One-Year Injury/Illness Profile at a University-Sponsored Youth Summer Sport Camp Program

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Context: Universities commonly sponsor summer youth sport camp programs and hire athletic trainers (ATs) and athletic training students (ATSs) to provide sports health care services. However, a dearth of information exists to describe the incidence of injury/illness for related programs, which would be useful in guiding clinical practice in this non-traditional setting. Objective: This study aimed to describe the injury/illness incidence at a university-sponsored youth summer sport camp program during 1 summer. Design: Descriptive epidemiology. Setting: A large, university-sponsored, summer youth sport camp program conducted 85 camps for 28 sports over a 10-week period during 2012, totaling 344 camp days. Under the direction of the Director for Sports Health Care, ATs and ATSs provided care to injured/ill participants. They used “SOAP notes” designed for the sport camp program to document all instances in which they provided care to participants. Each instance constituted 1 AT/ATS-participant interaction. Medical referrals were documented in a log-book format. Patients or Participants: Male and female athletes ages 7 through 19 years participating at a university-sponsored youth summer sport camp program served as the target population. Camp participant enrollment totaled 8,730, yielding 3,003,120 camper-days. All SOAP notes with a minimum of 1 independent variable and 1 dependent variable were included, totaling 3,199 interactions. Medical referrals totaled 83. Interventions: N/A. Main Outcome Measures: Dependent variables included body part, injury/illness type, and medical referral. Data Collection and Analysis: The data were applied to the National Athletic Injury/Illness Reporting System case report form and coded accordingly. Frequency counts were obtained for all variables. Enrollment was used to calculate the rates of contacts, injuries/illnesses, and referrals per 100 participants. Rates were also calculated per camp day. Injury/illness exposure was calculated in camper-days. Results: The AT/ATS-participant interactions and injuries/illnesses occurred at rates of 36.6 and 15.7 per 100 participants, respectively. Wrestling had the highest interaction rate (93.0/100); golf had the lowest (4.1/100). There were 9.3 interactions and 5.6 injuries/illnesses per day. Injury/illness exposure was 0.5 per 1,000 camper-days. The mean age for injured/ill participants was 14.4 years (± 3.3). The lower extremity was the most commonly affected body part (29.2%) followed by skin (20.6%). Sprains accounted for 12.0% of injuries/illnesses. Medical referrals were made for 4.3% of injuries/illnesses; concussion was the most frequent medical diagnosis (22.9%). Conclusions: The variability in interaction, injury/illness, and referral rates, injury/illness types, and affected body parts between genders and among sports may be associated with known injury risks inherent to each sport. Description of associated injury/illness incidence can allow for evidence-based practice decision, including determining related staffing and supply needs and establishing/strengthening physician-sport camp relationships. Athletic trainers may use this information to facilitate sports health care preparedness for the unique needs of summer youth sport camp programs. Word Count: 450 words