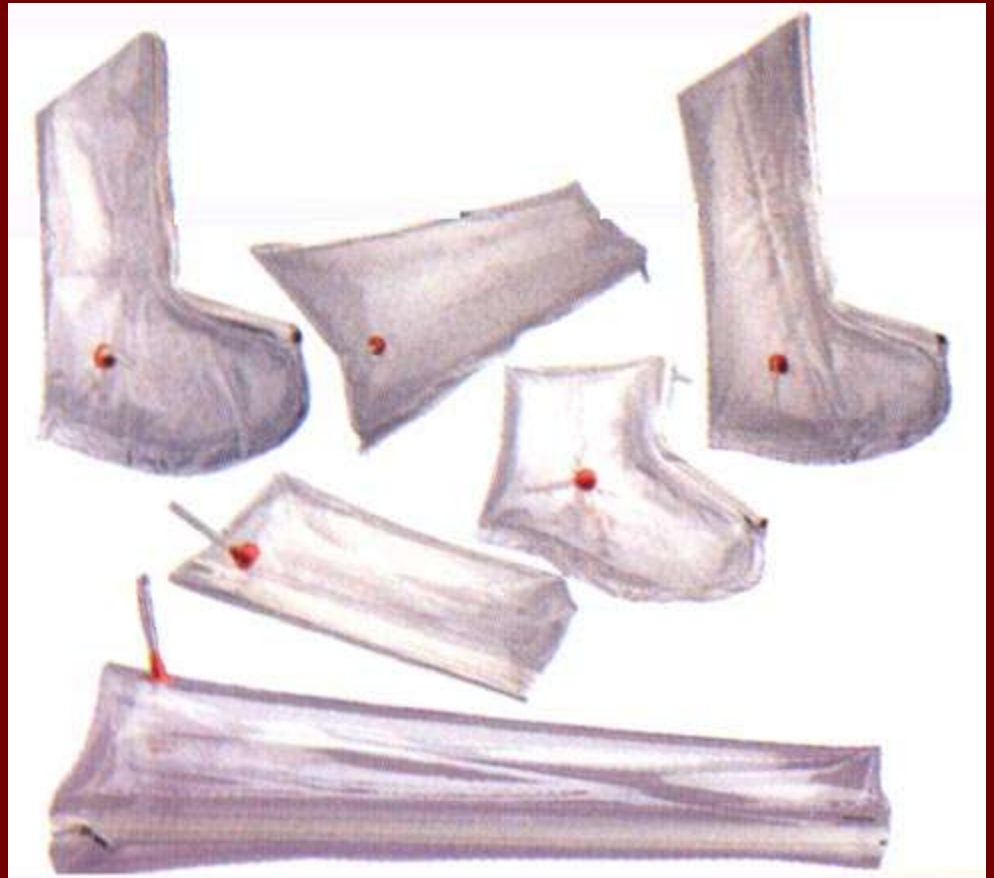
Vacuum Splints

- Appropriate for dislocations or misaligned fractures
- Adaptable to any limb angulations



Air Splints

- Non-displaced fractures
- No longer the standard of care in athletic injuries



Traction Splints

- Used for long bone fractures (femur)
- Prevent fractured bone ends from touching

