

HEALTH & SAFETY TIPS

Getting Ready to Play:

- Be sure to have the proper shoes, ones that support your feet and are designed for court sports.
- Give any existing injury plenty of time and rest to heal before you resume play.
- Know how to get help quickly if you or a co-player are hurt or develop a medical problem. Is there a telephone, a first-aid kit, and an automatic external defibrillator (AED) nearby? Do you have the phone number available of someone to call in case of emergency?
- Be aware of any obstacles in the area that you might run into or trip over, such as benches or gym equipment.
- Never play on a wet court; they are extremely dangerous. One way to check a damp court surface is to press your toe down firmly and make a twisting motion. If you leave an obvious “wet” spot it’s too wet to play.
- Check with your doctor regarding exercise and any physical conditions that exist or may have previously existed.

BEFORE PLAY

Injury Prevention is Key

Warm-up:

- The main purpose of a warmup period is to raise the general body temperature prior to playing. When the body temperature is raised it will increase your ability to perform stretching exercises. The warmup period should be approximately 5 minutes. Try a fast walk to the pickleball courts, riding a bike, or treadmill. These are just a few examples of a total body warmup.

Stretching:

Following the warmup period, begin a stretching program. This will increase your flexibility, which allows for better performance and decreases the possibility of injuries. The muscles/joints that need to be stretched are:

- Ankles
- Achilles tendon
- Calf muscle
- Quadriceps (front of upper leg)
- Hamstrings (back of upper leg)
- Groin
- Low back
- Shoulder and arms.

Start with the ankle stretch and work up toward the shoulder/neck area. For each muscle group, a place that group “on stretch,” the point at which you feel the stretch, and hold it for 10-15 seconds. Relax and repeat 3-5 times.

Eye Protection:

- While hollow and lightweight, the ball used in pickleball is a hard polymer and can travel at a very high rate of speed. The use of proper eye protection is highly recommended for all players.

Proper Footwear:

Comfortable court shoes are a must; sneakers or running shoes do not supply the right kind of support for the side-to-side action inherent in pickleball. From FootCareMD:

- If possible, purchase athletic shoes from a specialty store. The staff will provide valuable input on the type of shoe needed for your sport as well as help with proper fitting. This may cost a premium in price but is worthwhile, particularly for shoes that are used often.
- Most court sports require the body to move forward, backward and side-to-side. As a result, most athletic shoes used for court sports are subjected to heavy abuse. The key to finding a good court shoe is its sole. Tennis [pickleball] players need a shoe that supports the foot during quick side-to-side movements or shifts in weight. A shoe that provides stability on the inside and outside of the foot is an important choice. Flexibility in the sole beneath the ball of the foot allows repeated, quick forward movements for a fast reaction at the net.
- Try on athletic shoes after a workout or run and at the end of the day. Your feet will be at their largest.
- Wear the same type of socks that you will wear for that sport.
- When the shoe is on your foot, you should be able to freely wiggle all of your toes.
- The shoes should be comfortable as soon as you try them on. There is no break-in period.
- Walk or run a few steps in your shoes. They should be comfortable.

DURING PLAY

- Learn to return lobs correctly. Never back up on your heels. Instead, turn around and go back to get to the ball. Serious head injuries can occur if you fall backward.
- During play, if pain occurs, stop playing and ice the area of pain. Continuing to play will likely aggravate your problem.
- Age, experience, physical condition, and athletic ability will impact the level of your game. Don't try to make plays beyond your abilities.
- Be sure to drink water, replenish electrolytes and eat appropriate snacks. You need a balance of electrolytes and food to prevent dehydration. Symptoms include dizziness, weakness, fatigue, an irregular heartbeat, and fainting.

Head Injury:

- The most common head injury of concern is a concussion. A concussion is a traumatic brain injury that interferes with normal brain function. A pickleball player does not have to lose consciousness to have suffered a concussion.

AFTER PLAY

Cool Down

- After playing, you may want to do a little stretching or take a slow walk home. This will help lower your body temperature and bring your heart rate slowly back to normal.

Possible Pickleball Injuries:

- Ankle Sprain: A strain involves a ligament and most commonly occurs on uneven terrain, stepping on a stray ball or another player's foot. The pain is usually felt on the outside of the ankle and there may or may not be immediate swelling. Swelling is not a sign of severity.
- Achilles Tendon Strain: (back of the ankle) This involves a tendon or muscle group; the most common cause is a stop-and-go action or a sudden change of direction. This injury is very common in people over age 40. There is a sudden snapping feeling or a pain like being hit in the back of the leg. A rupture is obvious. There will be an indentation in the Achilles tendon area. The person cannot walk and needs immediate attention.
- Heel Bruise: Pain occurs on the bottom of the heel with every step. This is considered an overuse injury and usually occurs over a period of time. The best treatment is rest and using a heel cup or donut during play.
- Knee Strain: A sprain occurs by twisting or rotation of the knee. The most common is a medial collateral sprain and the pain is on the inside of the knee, just to the side of the knee cap.
- Hamstring, Groin or Quad Strain: The most common is a hamstring strain, generally caused by overextending or reaching to return a ball. Again, the most serious will show a sign of an indentation where the tear occurred.
- Wrist Fracture: The most common cause is going backward for a ball, falling and landing on an extended arm. Learning to roll out of a fall and not extending your arm to land can help avoid this injury.
- Shoulder Strain: This is often caused by overuse, too many overheads, playing too long, etc. It can also occur on a single overhead smash in which the rotator cuff muscles (top of the shoulder) are strained.

Treatment:

- Ice Therapy: There is a misconception that you use heat for strains and ice for sprains. Not True! Use ice for immediate treatment of injuries. Ice, compression, and elevation should be used first for all injuries. Apply ice for a minimum of 15 minutes or until numb. Remove until the feeling is back and then replace the ice. Remember ice, compression, and elevation for a period of 24-72 hours.
- Heat?: Heat should never be applied immediately to an injury (sprains or strains). It should only be applied after 24-72 hours.
- Professional Care: It is always best to seek the advice of a doctor for any injury, especially for fractures, head injuries, eye injuries, 3rd-degree sprains, and strains, etc. Call 911 for any serious injury.

Special Needs:

- Never start playing without wearing prescribed braces or supports.
- Know your exercise limits and be sure to tell co-players what they are. If you have a history of heart problems, back pain, tennis elbow, breathing problems, etc. be sure you have any equipment or medicines at hand.

CONCUSSION PROTOCOL

The purpose of this is twofold:

1. To help safeguard pickleball players by educating them, tournament and event officials, and parents and guardians of players who are minors about concussions
2. Recommending that a pickleball player be removed from play when a concussion is suspected and requiring a licensed health care professional to provide clearance for the player to return to play or practice.

This concussion protocol applies to pickleball play occurring in any USA Pickleball Sanctioned Event. However, the potential for harm from concussions is a serious matter and pickleball players are well-advised to follow this protocol in all situations where they suffer a potential concussion.

Concussion Signs and Symptoms

A concussion is a traumatic brain injury that interferes with normal brain function. A pickleball player does not have to lose consciousness to have suffered a concussion. Signs and symptoms of a concussion include the following:

Signs Observed by Others	Symptoms Reported by Player
Appears dazed or stunned	Headache or "pressure in head"
Appears confused	Nausea
Balance problems or dizziness	Balance problems or dizziness
Is unsure of game, score, opponent	Sensitivity to light or noise
Moves clumsily	Double or fuzzy vision
Answers questions slowly	Feeling sluggish or slowed down
Loses consciousness (even briefly)	Feeling foggy or groggy
Shows behavior or personality changes	Does not "feel right"
Can't recall events prior to hit or fall	Concentration or memory problems
Can't recall events after hit or fall	Confusion

REMOVAL AND RETURN TO PLAY

Summary

If you suspect that a player has a concussion based on the above signs or symptoms of a concussion, take the following steps:

- Remove the player from the event.
- Recommend that the player be evaluated by an appropriate health care professional. Do not try to judge the seriousness of the injury yourself.
- If a minor, inform the player's parents or guardians about the known or possible concussion and give them details about the suspected concussion.
- Allow the player to return to play only with a medical release from an appropriate health care professional.

Removal

Any player who exhibits signs, symptoms, or behaviors consistent with a concussion will be immediately removed from the game or practice and will not return to play until cleared in writing by a licensed health care professional. If a health care professional is not immediately available at the athletic event or practice and an injured player has any of the described signs, symptoms, or behaviors of a concussion, s/he should be promptly taken to a facility for appropriate medical evaluation and care.

A player must be immediately removed from a game, whether in a competitive or recreational setting if one of the following persons believes the player might have sustained a concussion during the competition or practice:

- The player himself or herself;
- A tournament official;
A physician;
- If a minor, the minor's parent or guardian or another person with legal authority to make medical decisions for the minor;
- A tournament official; or
- A supervisory representative of the venue where the game is being played.

Return

A pickleball player removed from competition or recreational play setting may not be permitted to practice or compete again following the force or impact believed to have caused the concussion until:

- He or she has been evaluated by a health care professional (chosen by the player or, if a minor, the minor's parent or guardian) or an athletic trainer or another medical professional working under the supervision of a physician;
- The treating physician or other licensed healthcare professional has provided a written statement or release indicating that, in his or her professional judgment, it is safe for the player to return to play; and
- The player (and the parent or guardian if a minor):
 - acknowledges completing the requirements of any return-to-play protocol set by his or her health care provider and being informed of the risks associated with returning to play, and
 - consents to returning to play in accordance with the "return-to-play" protocol.