The role of the sports physical therapist has changed drastically in the last few years. No longer do we serve just a clinical role in the rehabilitation aspects of the athletes post injury recovery and guide the return to play. Sports physical therapy has now become fully immersed into the variety of topographies that make up the contemporary athlete of today. An interprofessional team of sports medicine healthcare providers assist athletes in all areas of physical and psychological training to be prepared for competition; assess physical abilities and performance technique in order to judge risk of injury and enhance performance; rehabilitate following traumatic and overuse injuries that encumber the athlete’s ability to compete; and manage acute injuries during performance. Yet with all this work being done, there is still more work to do; much more that we can learn every day when working with diverse athletes from a multitude of different sports at all levels of competition.

On June 16, 2020, my life was changed forever when my 16-year-old grandson passed away on a soccer field after collapsing near the end of practice, suffering a cardiac event. I never in my wildest imagination thought that such an event could hit so close to home... to my own family.

Less than two years later, on January 2, 2023, the world watched as members of the Cincinnati Bengals and Buffalo Bills sports medicine teams saved the life of Damar Hamlin - just six miles from the soccer field where Matthew Mangine Jr. participated for the last time as a promising high school athlete.

The difference: in the case of Damar, the members of the sports medicine team were prepared with a properly executed emergency action plan that was practiced and executed with haste and precision in response to a sudden cardiac event. Yet, within this country, the incidence of sudden cardiac death (SCD) of athletes has been reported to be as high as one every three days in competitive sports activities.1,2 It is important to note that reported incidences of SCD vary drastically due to variations in demographic information collected as well as variability in the operational definition of who is an athlete, further complicating how we as sports medicine professional address this cataclysm.

This is an unacceptable dilemma, due to the disparities in access to quality sports medicine care for all athletes of all levels of competition. At the professional and collegiate level, there are checks and balance systems that requires all members of the sports medicine staff to work in unison to avoid catastrophic outcomes. Even with this level of preparation, athletes are still at risk. There is still so much more work to do to safeguard athletes as they train and compete, whether it be on a national stage in front of thousands of fans or in a community park with only the most resolute family and friends present.

Throughout my career as a sports physical therapist I have worked with athletes of all levels of competition – reactional athletes to Olympic medalists. In current practice I serve as senior associate athletic director of sports medicine, physical therapist and athletic trainer for men’s basketball and golf teams at the University of Cincinnati. I also serve as director of an APTA credentialed sports residency program which I have actively participated for many years. Our residents serve side by side with us on the field and court, and train tirelessly to respond to all aspects of athletes’ health
and wellness, including catastrophic emergencies. We do more than just rehabilitate athletes following orthopedic injury.

Sports physical therapists are part of the sports healthcare professional team and should play an integral role in prevention and reduction of catastrophic events such as sudden cardiac death, heat related illness, and other non-orthopedic medical conditions that affect athletes. We must be involved in the prevention, education, and management of all aspects of athletes’ health and wellbeing – meeting the needs of the person/athlete, not solely the management of specific high incidence conditions like ACL and RTC.

Sports physical therapists must participate within the community of sports at all levels, recreational, competitive youth, collegiate, professional, seniors, athletes with disabilities and other special interest groups, to do more than just manage sports related injuries and conditions. We must also be an integral part in the mitigation of sports related injury and illnesses through education and prevention programs. We, as Sports Physical Therapists, need to step up and take on a new role, becoming more involved in the communities we live in to change the focus of sports medicine care from care to the high-profile athlete with the high profile conditions to care of all athletes for all aspects of health and wellbeing.

Sports physical therapists must educate parents, assist in the design of Emergency Action Plans, educate coaches and parents on CPR and AED usage, provide lifesaving equipment, and assist coaches in practicing emergency response. Practicing for a lifesaving event needs to be more than just an annual event, but performed over and over again so it becomes as common place as rehabbing an ACL. We must go out to the fields and on the courts and become advocates for awareness, training, and action plans. We must also prepare others for the future of sports physical therapy through mentoring and leadership programs.

The American Academy of Sports Physical Therapy leadership team must lead the way and approach the future of sports medicine by addressing the needs of those we have trained to and pledged to protect – the athletes. The leaders of today will shape and mold the future leaders of our Academy in the future. Just as residency programs have positively impacted the qualifications and experience level of our members, leadership training and mentorship will provide future leaders of our organization with practical, professional engagement strategies to meet the needs of the organization and all of its stakeholders. Successful leadership training is key to development of leadership succession that will foster consistent growth in membership participation and continued self-assessment to ensure our organization is meeting the needs of not only its members but also those individuals that the members provide care to. This should be the business of the American Academy of Sports Physical Therapy.

We no longer can look at the sports physical therapist as an adjunct to other members of the sports medicine team in the clinical model. Instead, the Academy must be more engaged in the growth and development of our organization’s role to serve its members by providing them with the resources and training needed to be an integral member of a sports medicine team that address all elements of the athlete’s healthcare needs. Quality, evidence-based rehabilitation care following athletic injury is the job of a sports physical therapist, but saving lives through prevention, preparation and education is the responsibility of ALL members of the sports medicine team.

In the current position of the Academy within the sports medicine family, we must focus on increasing membership, providing inclusive engagement opportunities, producing quality educational programming for members, supporting quality research efforts, establishing financial stability, and developing external programs that meet the needs of athletes in our communities. We, as sports physical therapists, must strive to meet these needs in the future for the health and safety of all athletes at every level, specialty interest, and activity engagement.

We are at a crisis in our ability to achieve these goals. In the not-too-distant past, our Academy has failed to lead us in that direction. The current Academy leadership has made significant gains in changing the direction of the Academy and has produced a level of financial solvency, but there is so much more to do. We must approach this crisis with bold moves, effective leadership, complete transparency, and the resolve that we ask of our patients and athletes.
References