Thursday, April 17, 2024 – 9:30 a.m.
SPORTS MEDICINE ADVISORY COMMITTEE
Video (ZOOM) Conferencing

Members Present:
Kelly Brown, Brighton
Dr. Camy Chapin, Lansing
Candace Cox, Quincy
Dr. Corey Dean, Ypsilanti
Dr. Edwin Kornoelje, Grand Rapids
Dr. Dallas Lintner, Owosso
Jason Malloy, Westland
Brian Osborn, Howell
Kelly Salter, Birmingham
Mitch Smelis, Fenton
Dr. Alyssa Vermeulen, Lansing

Members Absent:
Judy Cox, Bay City
Brian Gordon, Royal Oak
Lauren Wetmore, Gladwin

MHSAA Staff:
Anthony Bihn
Brad Bush
Cole Malatinsky (Recorder)
Kathy Vruggink Westdorp (Recorder)

WELCOME, GENERAL REVIEW AND PURPOSE OF THE COMMITTEE
The MHSAA Sports Medicine Advisory Committee (SMAC) serves as a vital resource to the MHSAA membership, with a dedicated focus on the health and safety of students participating in interscholastic athletics. The goals of this committee include:

1. **Advice and Collaborate** – Provide guidance to the Representative Council, Executive Committee, MHSAA staff, and sport committees on medical and safety matters as they pertain to rules writing, regulations, and policy development in interscholastic sports.
2. **Disseminate Sports Medicine Information** – Monitor, evaluate, and share up-to-date sports medicine practices and research with the MHSAA and its member schools.
3. **Support Educational Initiatives** – Assess existing resources and assist in the creation of new educational tools and materials that promote student-athlete safety.
4. **Promote Risk Management** – Collaborate with sport committees to address sports medicine concerns and help reduce risk for participating students.
5. **Prioritize Research and Policy Development** – Identify, prioritize, and assist in the research of emerging sports medicine issues affecting school athletics.

SMAC remains mindful of the broader mission of the MHSAA and its role in supporting students in grades 6 – 12. The committee is committed to understanding the culture and operations of interscholastic athletics and ensuring that all recommendations align with the educational values of member schools. Additionally, SMAC supports the Representative Council in its thoughtful and deliberate review of proposals, always with the well-being of student-athletes as the central focus.

INFORMATION RECEIVED FROM THE MEDICAL AND SCHOOL COMMUNITIES
Committee members from the medical community reported a particularly active infectious disease season across multiple regions, with significantly higher-than-usual cases of flu, colds, and related illnesses among both children and adults. There is growing concern regarding confirmed measles cases in some communities, prompting increased efforts around disease prevention and vaccination education. Local health departments are also focusing on outreach, especially to transient populations.

Dr. Vermeulen provided updates on the Heart Safe Schools program, including highlights from the January webinar. She also shared information related to potential funding opportunities for the implementation of

Michigan's new state law requiring AEDs at all youth sporting events. However, no funding updates are expected until after the state budget cycle concludes this summer.

Dr. Dean shared his observations on the high incidence of infectious diseases like flu and measles in the community and highlighted the need for preparedness for infectious diseases, particularly measles, in sports settings.

Dr. Chapin noted that while the volume and nature of sports injuries in her practice remain largely typical, she has observed an increase in cases of meniscal tears and ACL injuries this year.

Kelly Brown reported an increase in cases of eating disorders and performance anxiety among students. She also expressed concern about emotional abuse occurring in non-school sport settings, such as club teams and dance programs. Athletic trainers on the committee echoed the earlier reports from the medical community, noting a continued rise in the spread of infectious diseases, particularly gastrointestinal viruses, in certain regions of the state.

WEATHER APP

MHSAA staff presented research on weather and lightning detection applications. Under the current policy, a 30-minute delay is required following any lightning strike or thunder, with decisions based on sight and sound, rather than lightning detection systems. Staff emphasized the need for standardized protocols and shared examples where the current approach has resulted in either unnecessary delays or missed opportunities to pause events when conditions warranted. MHSAA staff is evaluating professional-grade weather apps that provide real-time lightning detection, with the potential to bring a formal recommendation to the SMAC, and then to the Representative Council based on their findings.

HEAD INJURY REPORTING

MHSAA staff presented concussion reporting data from the 2024-25 season. The number of reports for Fall and Winter sports remains largely consistent with previous years. Football continues to lead all sports in reported concussions, with approximately 1,200 reports annually. Notably, competitive cheer experienced a significant decrease, dropping from 115 reports in 2023-24 to 65 in 2024-25. This decline may be attributed to improved tracking methods and recent rule changes aimed at enhancing athlete safety.

EMERGENCY ACTION PLANS

Three instances were highlighted where Emergency Action Plans (EAPs) were successfully implemented and directly contributed to saving lives.

MHSAA staff provided an update on the integration of an EAP template into the MHSAA Golf app's scoring platform, designed to standardize the emergency action planning process while allowing for course-specific customization and efficient updates.

The committee also discussed the continued challenges related to AED availability at off-campus venues, such as golf courses and bowling centers—an issue that helped drive the development of the integrated EAP template.

Additionally, the committee reviewed innovative strategies being used by schools to increase accessibility to EAPs, including the use of QR codes to ensure that plans are posted and readily available to all facility users.

CONCUSSION PROTOCOL

Committee members from MATS (Michigan Athletic Trainers Society) presented proposed updates to the MHSAA Concussion Protocol. The suggested changes would incorporate both Return to Learn and Return to Play components into the policy and expand the list of qualified providers authorized to grant clearance for return-to-play activity.

Currently, only MDs, DOs, PAs, and NPs are permitted to provide such clearance. The committee discussed the potential benefits and challenges of expanding this list. Athletic trainers emphasized their consistent, day-to-

day involvement with student-athletes and the trusted relationships they develop as key advantages. Additional considerations included supervision requirements, varying access to healthcare across school settings, and concerns about the potential for undue pressure on athletic trainers in the clearance process.

The importance of collaboration among all individuals involved in a student-athlete's recovery—physicians, athletic trainers, coaches, students, parents, and administrators—was emphasized as vital to the success of the protocol, regardless of whether any future changes are adopted.

EPILEPSY/SEIZURES

The MHSAA does not have any rules that restrict or prohibit student-athletes with epilepsy from participating in any MHSAA-sanctioned sport. Eligibility is determined in accordance with general MHSAA rules, and participation decisions related to a medical condition such as epilepsy are handled at the local school district level, in consultation with the athlete's parent/guardian and licensed medical provider. As with all student-athletes, schools should ensure that the athlete has a valid sports physical on file, signed by a medical professional, clearing them for participation. For student-athletes with epilepsy, it's recommended that the school coordinate an Individualized Health Plan (IHP) or a Seizure Action Plan with input from healthcare providers and the athlete's family. This helps ensure that school staff and coaches are aware of how to respond in the event of a seizure, and it is considered best practice for coaching staff to be aware of any medical conditions their athletes may have and to be trained in emergency response, including recognizing and responding to seizures.

2024–25 UNIFORM, EQUIPMENT UPDATES:

The following updates and requirements have been provided for the 2024–25 school year. These changes reflect a continued emphasis on player safety and equipment integrity:

2026 Football: Clarification on Tooth and Mouth Protector Attachments

- Any items attached to a tooth and mouth protector that do not serve a protective function for the teeth or mouth will not be permitted.
- Additionally, any features of the protector that pose a health or safety risk to the wearer or other players will also be prohibited.

2025 Field Hockey: Optional Use of Wire-Caged Face Masks During Penalty Corners

- Players are now permitted to wear a wire-caged penalty corner face mask during a penalty corner.
- However, failure to remove the face mask beyond the 25-yard mark will result in a player misconduct penalty.

2024–25 Ice Hockey: Mandatory Neck Laceration Protectors

- All players are required to properly wear a neck laceration protector, which must remain unmodified from its original manufactured condition.
- The protector must be worn as intended by the manufacturer.
- Note: Michigan has had this requirement in place since 1999.

MULTI-SPORT PARTICIPATION:

A summary of the Multi-sports Participation Survey, which was conducted last spring for the 2023-24 school year, was provided. The survey showed, for the third consecutive year, that nearly 45 percent of athletes at member high schools participate in more than one sport, while the entirety of the study continues to show that percentages of multi-sport athletes for all four classes have grown during the six years this topic has been studied in this way.

Early and intense sport specialization has become one of the most serious issues related to health and safety at all levels of youth sports, as overuse injuries and burnout among athletes have been tied to chronic injuries and health-related problems later in life.

For 2023-24, 47.6 percent of male athletes and 41.4 percent of female athletes played multiple sports. Class D enjoyed the highest percentage of multi-sport athletes over all six years of surveys, this time at 63.1 percent, followed by Class C at 59.4 percent, Class B at 48 percent, and Class A at 38.2 percent.

RESOURCES:
Committee members were provided with several mental health resources and *NFHS HS Today* articles involving sports medicine, all of which were published after the October 2024 meeting.

THANK YOU:
The committee was sincerely thanked for their dedication and service during their term on the MHSAA Sports Medicine Advisory Committee**.** Originally formed in the 2020–21 school year**,** the committee played a critical role in navigating the unique challenges presented during the COVID-19 pandemic. Members were recognized for their conscientious, thoughtful, and collaborative decision-making, which has positively impacted student-athlete health and safety across the state. Several current members will continue serving as the committee moves into its next term. The April 2025 SMAC meeting adjourned at 11:15 a.m. on Thursday, April 17, 2025**.**

2025-26 MEETING DATES
The 2025-26 meeting dates are Thursday, October 23, 2025, and Thursday, April 16, 2026.