

Survival Guide

2011 Youth Football

Tips and online information

- **New 2011 injury treatment information.**
- **Top rated & recommended equipment.**
- **Coach & Parent communications tips**



For more detailed information on topics contained in this pamphlet visit us at:

www.1stand10football.com

Football Injury Management

Self-Care at Home Tips

If you suffer an acute injury, such as a strain, sprain, or contusion, immediately stop activity and use the R.I.C.E. method of treatment. RICE stands for **R**est, **I**ce, **C**ompression, and **E**levation. It is important to begin R.I.C.E. as soon after injury as possible. Use a sheet or towel to protect the skin and apply ice immediately. Next wrap an elastic bandage around the ice and injured area. Don't wrap this so tightly that you cut off the blood supply, but it should be snug. Remove the ice after 20 minutes and re-apply about every hour throughout the remainder of the day. Once the swelling decreases and the area is no longer hot to the touch, you can begin gentle range of motion exercises for the affected area or joint.

Remember: RICE = Rest, Ice, Compression, and Elevation.

Rest: prevents further injury and avoids stress on already inflamed joints or tissue.

- Put the injured area at rest by wearing a brace, sling or splint when applicable. More severe injuries may be treated with use of crutches.

Ice: is the best treatment.

- Ice counteracts the increased blood flow to the injured area.
- It reduces swelling, redness, and warmth.
- Applied soon after the injury, ice prevents much of the inflammation from developing.
- Do not apply ice directly to the skin. Use a towel between the ice and the injury, or use an ice bag. Apply ice for 20 minutes at a time, with at least 30 minutes between applications. This is to prevent frostbite, which can occur if you use ice too much or use it directly on your skin.

Compression: will assist in controlling the swelling, and it provides support to injured tissues.

- Elastic wraps such as Ace bandages immobilize the ankle. Do not apply wraps too tightly.

Elevation: (keeping the injured area up as high as possible) will help the body absorb fluid that has leaked into the tissue. Ideally, prop the ankle up so that it is above the level of the heart. Sit in a reclining chair or prop your legs up with pillows. Anti-inflammatory pain medications such as ibuprofen (Motrin IB and Advil) and naproxen (Aleve) will reduce the pain and combat the swelling. **DO NOT** use aspirin! Aspirin will thin the blood and cause increased bleeding in tissues.

Follow-up and doctors visit is needed if the injury is not healing well. This could indicate there is a previously undetected fracture, torn ligaments or more severe damage to the area. An orthopedic surgeon or other medical professional should be consulted if initial treatment fails.

Concussions

New 2011 recommended guidelines

In the last few years there has been a steady rise in concussions — estimated at more than 500,000 each season among the 4.4 million children who play tackle football — as well as more rare but catastrophic injuries where vertebrae are crushed or fractured, leaving the player paralyzed.

The return to play (RTP) protocol is a medically supervised stepwise process which involves a gradual increase in activity intensity and duration over the course of several (4-6) days. At each stage of the return to play protocol, specific objectives and restrictions are implemented to make sure a gradual progression is followed by the athlete and also allows for monitoring of signs and symptoms.

Six step process

- 1) No Activity, 2) Light aerobic exercise, 3) Sport-specific exercise, 4) Non-contact training drills, 5) Full contact practice, 6) Normal game play

For more information please go to atsuconclusion.com

Concussions: Parents' Important Role in Evaluation, Recovery. Along with teachers and other school personnel such as coaches, a parent is a "critical participant" in a child's treatment and recovery from a suspected concussion, including decisions about return to school, return to sports/recreation and return to everyday social and home activity. Parents are the best ones to notice changes in the child's personality or attention/focus.

2011 Top Rated Football Helmets

Helmets are designed to protect the head, but they will NOT prevent concussion! The mouthguard should be considered part of the helmet and the helmet never worn without the mouthguard

Youth Helmets:

Xenith X1, Ridell Revolution, Schutt Youth ION 4D

High School Helmets:

Riddell "The Revolution Speed", Schutt Adult ION 4D, Xenith X1

Recommended football cleats

Speed cleats

Nike Zoom Vapor Carbon Fly TD, adidas adiZero 5-Star Under Armour Blur II Low MC - Men's

Line play cleats

Nike Alpha Speed TD 3/4 - Men's, adidas Malice D - Men's, adidas Destroy MD Mid - Big Kids

Recommended safety accessories

Nike Pro Combat Hyperstrong Football Short, Rawlings Zoombang II 4-Piece Protective Shirt - Men's, Under Armour ArmourBite Mouthguard, [adidas Scorch Destroy Lineman Gloves - Men's](#), Nike Vapor Carbon SG Receivers Glove - Men's, Douglas CP Butterfly Restrictor - Men's (Neck support)

Sponsor Position 1

Sponsor Position 2

Ankle and Knee sprain Injuries

Self-Care at Home Tips

Remember **RICE**: rest, ice, compression, and elevation.

Ankle Sprain

If you do have significant symptoms following a sprained ankle, you should seek medical attention. Signs that should raise concern include:

- Inability to walk on the ankle
- Significant swelling
- Symptoms that do not improve quickly or persist beyond a few days
- Pain in the foot or above the ankle

Knee Sprain

Treatment of knee pain must be directed at the specific cause of your problem. Some signs that you should be seen by a doctor include:

- Inability to walk comfortably on the affected side
- Injury that causes deformity around the joint
- Knee pain that occurs at night or while resting
- Knee pain that persists beyond a few days
- Locking (inability to bend) the knee
- Swelling of the joint or the calf area
- Signs of an infection, including fever, redness, warmth
- Any other unusual symptoms

Shoulder Injuries

Self-Care at Home Tips

Remember **RICE**: rest, ice, compression, and elevation.

Shoulder pain and tenderness are common symptoms of a shoulder separation after a fall or impact. Sometimes there is a small bump on top of the shoulder (AC separation) or in shoulder dislocations, the shoulder comes out of joint. Signs and symptoms of shoulder joint injuries range from a minor deformity and mild pain, to a very painful and severe deformity.

- Physical exercises to increase range of motion and strength, once the tissues have healed (4-6 weeks).

Sponsor position 3

Heatstroke

Safety & Emergency procedures

Heatstroke is a medical emergency. Even with immediate treatment, it can be life-threatening or result in serious, long-term complications. After calling 911 or other emergency medical services, follow these first aid steps.

- Move the person into a cool place, out of direct sunlight.
- Remove the person's unnecessary clothing, and place the person on his or her side to expose as much skin surface to the air as possible.
- Cool the person's entire body by sponging or spraying cold water, and fan the person to lower the body temperature. If possible, submerge the person's body in a cool or cold pool (protect them from drowning!). Watch for signs of rapidly progressing heatstroke (below).

- **Immerse the person in an ice bath or cool pool.** If no pool is available, **apply** ice packs to the groin, neck, and armpits, where large **blood** vessels lie close to the skin surface. You are trying to cool the internal temperature as quickly as possible.

- If the person has stopped breathing, begin [rescue breathing](#).

- If the person is awake and alert enough to swallow, give fluids for hydration. Most people with heatstroke have an altered level of consciousness and cannot safely be given fluids to drink. You may have to help. Make sure the person is sitting up enough so that he or she does not choke.

The Content is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Always seek the advice of your physician or other qualified health provider with any questions you may have regarding a medical condition. Never disregard professional medical advice or delay in seeking it because of something you have read.

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www.1stand10football.com

Parent and coach communication tips.

Before communicating with your coach, put yourself in his shoes. Here are things to consider.

- Young people are watching both parent and coach. Make sure that you set a good example.
- To accomplish effective communication with your coach the parent should take into consideration that your head coach is providing a service to the community and in most cases is not a paid professional coach.
- He is responsible for every kid on the team and is limited by time and the number of practices he has to prepare his team. In most cases, he usually has a job, a family of his own and is responsible for other football related details. His main goal is to improve his team as a whole and win. If you are interested, ask how you could help with the team. Don't complain and not do anything!

How to handle differences of opinion on, position your child is playing, starting jobs on the team and playing time issues.

- 1) Respectfully ask the coach why your child is not playing the position or as much as you feel he should.
- 2) Attend practice and observe your child's performance and behavior at practices. Playing time and role on the team is earned at practice. Observing the practice before approaching the coach with your difference of opinion helps parents see the big picture and get a feel for the present situation.
- 3) Ask for head and/or assistant coach's opinion on areas where your child may need to improve and what it would take to earn a desired role or more playing time.
- 4) Get your child the help of a professional trainer on non practice days to accelerate understanding and your child's skill level in specific areas in which your child may be struggling. Remember that most coaches are not at a luxury to spend individual time with every athlete once the season begins. His focus after the first couple of weeks is on play execution not necessarily individual improvement techniques. A personal training session will be a great investment in this case.

Sponsosr position 4