

SURVEY OF THE AVAILABILITY OF EMERGENCY SERVICES AT HIGH SCHOOL FOOTBALL GAMES IN OHIO

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HISTORY:

Several sports medicine organizations have adopted position papers or stands regarding the availability of personal and equipment to evaluate and manage injured individuals at football games. For example, the American Chiropractic Board of Sports Physicians has endorsed positions that pertain to these topics including the Inter-Association Task Force for Appropriate Care of the Spine-Injured Athlete and the American College of Sports Medicine position on Automated External Defibrillators in Health/Fitness Facilities.

PURPOSE:

The purpose of this study was to evaluate if the emergency management services of an automatic external defibrillator (AED), ambulance, athletic trainer and team physician services were available at varsity high school football games in the state of Ohio.

METHODS:

A total of 818 surveys were sent out to all Ohio High Schools. Data was obtained regarding availability of the following emergency care services for varsity football games: AED, ambulance, athletic trainer and team physician. The survey was faxed to all Ohio High School athletic directors, using the jblast.com fax service. The participating schools were informed to fax or mail their response to DeWitt chiropractic. Identification of the schools football division was also made.

RESULTS:

A total of 154 (19%) surveys were returned. 141 (17%) surveys were accepted for inclusion in the study. 13 of the returned surveys were excluded from the final results because seven schools did not offer football and six schools did not identify the size of their school. Division I and II schools which, are designated as large schools, totaled 51 (36%) of the 141 responses. Division III and IV schools which are designated as mid-size schools, totaled 46 (32%) of the total 141 response. Division V and VI schools, which are designated as small schools, totaled 44 (31%) of the 141 responses. There was a balance of responses obtained from all class levels. Overall the most common emergency service available was the onsite ambulance service with 92% of all schools reporting this available for varsity football games. ATC availability ranked second at 90%, with team physician availability third at 87% and AED availability last at 78%.

For the largest school districts the three most common resources for emergency care were, ATC at games (98%), team physician at games (86%) and ambulance service at games (84%). For the mid-sized school districts the three most common resources for emergency care were ambulance service at games (98%), team doctor at games (96%), ATC at games (91%). For the smallest school districts the three most common resources for emergency care were, ambulance service at games (95%), ATC at the games (80%), team physician (77%).

CONCLUSION:

The results of this survey provide information about the current state of basic emergency services for varsity high school football in Ohio. From this study it appears that recommendations regarding the availability of emergency services at football games is being provided for Ohio varsity high school football regardless of school size.