AMSSM High School Team Physician Toolkit

Please note that this toolkit is a living document. Toolkit was last updated on 11/30/2023. If you have any suggestions for edits or additions to the toolkit, please email the Practice & Policy Committee at practicepolicy@amssm.org.

Table of Contents

Approach 1 – 4
How do I best approach the school to offer services as a team physician?
What should I say?

Scope of Services 4 – 6
How should I define the scope of services that I provide?
What are the limitations I should consider?

Contract 6 – 8
Should I insist on a contract or written agreement?
Who initiates the contract?
What should the terms be?

Liability Insurance 8 – 9
How can I convince my employer to cover liability insurance for my team physician activities?

Liability Insurance Challenges 9 – 10
What can I do if my employer will not provide liability insurance for my team physician activities?

Supplies 11 – 12
What supplies should I have in my sideline bag as a team physician?

Preparation 12 – 14
How should I prepare for high school team physician coverage?

Additional Considerations 15 – 16
What else should I know about being a high school team physician?

How do I best approach the school to offer services as a team physician? What should I say?

Disclaimer

Prior to proceeding with these steps, it is important to make sure that your employer supports and approves of you providing medical care in this setting.

Identify a School

Grassroots Efforts

Determine which high school teams do not have physician coverage and may be interested
- Ask your local school districts, superintendent's office and/or district offices
- Ask local PT clinics who have athletic trainers supporting high school athletics

Make connections with schools in your community by volunteering
- Connect with local parent-teacher associations
- Offer educational sessions for athletes, coaches, teachers, and parents

Demonstrate commitment to your community by advocating for local policies
- Track state legislation pertinent to sports medicine here
- Use the AMSSM Legislative handbook

High School Association (HSA)

Reach out to your state HSA to learn more about the needs of your community
- Have any schools or districts inquired about getting physician coverage?

Reach out to members of your state HSA sports medicine advisory committee (SMAC)
- Typically a multidisciplinary team made up of physicians, athletic trainers, officials, coaches, school athletic directors, school principals, researchers, psychologists etc.

Find your state's HSA website here

Make Initial Contact

Athletic Director	• Recommended first point of contact
	• Usually the person to officially sign off on a partnership
	• Ask whether they have supported a team physician in the past or if there are other team physicians for high schools in their athletic conference or school district
	• Ask whether they have an athletic trainer on staff
	  ○ Is the athletic trainer part-time or full time?
	  ○ How is their position supported? Employed by the school or by an outside organization (e.g., Orthopedic clinic, PT clinic)

School Principal	• Alternative contact who can connect you with the Athletic Director, Athletic Trainer or School Nurse
Athletic Trainer and School Nurse	• Connect with both of these providers, if available, prior to signing a contract because you will be working together closely • Ask about resource accessibility (e.g., availability of a training room, first aid supplies, splinting materials, spine board, proximity to EMS) • Discuss existing infrastructure like AEDs and locations and posted Emergency Action Plans (EAPs)

Market Your Services

Business Cards

- Include a link to a web page with information about your experience and clinical interests
- Watch the AMSSM webinar about marketing here

Engagement Proposal

Create and share an engagement proposal which may include:

- List of services provided, click here for example
- Distinguish between roles of athletic trainer (ATC) and team physician
- Highlight benefits of having a physician partner
    - Educational sessions (athletes, parents, coaches, teachers)
    - Create/update school health policies
    - Create/update and practice EAPs
    - Expedited access to follow-up care (e.g., physician evaluation, imaging, physical therapy referrals, direct guidance for school ATC on rehabilitation plan to decrease missed time from school)
    - Assist/facilitate pre-participation physicals
    - Scheduled training room clinics on school site to decrease missed school time*
- Highlight benefits of having a team physician trained in primary care sports medicine on sidelines
    - Ability to assess and safely clear concussions and other injuries
    - Expertise in medical and musculoskeletal conditions/injuries
    - Training in mental health conditions/emergencies
    - Advanced interventions as appropriate (e.g., suturing, IV fluids)
    - Enhanced emergency response such as heat stroke, sudden cardiac arrest, head and neck injuries
    - Facilitation of transfer to emergency department for higher level of care
    - Communication with athletes, families and medical staff

*Note: Be sure to follow all legal and insurance requirements on how to set this up from organizational (meeting standards) and reimbursement (billing versus not billing) standpoints

Highlight the Data

- Injuries are more common in high school football and more likely to require emergency transport compared to other sports[1,2,3]
- Football injuries occur more frequently during competition than practice[4,5,6]
- Team physician coverage at the college level is well established, yet catastrophic injuries occur more frequently at the high school level[4,5]
- High school physician coverage and general emergency preparedness is lacking[7,8]
- A trained medical professional on the high school sideline can support evidence-based preventative practices, emergency preparedness, early recognition and initial management to mitigate catastrophic outcomes from brain/spine injuries[4], internal organ injuries[5], heat stroke[9] and cardiac arrest[10]
- Additional data available through the National Center for Catastrophic Sport Injury Research

References

1. Knowles SB, et al, “A Prospective Study of Injury Incidence among North Carolina High School Athletes,” American Journal of Epidemiology, 2006; 164(12): 1209-1221.
2. Hoge C, Sabbagh R, Morgan M, Grawe BM, “Epidemiology of youth and high school American football-related injuries presenting to United States emergency departments: 2010-2019,” The Physician and Sports Medicine, 2022; 50(4): 332-337.

3. Hirschhorn RM, et al, “Epidemiology of Injuries Requiring Emergency Transport Among Collegiate and High School Student-Athletes,” Journal of Athletic Training, 2018; 53(9): 906-914.
4. Kucera KL, et al, “Traumatic Brain and Spinal Cord Fatalities Among High School and College Football Players--United States, 2005-2014,” MMWR Morbidity and Mortality Weekly Report, 2017; 65: 1465-1469.
5. Kucera KL, et al, “Incidence of Sport-Related Internal Organ Injuries Due to Direct-Contact Mechanisms Among High School and Collegiate Athletes Across 3 National Surveillance Systems,” Journal of Athletic Training, 2019; 54(2): 152-164.
6. Kerr ZY, et al, “The First Decade of Web-Based Sports Injury Surveillance: Descriptive Epidemiology of Injuries in United States High School Football (2005-2006 Through 2013-2014) and National Collegiate Athletic Association Football (2004-2005 Through 2013-2013),” Journal of Athletic Training, 2018; 53(8): 738-751.
7. Jones NS, Wieschhaus K, Martin B, Tonino PM, “Medical Supervision of High School Athletics in Chicago: A Follow-up Study,” The Orthopaedic Journal of Sports Medicine, 2019; 7(8): doi: 10.1177/2325967119862503.
8. Scarneo SE, et al, “Emergency Action Planning in Secondary School Athletics: A Comprehensive Evaluation of Current Adoption of Best Practice Standards,” Journal of Athletic Training, 2019; 54(1): 99-105.
9. Grundstein AJ, Casa DJ, “Fatal Exertional Heat Stroke and American Football Players: The Need for Regional Heat-Safety Guidelines,” Journal of Athletic Training, 2018; 53(1): 43-50.
10. Drezner JA, Peterson DF, Siebert DM, Thomas LC, Kucera KL, “Survival After Exercise-Related Sudden Cardiac Arrest in Young Athletes: Can We Do Better?” Sports Health, 2018; 11(1): 91-98.

How should I define the scope of services that I provide? What are the limitations I should consider?

Scope of Services

The scope of services provided will be dependent upon a variety of factors including resources, level of training, and needs of the school. The team physician, along with the school’s athletic trainer, if available, will work with administration and coaches to discuss which services would be most helpful. However, ultimately, it is the team physician who must decide which services they feel comfortable providing.

Sports Pre-participation Physical

- Most states require athletes to undergo a routine sports physical prior to participating
- The team physician can conduct these examinations and clear athletes for play
- The team physician can also serve as a consultant to received questions from community family physicians and pediatricians who are providing Preparticipation Physical Evaluations (PPEs) in their offices
- The team physician can assist in coordinating further workups on any athletes who require additional evaluations prior to participation

- Ideally, sports physicals should be scheduled 6 weeks prior to the start of the season to allow adequate time for follow-up evaluation if needed

Evaluation and Clearance

The team physician may be responsible for:

- Evaluating and clearing participants to return to play after an injury or illness
    - Evaluations may occur on the sidelines, in the training room, or in the physician's clinic
- Leading shared decision-making process involving student-athlete, family and coaching staff regarding safe return to play

Emergency Medical Care

- Facilitating the development of an Emergency Action Plan (EAP)
- Working with ATCs, if available, to ensure coaches/staff are familiar with the EAP
- Being prepared to provide immediate medical attention for any athlete including:
    - Administering first aid
    - Stabilizing injuries
    - Providing CPR
    - Arranging for transport to a hospital if necessary

Record Keeping

- Creating a secure record of all medical care provided to athletes
- Coordinating this with other healthcare providers at the school site (e.g., athletic trainer, school nurse)

Education

- Providing education sessions for athletes, parents, coaches or teachers within the school
- Leading or organizing CPR classes (including use of an AED) onsite at the school

Patient Population

- Clearly defining the patient population you will be serving in this role (only athletes from specific teams versus all athletes, athletes versus all students, coaches/support staff, event coverage for which teams)

Limitations

Resources	A sideline physician will most likely have fewer resources available to them than are available in the clinic setting such as lab work or imaging. Emergency medical services and certain supplies (e.g., spine backboard) may not be onsite for all events. When working with an athletic trainer, you should know what they have available in their sideline bag. The sideline physician might be expected and/or willing to provide equipment for procedures like hemostasis and suturing. This should be discussed in advance.

Training	If a physician is not trained in a particular service, or have available equipment (such as point of care ultrasound), they cannot effectively offer this as a provided service. If you have a trainee involved (e.g., medical student, resident, fellow), it is important to be aware of their programs' policies to help determine the level of expected supervision.
Legal Limitations	Laws and rules differ by state and school district and can affect the types of services that can be provided. A sideline physician should be familiar with these policies. As a general rule, US Center for Safe Sport recommends that all 1-on-1 interactions between an adult and a minor athlete should be observable and interruptible. Ensure there is infrastructure in place to allow another adult to be present for your clinical evaluations of athletes within the training room. Additionally, it is important to clearly define where your responsibility/care stops (e.g., at the time of transfer to EMS versus upon arrival to ED). This may be dependent on the level of skill of local EMS services). You should also have clarification of your role when it comes to providing medical care to players from the other team, officials, coaches or spectators (malpractice coverage versus Good Samaritan).

Resources and References

AMSSM Scope of Practice: https://www.amssm.org/Content/pdf%20files/ADVOCACY/SCOPE_OF_PRACTICE.pdf
Being a Team Physician: https://journals.lww.com/acsm-csmr/Fulltext/2018/02000/Being_a_Team_Physician.2.aspx
Team Physician Consensus Statement: https://www.aaos.org/globalassets/about/bylaws-library/information-statements/1021-team-physician-definition-qualifications-and-responsibilities---a-consensus-statement.pdf
Good Samaritan Laws Ranking: https://worldpopulationreview.com/state-rankings/good-samaritan-law-states
Safe Sport Training: https://uscenterforsafesport.org/training-and-education/safesport-courses-for-all/
Safe Sport 1-on-1 Interactions Policy: https://uscenterforsafesport.org/wp-content/uploads/2021/03/MAAPP_OnePagers_1on1.pdf

Should I insist on a contract or written agreement? Who initiates the contract? What should the terms be?

Disclaimer

Please note that the information included in this section does NOT represent legal advice and we encourage you to work closely with an employment or contract lawyer to answer the questions posed above based on your specific situation.

Importance of Contract

A contract will protect you from a liability standpoint and clearly defines your role, responsibilities and limitations as the team physician.

Important Topics

Below is a list of topics that you may want to discuss with your employment or contract lawyer. Please note that this is not an exhaustive list.

Parties Involved

- Example: Agreement between school and specific provider versus school and hospital
- Example: Independent contractor versus employee

Define Core Responsibilities

Here are some examples of what "core" team physician responsibilities may include:

- Preseason sports physicals once per year
- Medical coverage at football games (all varsity and junior varsity games versus all varsity games versus varsity home games only)
- Contribute to school-specific Emergency Action Plans and protocols

Define As Needed Responsibilities

Here are some examples of what "as needed" team physician responsibilities may include:

- Medical care for student athletes in physician's primary clinic
- Training room assessments
- Medical coverage for additional sport teams or tournaments
- Educational seminars for students, coaches or parents

Documentation Expectations

- Define HIPAA-compliant system (electronic versus paper health record) that will be used for documentation following clinical evaluations
    - Through primary hospital versus existing school-based medical documentation system
    - If electronic health record used, which party will pay for use of this system?

Consent Protocol

- Review the school's current student-athlete sporting activity consent form and make edits as needed to ensure that the definition of "medical personnel" includes your role and scope of practice
- Be aware of specific requirements for parental consent by state (e.g., Florida legislation)

Define Referral System

- Nearest hospital emergency department versus nearest pediatric-specific emergency department taking into account the capabilities of both for the defined age group
- Local emergency medical services

Compensation and Malpractice

- Define type of compensation:
  - Payment for services
    - Charge (e.g., cost per physical, per home game, per away game)
    - Duration of time until payment is due
  - Marketing value for services
  - Malpractice insurance coverage
    - Define amount per occurrence and annual aggregate limit
    - Understand claims-made, occurrence, and tail coverage

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Termination Criteria

- Identify causes for termination
- Be aware of notice period required if agreement is terminated by either party

General Suggestions

- If you or your lawyer have more specific questions about logistics in your state, consider reaching out to other team physicians in your area
  - May be able to provide recommendation for contract lawyer with experience in this area
  - May be willing to share an example contract
- If your primary hospital has previously supported team physicians or athletic trainers, consider reaching out to the hospital's legal or contracts team
  - Keep in mind that the lawyers affiliated with the hospital will always have the hospital's best interest in mind, which could conflict with your best interest

Resources

What to Know about Physician Employment Contracts (AMSSM Sports Economics Webinar Series):https://www.youtube.com/watch?v=edsSA1EFXGM

How can I convince my employer to cover liability insurance for my team physician activities?

Disclaimer

Please note that the information included in this section does NOT represent legal advice and we encourage you to work closely with an employment or contract lawyer to address your specific situation.

Important Topics

Below is a list of topics that you may want to discuss with your employer, their legal department, and the school. Please note that this is not an exhaustive list.

Discussion with the Hospital/Medical Group

Ask what the hospital's/medical group's requirements are to add a new approved "facility" or "location"

- Your current credentialling paperwork and contract should include "facilities" and "locations" which fall within the scope of your current covered liability insurance
- If your hospital/medical group supports athletic trainers or physicians providing care off-site (e.g., mobile health clinic) they likely have a template for adding a new covered "facility" or "location"

Discussion with the School

Share the process you learned above with your potential school and gauge their interest in pursuing a legal agreement to become an approved "facility" under the hospital/medical group network

- Example of liability insurance agreement that would cover this type of agreement: "related programs approved by Hospital/Medical Group Name"
- If the school is open to this, connect the Athletic Director to your hospital's/medical group's legal department to work on developing a formal agreement

General Tips

Highlight benefits for the *hospital/medical group*

- Increases hospital/medical group visibility, awareness and referral network within community
- Hospital/medical group may have community outreach location priorities to inform your school choice

Highlight benefits for the *school*

- Appealing for potential students and parents
- Additional support for the schools' current staff (e.g., athletic trainer, school nurse, athletic director, physical education and health teachers, school safety officer)
- May streamline the medical referral process for students attending that school

Review the school's current student-athlete sporting activity consent form

- Ensure that their defined "medical personnel" allowed to provide treatment is broad enough to encompass the scope of your involvement as a physician
    - If they have not had a team physician before, the language may only be relevant to the scope of existing staff members (e.g., athletic training, school nurse, EMT)
- If it is a narrow definition, talk with the school about inclusive terms for medical personnel
    - This may be done in conjunction with the above Agreement if you can provide a copy of the consent form to your hospital's/medical group's legal department

What can I do if my employer will not provide liability insurance for my team physician activities?

Disclaimer

Please note that the information included in this section does NOT represent legal advice and we encourage you to work closely with an employment or contract lawyer to address your specific situation.

General Considerations

- This situation typically falls into one of two scenarios:
    - 1. The hospital/medical group cannot provide liability coverage for you for this role, but they are supportive of you proceeding with this role with external liability coverage
    - 2. The hospital/medical group cannot provide liability coverage for you for this role, and they also do not support you doing this at all
- The rest of this discussion applies to those physicians in scenario 1
- Always refer back to your original contract to ensure that team physician responsibilities would not violate any existing clauses in your contract (e.g., non-compete)

Possible Approaches

Having your primary hospital/medical group formally add the school as an approved “facility” or “location” covered by your existing liability insurance is the best option. However if your hospital/medical group is unable to provide liability coverage, but still allows you to pursue outside coverage and it does not violate your initial employment contract, you can consider the following options:

Option One	**Request to be placed under the School District’s liability coverage**
	• Through same process as coverage for their nurses, athletic trainers etc.
	• If the school cannot add you but would like to work with you to provide medical coverage, consider establishing a limited liability company (LLC) with your state that the school can then employ
	  ○ Note the LLC is not designed for or meant to protect your license to practice medicine, but rather your medical liability
	  ○ Seek the advice of an attorney

Option Two	**Consider purchasing supplemental liability insurance for yourself**
	• Assess your comfort level of providing medical care in a volunteer status without liability insurance versus paying for the expenses of liability insurance out of your own pocket
	• Malpractice insurance coverage
	  ○ Define amount per occurrence and annual aggregate limit
	  ○ Understand claims-made, occurrence, and tail coverage

Additional Resources

Discussion of model legislation for out-of-state coverage for sideline physician: https://www.aaos.org/globalassets/advocacy/state-issues/sports-medicine-licensure/sports-medicine-package.indd.pdf

What supplies should I have in my sideline bag as a team physician?

General Considerations

This list provides a broad overview of items to consider when you are covering. However, please keep in mind that some items may be provided by the facility where you are working and some may be outside of the scope of care you have agreed to provide in that setting.

Considerations when choosing a sideline bag

- Size and portability
- Security
- Durability
- Organization
- Potential need for more than one bag for different situations (home versus travel)

Supplies to have with you at all times (fanny pack or pocket)

- Cell phone
- Gloves (a couple of pairs)
- Bandages (gauze 4x4, band-aids)
- Trauma shears
- Penlight
- Pen and paper
- Pocket knife or multi-tool
- Stethoscope
- Candy (4 starbursts = 15g of carbs)
- Medications: Epipen, Albuterol, Glucagon

Supplies to have if you are the only medical provider (medical bag)

Medical Equipment	Wound Management	Orthopedic Management

• Gloves
  ○ Sterile
  ○ Non-sterile
• Face mask
• Eye protection
• Tape
• Tongue depressor
• Pocket CPR mask
• Stethoscope
• Blood pressure cuff
• Ophthalmoscope
• Otoscope
• Reflex hammer
• Towels and washcloth
• Tampons
	• Alcohol
	• Iodine swabs
	• Bandages
	  ○ Gauze 4x4
	  ○ Gauze kerlix
	  ○ Band-aids
	• Antibiotic ointment
	• Irrigation solution (NS)
	• Adhesive skin closures
	  ○ Medical glue
	  ○ Steri-strips
	  ○ Suture kit
	• Skin staple applicator
	• Blister care
	  ○ Liquid adhesive
	  ○ Moleskin
		• Braces
		  ○ Locking knee
		• Extremity splints
		  ○ Air splint
		• Finger splints
		  ○ Alumafoam
		  ○ Stack splint
		• Slings
		• Elastic bandages
		• Ace wrap
		• Ultrasound

Weather Management	Neurologic Management	Medications
• Thermometer with single use covers • Thermal blanket • Method for ice bath (tarp or tank) • Wetbulb thermometer	• Face mask and helmet removal tool • Cervical spine collar • Spine board • Pelvic binder	• Triple antibiotic • Individually packaged: Acetaminophen, Ibuprofen, Anti-histamines • Antacids • Albuterol inhaler • Epipen • Glucagon

Procedure Kits		Outside Your Bag
• Eye Kit: blue light, Fluorescein, Snellen eye chart, Tetracaine eye drops, eye patch, eye patch pad, mirror, contact remover, antibiotic eye ointment	• Dental Kit: Cyanoacrylate, Hanks solution • Epistaxis Kit: Nose plugs, nasal tampon, Silver Nitrate, Oxymetazoline • IV Kit • Sharps container	• AED (know location, check expiration date of pads, confirm it powers on when feasible) • Ice • Plastic wrap • Crutches

Resources and References

Sports Medicine Review: https://www.sportsmedreview.com/blog/whats-in-a-sport-medicine-doctors-bag/
Optimizing the Sideline Medical Bag: https://accessible-techcomm.org/wp-content/uploads/optimizing_the_sideline_medical_bag.pdf
Current Sports Medicine Reports: https://journals.lww.com/acsm-csmr/Pages/articleviewer.aspx?year=2005&issue=06000&article=00004&type=Fulltext
Current Trends in Acute Sideline Management: https://amssmstore.com/reaching-for-the-med-bag-current-trends-in-acute-sideline-management/

How should I prepare for high school team physician coverage?

Preparation

Pregame/Preseason Preparation

- Review and perform Preparticipation Physical Evaluations
- Assess risk management and injury prevention measures
- Develop, distribute, and review implementation of Emergency Action Plans (EAPs)
- Access and review athlete emergency documents
- Prepare to address any mental health concerns that arise from student-athletes
    - Resources for mental health support within the school (e.g., counselors, social workers, school nurse)
    - Resources external to the school (e.g., peer support groups, hotlines)
- Establish standards with other medical and school personnel to ensure safe environment for student-athletes, including following best practices for 1:1 interactions between adult staff and minor athletes: Safe Sport Policy
- Define sideline medical coverage roles and responsibilities with other providers present
- Develop an agreement of responsibilities among team physician, clinic/hospital leadership, and school system leadership
- Ensure compliance with occupational safety laws, department of health, and local/state/federal governing bodies
- Understand the medicolegal components of sideline sports medicine care

Game Day Sideline Preparation

- Review EAPs and Return to Play (RTP) protocols
- Plan the medical care of athletes with the opposing team's medical staff
- Ensure commonly utilized equipment is easily accessible and functional, including communication equipment
- Complete pregame preparations, including observation locations, treatment sites, event conditions and environmental factors
- Confirm where emergency supplies (e.g., AED) and personnel (e.g., EMS when present) are located and ensure their availability throughout the event
- Communicate with all medical staff regarding event-specific rules and expectations

Emergency Preparedness

- Identify and plan for medical services to promote safety and limit injury
- Collaborate with all appropriate medical staff on sideline preparedness
- Confirm the best point of entry near the game for EMS services if not present onsite
- Establish roles in an emergency scenario (e.g., who calls 911, who directs ambulance, who gets the AED, etc.)
- Perform medical time out (MTO) prior to the start of the contest with relevant personnel
    - KSI Medical Time Out

Non-Game Day Preparation

- Establish RTP process with athletic medical staff and chain of command for injury/illness
- Understand your local and state laws regarding EAPs, AEDs, and any other health and safety standards, such as those regarding return to play following concussion
- Review and practice EAPs at least annually with athletic training staff and team physicians; ideally local EMS should also be involved

Specific Resources

Mental Health and Safe Sport
• Mental Health First Aid Course • Safe Sport Training (sexual misconduct awareness/education, mandatory reporting, physical and emotional misconduct including bullying/hazing)
AMSSM Fellow Webinar Series
• Sideline emergencies focused on collapsed athlete • Chest trauma and ankle fractures • C-spine and sideline emergencies
KSI Quick Reference Resources
• Go to KSI main page then click on “Emergency Conditions” tab • Prevention, Recognition, Treatment and Return to Play information on the following topics: Anaphylaxis, Asthma, Internal Trauma, Cardiac Conditions, Cervical Spine Injury, Heat Illness, Exertional Sickling, Hypo-Hyperglycemia, Hyponatremia, Traumatic Brain Injury, Lightning • Medical Time Out
AMSSM Consensus and Position Statements
• AMSSM Statements • Important statements to familiarize yourself with as a high school team physician: Return to play, Concussion, Female athlete, Mass event, CV screening, Overuse and burnout in youth sports, ADHD athlete, Abuse in sports
In-Person Trainings
• Team Physician Courses sponsored by AMSSM • Sideline Emergencies Simulation sessions at AMSSM annual meeting • Basic Life Support (BLS), Pediatric Advanced Life Support (PALS), Advanced Cardiac Life Support (ACLS), and Advanced Trauma Life Support (ATLS) trainings

Additional Resources and References

Preparticipation Physical Evaluation Monograph (5th Edition): https://amssmstore.com/ppe-preparticipation-physical-evaluation-fifth-edition/
Being a Team Physician: https://pubmed.ncbi.nlm.nih.gov/29420343/
Evolving Expectations of the Orthopedic Team Physician: https://pubmed.ncbi.nlm.nih.gov/34622821/
Emergency Preparedness in High School-based Athletics: https://pubmed.ncbi.nlm.nih.gov/23703513/
Emergency Preparedness and Management of Sudden Cardiac Arrest: https://pubmed.ncbi.nlm.nih.gov/17597956/
AAFP Sideline Preparedness: https://www.aafp.org/dam/AAFP/documents/patient_care/fitness/ACSMsidelinepreparedness.pdf
Concussion for the Team Physician: https://pubmed.ncbi.nlm.nih.gov/34134974/
Injury and Illness for the Team Physician: https://pubmed.ncbi.nlm.nih.gov/26745173/

What else should I know about being a high school team physician?

Resources

AMSSM Sports Medicine Physician Scope of Practice:
https://www.amssm.org/Content/pdf%20files/ADVOCACY/SCOPE_OF_P RACTICE.pdf
AAOS Team Physician Information Statement:
https://www.aaos.org/globalassets/about/bylaws-library/information-statements/1021-team-physician-definition-qualifications-and-responsibilities---a-consensus-statement.pdf
ACSM Team Physician Consensus Statement:
https://www.aafp.org/dam/AAFP/documents/patient_care/fitness/ACSMteamphysicianconsensus.pdf
AMSSM Panel Discussion – Role of the Head Team Physician:
https://www.youtube.com/watch?v=ocOdb_DMuL4
Sample Indemnification Agreement for Traveling Physician:
https://www.amssm.org/Content/WordFiles/Sample_Release-Dr_Traveling.docx
KSI State Specific Policies: https://ksi.uconn.edu/high-school-state-policies-2-2-2/

Additional Considerations

Liability

- Ensure that your medical liability provider has coverage inclusive to team physician activities, which may involve crossing state lines
    - Federal legislation (*The Sports Medicine Licensure Clarity Act of 2018*) exists to protect team physicians crossing state lines
    - Be aware that currently Oklahoma does not have state legislation licensure exemptions in place for traveling physicians
- For medical care that you may provide outside of your clearly defined team physician roles while traveling, be aware of Good Samaritan laws in each state

Travel

- Coordinate supplies with the athletic trainer working with your team
- Avoid transporting controlled substances across state lines
- Declare availability to host school athletic medicine team (e.g., introduce yourself to team physician and athletic trainer prior to the game)
- Understand host school Emergency Action Plan and location of emergency devices (e.g., AED)
- Look up location of nearest hospital, urgent care and pharmacies as well as their hours of operation

Challenges

- Potential social media scrutiny for highly competitive high school teams
- Medicolegal liabilities
    - Compliance with rules and regulations from governing bodies and legislation

- Medical record documentation
- Ethical considerations
  - Patient confidentiality
  - Informed consent: age of patient, athlete autonomy, parental consent
  - Influence of third parties: teammates, coaches, administrators, community, media

Compensation
• Many high school team physicians are unpaid • The culture seems to be changing in terms of increasing expectations by physicians for compensation for their services

Additional Resources and References

Professionalism and the ethics of the sideline physician: https://pubmed.ncbi.nlm.nih.gov/16640946/
Trends for the future as a team physician - Herodicus to hereafter: https://pubmed.ncbi.nlm.nih.gov/17499629/
Being a Team Physician: https://pubmed.ncbi.nlm.nih.gov/29420343/

Embedded Links

AMSSM State Legislation Tracker: https://www.amssm.org/legislation_by_state.php
AMSSM Legislative Handbook: https://www.amssm.org/Content/pdf-files/ADVOCACY/LegislativeHandbk.pdf
HSA Sports Medicine Advisory Committee: https://www.nfhs.org/sports-resource-content/sports-medicine-advisory-committee-smac-mission-statement-and-goals/
State HSA Directory: https://www.nfhs.org/resources/state-association-listing
AMSSM Marketing Webinar: https://www.youtube.com/watch?v=-Xzg-tRzXhw&list=PLBO0RP6XZBdENmcL1GqIyMW8dk-G31UHP&index=6
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