

Testimony for HB 5113 and SB 229

Dear Legislator,

My name is David Johnson and I represent the athletic coaches, parents and athletes across the state of Connecticut. I currently reside in Enfield. I recently retired from 35 years in public education (teacher, coach, athletic director, high school assistant principal and director of a middle school alternative education program). For the past 18 years, I have owned and operated a private sports medicine business, and I teach the Medical Aspects of Sports Injury and Sport Physiology for the Connecticut Interscholastic Athletic Conference (CIAC) which I have done for the past 16 years. I also have over 35 years as a high and college sports official (soccer, baseball, basketball).

I am writing to express my concerns for HB 5113- AN ACT CONCERNING YOUTH ATHLETICS AND CONCUSSIONS. Connecticut already has the most stringent coaching permit and coaching education requirements in the country. We offer the most extensive concussion education course required for coaches in the country. The Connecticut course covers the signs and symptoms of concussions and the chemical occurrence that happens in the brain during the concussed state, it covers other brain injuries such as brain bleeds and skull fractures, scalp and neck injuries. It also trains the coach in an extensive "return to play protocol" which is annually reviewed with all coaches. The current concussion law, the extensive coaching education requirements and the recent actions and mandates put out by the CIAC requiring concussion education for parents & students and limiting contact in football practice far exceeds what is being done in other states and is more than adequately serving and insuring the safety of our student-athletes in the state of Connecticut (see Medical Aspects syllabus attached).

I also have concerns with SB 229- AN ACT CONCERNING SUDDEN CARDIAC ARREST PREVENTION. The current coaching law requires all coaches to maintain current first aid and cardiopulmonary resuscitation (CPR). In addition to cardio-pulmonary resuscitation and rescue breathing, CPR courses include signs, symptoms and prevention of heart attacks, causes of heart disease, breathing emergencies such as choking and the proper method for obtaining medical treatment for a student in distress. Also, many courses now include training in the use of an AED machine. Additionally, non-teacher coaches by statute must take a 45 clock hour course which includes 15 hours of instruction on the medical aspects of interscholastic coaching. During those 15 hours our course covers sudden cardiac arrest in great detail. Furthermore, this law places the onus for implementation and notification on the coach rather than the school district that has many more resources to deal with these requirements.

I am the first to support the implementation for as many safety measures for our children as possible. That is probably the driving force for my return to post-graduate courses in sports medicine during my teaching and coaching career. Since my retirement from education last year, it has become a business, and more importantly, a passion. I travel the state and the country providing concussion education to coaches, parents, athletes, educators and anyone who will listen. However, I question all that we are looking to place on the shoulders of our coaches who work regular full-time jobs, interrupt time with their own families and coach because they love the sport as well as the children they coach. And they do it for very little, if any remuneration. For whatever is taken out in taxes, even the better paid coaches are in reality, volunteers. Therefore, I think that we need to show great care and concern for what we do to these people. Many are struggling to meet our current requirements while maintaining their own personal and professional lives. They are being well-educated for what they need to know medically as coaches; the updates can be taught during their 1 year and 5 year recertification or as part of their continuing education process. I interact regularly with the top concussion experts in the country, and although there are updates, they can be taught during the aforementioned time period. I see absolutely no need to make all of them complete the concussion training again. It is these things that will cause coaches to leave the profession where there is already a shortage of qualified individuals. Because state laws already exist that require coaches to have extensive ongoing education and continual first aid & CPR training the portions of this law that place additional requirements on coaches would create an unnecessary burden for coaches thus causing some to leave the profession and deter any newcomers. We face a significant shortage of qualified coaches every season; otherwise our CIAC coaching classes each session would not average between 70 and 85 coaches.

Allow our coaches to do what they signed up for - COACH, the more than adequate training to recognize injuries, initiate emergency services and then provide care until these better trained (who see and care for these maladies multiple times a day for a living) individuals arrive on scene. Instead of overburdening our coaches in this manner, support legislation to place at least one certified athletic trainer in each school. These individuals not only possess expertise in the care of athletic injuries, but can play a significant role in their prevention as well as in their rehabilitation when they do occur. They can also take major onus as far as continuing to educate and update their coaching colleagues. Some can save money by combining teaching/coaching positions, and could be a resource for faculty regarding their injuries and those of their loved ones as well as a resource for everyone for medical care. In combination with educated coaches, faculty and supportive and knowledgeable parents, a school district would truly have the best interest of its' students in mind.

I ask you to give extremely strong consideration to these bills as far as what they will actually accomplish. I think that portions of these bills have some merit; however, I do not think all of the 'dots' have been connected nor have all of the right 'pieces of the puzzle' been put in place in order not to do more damage by passing these bills than not passing them. Therefore, I request that you postpone the passing of either of these bills until the aforementioned takes place. Thank you for your consideration of my request.

Respectfully submitted,

David K. Johnson  
Medical Aspects of Sports Injury and Sport Physiology, Instructor  
Coaches Certification Course  
**Connecticut Interscholastic Athletic Conference (CIAC)**

### **III. MEDICAL ASPECTS OF SPORTS INJURIES AND SPORT PHYSIOLOGY**

#### **DISCUSSION TOPICS**

January 5, 2014

General information and introduction

Your Medical Role as a Coach

Game Plan

Anatomy and Sport Injury Terminology

**CONCUSSION MANAGEMENT Certification**

to include: Spinal Injuries

Guest Speaker: **DR. CARL NISSEN**

Injury Evaluation

Respiratory and Circulatory Emergencies

Spine Injuries

Internal Organ Injuries

Sudden Illness

Temperature-Related Injuries

January 19, 2013

Anterior Cruciate Ligament (ACL) Injuries – Cause & Prevention

The Throwing Athlete – Biomechanics & Injuries

Musculoskeletal Injuries

Heat and Cold Therapy

Principles of Rehabilitation

Principles of Training

Individual Differences Among Athletes

Components of Muscular Fitness

Energy Systems

Sports Nutrition

Practical Session: athletic taping ???