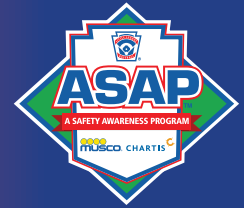


ASAP news



Continuing the Little League tradition of making it "safer for the kids."

NATIONAL WINNERS NAMED

2009 National ASAP Safety Plan Winners

WEST REGION

Redrock Little League, Las Vegas, Nev.

Valerie Walton, president
Janet Yee, safety officer

Rancho Niguel Little League, Laguna Niguel, Calif.

Ray Palucki, president
David Brouwer, safety officer

Pasadena, Calif., American Little League

Shannon McConnell, president
Marcus McDaniel, safety officer

Mill Creek, Wash., Little League

Ed Lundberg, president
Lorene Wiggins, safety officer

Tustin Eastern Little League, Tustin, Calif.

Nina Robinson, president
Lisa Kormos, safety officer

San Clemente, Calif., Little League

Mark Murphy, president
Jon Brannon, safety officer

Continental Little League, Walnut Creek, Calif.

Tony Calero, president
Jim Rudy, safety officer

Benicia Little League, Benicia, Calif.

Jon Wood, president
Mike Palmer, safety officer

CENTRAL REGION

Hopkins, Minn., Area Little League

Michael Pavelka, president
Lisa Pavelka, safety officer

Warren Township, Ind., Little League

Phil Dance, president
Bob Kaplar, safety officer

Mishawaka, Ind., Little League

Tom Demonia, president
Randy Ziegert, safety officer

Riverfield Little League, Anderson, Ind.

Darrell Smith, president
Troy Abbott, safety officer

Taylor, Mich., Northwest Little League

Lanny Hall, president
David Harris, safety officer

EAST REGION

Big Pocono Little League, Tannersville/Reeders, Penn.

Mark Nayman, president
Michael Pal, safety officer

Bayonne, N.J., Little League

Glenn Regan, president
John V. Hennessey, safety officer

Clymer, Penn., Little League

Carrie McCunn, president
Paul McCunn, safety officer

West Shore Little League, Staten Island, N.Y.

Nick Sansevero, president
Daniel Tompkins, safety officer

Massapequa International Little League, Massapequa, N.Y.

Mike DiTrani, president
Thomas Soriano, safety officer

Felton, Del., Little League

Betsy Cooper, president
Jeanne-Marie Berardicelli, safety officer

SOUTHWEST REGION

Odem Little League, Odem, Tx.

Joe Cass, president
Tom Vela, safety officer

Rose Capital West Little League, Tyler, Tex.

Randy Womble, president
John F. Priddy, safety officer

Goliad County, Tex., Little League

Ida Cortinas, president
Jami Billings, safety officer

So. Austin, Tex., Optimist Little League

Rick Castaneda, president
Thomas Esparza, safety officer

Oak Ridge Woodlands Area Little League, League City, Tex.

Todd Hunter, president
Bill Christian, safety officer

SOUTHEAST REGION

Lewis Little League, Weston, W.V.

Tom Hall, president
Debbie Murray, safety officer

Southside Little League, Fort Lauderdale, Fla.

Toni Faillace, president
Robin Terrill, safety officer

Capital Midwestern Little League, Charleston, W.V.

David Russo, president
Nick Fitzwater, MD, safety officer

Delray Beach, Fla., American Little League

Terence Thomas, president
Reggie Dobard, safety officer

Thompson Little League, No. Grosvenordale, Conn.

Dan Durand, president
Shawn Brissette, safety officer

Great West Melbourne Little League, West Melbourne, Fla.

Rory Dittmer, president
Van R. Jackson, safety officer

- National Winner
- 1st Place Winners
- 2nd Place Winners
- Honorable Mention

In 2009, ASAP set a new record in its 15th year. Over 85 percent of all leagues submitted a safety plan, helping to create a safer environment for the players, volunteers and spectators attending Little League events. That's huge! Thanks to all the leagues who made safety a priority this year!

The winning leagues and key people helping to raise safety awareness in their leagues are shown on the map above.

Congratulations goes to Big Pocono Little League for putting together the best overall safety plan in the country. Each region saw growth in participation of safety planning. The minimum requirement for DAs to be selected to the Little League International Board of Trustees from those regions eligible now rises to 85% league participation.

But we need all leagues to look at their injuries every year and ask that toughest of questions, "What can we do better?" Only through

improvements can we continue to reduce injuries around the country and help protect everyone involved in the program. Equipment changes like the new disengageable-anchor bases can only do so much.

Training, especially of new volunteers and younger players, is key to increasing safety awareness and reducing the potential for injuries, both in number and severity. The trend in injuries is still down, with fewer injuries occurring, although we can still improve.

Weather it's Safe to Play?

Don't Strike Out Against Deadly Weather – 'See It, Flee It; Hear It, Clear It' for Lightning; 'Just Cool It' for High Heat

This is the time of year for making improvements to your safety plan. A key component of that effort should be preparing the training for your volunteers on hazardous weather. Take time this off-season to prepare handouts, signs and general weather policies for your league to follow next year when the regular season begins again.

Make it Easy

When storms roll in, do your volunteers know what to do? Rain is not necessarily a reason to stop play. But add lightning to the storm, and even if it isn't raining, you need clear instructions to ALL people to leave your fields and find a safe place to wait until the storm passes or the game is rescheduled.

The quick and easy approach for lightning is "if you see it, flee it; if you hear it, clear it." Lightning can travel up to 10 miles from the storm's edge, so if it is seen or heard, the fields should be cleared and the game paused to wait for the lightning to pass. If lightning is not seen for a reasonable time (usually 30 minutes), the game can continue. Players should be instructed to stay until the game is cancelled, so all players are accounted for while a game is in storm delay.

Have clear instructions for high heat and humidity, too. Playing in the hot sun without water breaks or cool shade for players to escape the sun's heat between defensive innings is a recipe for disaster. Children do not dissipate heat as well as adults do. But you can protect your players from the heat by instituting water breaks, shade covers for dugouts, 5-10 minute breaks between innings and misters/sprinklers/cold cloths to help cool players down. And make sure players are drinking plenty of water or sports drinks *before* they get thirsty.

Take Out the Human Factor

For storms, use electronic detectors, whether those that detect actual lightning strikes (Sky Scan®) or that detect the potential for lightning (Thor-Guard®), to eliminate guesswork; having a sensor allows the umpire to keep his eyes on the game and not the sky. Too many games are played under approaching

storms because an umpire had his back to a lightning strike. Consider purchasing a lightning detector this fall to have a consistent limit to how close lightning gets to your games before the field is cleared.

Waiting for a storm to pass on the field or in an open area around the field(s) is NOT acceptable, especially for players who don't know any better, and your league needs to set expectations that at the least people will wait out the storm in their cars with the windows rolled up. If an enclosed building is large enough for the teams and spectators to go inside to wait, that is even better.

Keep it Posted

Signs posted around your facility are a great way to remind people of what to do in an emergency. When time counts, simple reminders can help everyone follow the correct procedure. It's amazing how parents and players can help remind coaches of the proper response to a weather situation, when they are given the information. Provide handouts of the signs to coaches and other volunteers during their preseason training on safety policies. Make sure your umpires receive the same training and information, as they are the league's agents for proper halting of games in progress.

Follow Your Procedures

No one should be allowed to ignore the warnings of umpires, board members or other authorized league representatives to follow safety procedures. Too much is at stake to allow anyone to not heed warnings, even if they want to take responsibility for doing so. Your league needs to protect people in spite of themselves. You don't allow catchers not to wear their helmets because they don't want to; make sure everyone understands these rules are for their protection and must be followed.

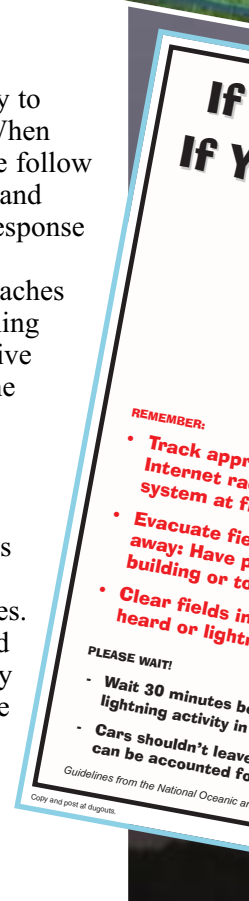
Put up Posters, Signs to Educate About Lightning

NOAA National Weather Service – <http://www.lightningsafety.noaa.gov>

Little League's Lightning Safety – http://www.littleleague.org/Learn_

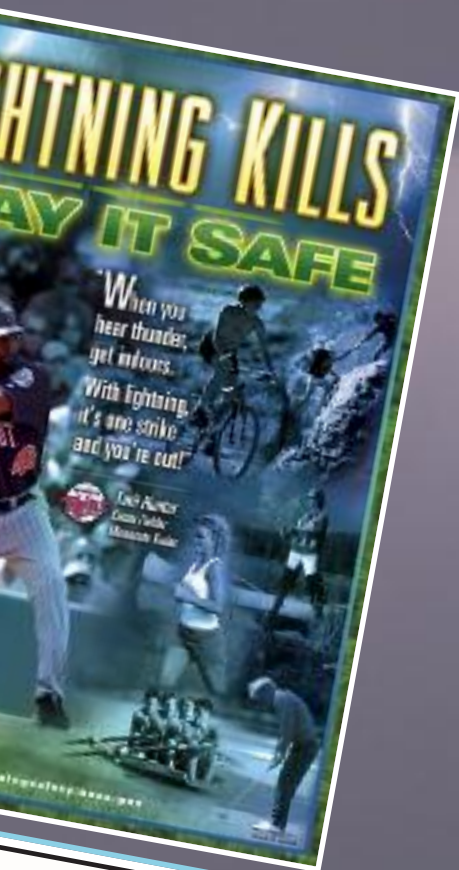
'See It, Flee It' ASAP Poster, NOAA 'Coaches Guide to Lightning Safety

ASAP Safety Procedures Examples (Requirement 10) – <http://www.littleleague.org>



Don't Rely on Experience for Storms

People Routinely Avoid Lightning Strikes, but Lightning Deaths Show Tragedy of This Error



You See It, Flee It;
You Hear It, Clear It



Approaching storms the best way possible:
Check radar websites, dedicated storm warning
apps, field, or other storm warnings

Evacuate fields when storms are about 10 miles
away. Players and spectators go to enclosed
buildings or cars with windows rolled up
immediately after thunder has been
clearly seen!

Do not return to play after last sign of
storm in your area
until the game is called, so all players
are safe.

Adapted from the National Weather Service
and the National Oceanic and Atmospheric Administration's (NOAA) National Weather Service

Earlier this year, tragedy struck in Virginia when a Little Leaguer was killed by lightning, and another boy was severely injured. This tragedy underscores what experts know: people cannot use their lifetime of experience in storms as a gauge for their safety. Just because you have never been struck does not mean you cannot be.

Two Little League players in Virginia were injured, one fatally, when they were struck by a lightning bolt while playing catch in early June. According to news reports, the youngsters were playing catch on their league's baseball field after their game had been halted. The fields cleared by the umpires due to the threat of lightning, although no rain was falling at the time of the lightning strike.

Lightning a Top Threat

While this was a huge heartbreak for the Little League family, annually lightning is one of the top weather-related killers of people in the US after heat and flooding. And most of those killed by lightning are just trying to enjoy the outdoors or continue whatever they had been doing. Do you have procedures to avoid a similar tragedy?

In some cases, lightning strikes are catastrophic without being fatal. A Georgia football player was struck and seriously injured by the first reported lightning strike of a local storm on

Aug. 12 in Belleville, Ga. Sheriff Randall Tippins was reported in local news as saying a 14-year-old was in critical condition after being hit by a lightning bolt that came out of nowhere. A defibrillator was used along with CPR by his coaches to resuscitate the player until an ambulance could arrive.

Storms Can Kill

Although recent years have seen reduced fatalities from lightning, according to the National Weather Service in 2009 lightning has claimed 27 victims across the nation to mid-August, many seeking shelter from the storm that killed them. Others were just going about their normal lives:

⚡ In early August, a 53-year-old Pennsylvania man was killed by lightning while trimming bushes in his yard.

⚡ On July 27, a 49-year-old man was killed while jogging on a beach in North Carolina.

⚡ A 14-year-old girl from Minnesota was playing outside in the rain in her front yard when she was hit and killed by lightning on July 21.

⚡ Others were doing yard work, taking out the trash, walking, clearing brush, golfing, fishing and playing soccer.

Remind people in your league that lightning can kill, no matter how lucky they have been in the past in avoiding it.

Lightning, Heat Risks – Follow these links to the examples above and some other top lightning and heat injury info online:

NOAA Watch (formerly StormWatch) – <http://www.noaawatch.gov/>

Learn More/programs/asap/lightning.htm

'Safety,' or 'Drink Before You're Thirsty' ASAP Poster – http://www.littleleague.org/Learn_More/programs/asap/safetyposters.htm

http://www.littleleague.org/Learn_More/programs/asap/SafetyRequirementsExplained.htm

Learn, Teach the D



*Improve dialog
between
coaches,
players and
parents to
catch arm
injuries earlier.*

You can't be part of baseball and not worry about players' throwing arms. Stories of high school pitchers undergoing surgery to repair damage from overuse injuries are now common, and the micro-traumas responsible likely started before they even took the mound in high school.

Dr. James Andrews brought his message of pitcher protection to the Little League Baseball World Series this year, as part of the unveiling of a new national concern for baseball pitchers' arms.

Recognize Signs Early

If coaches are to avoid overuse injuries, they need to know how to recognize the signs of a developing problem. According to the USA Baseball Medical and Safety Advisory Committee report, "Preventing Overuse Injuries in Youth Baseball," overuse injuries are caused by repetitive stresses on the muscles and supporting structures of youngsters that are not given sufficient time to heal after pitching.

In the study "Elbow Injuries in Young Baseball Players," published in *The Physician and Sportsmedicine*, the damage starts innocuously:

- **Arm Fatigue** – first sign of impending injury;
- **Local Soreness** – if an injury is developing this will follow fatigue; and
- **More Severe Pain** – persisting into the next day (or longer) after initial pain.

A more erect delivery, poor arm positioning/low elbow height, poor or no follow-through, and improper foot positioning are some signs a coach can use to recognize fatigue in the pitcher. Coaches cannot count on the player to tell them when the player's arm is fatigued.

Additional studies have shown that when youth pitch with arm fatigue, they have a much higher risk of surgery later in their careers.

Wear, Tear Progresses Over Time

Many times, a pitcher coming to him requiring surgery will have years of accumulated damage, as the micro-

tears from individual, distinct traumas that never healed properly, Dr. Andrews cautioned. "The coaches say, 'I've never seen a youth injured under my watch,'" Dr. Andrews explained of these early, un-rehabilitated injuries. "You didn't see [an injury], but it saw you."

Authors of "Elbow Injuries in Young Baseball Players," James Whiteside MD, Dr. Andrews and Glenn S. Fleisig Ph.D., wrote that a player may initially indicate an arm injury by saying his arm is "stiff," or he has difficulty "getting loose" or the player may not say anything, and the injury may demonstrate as inaccurate throws producing more pain or other symptoms.

The authors warn that according to their research, players usually only seek medical attention when arm pain impairs the player's throwing or hitting ability. Players recounted that local soreness in the arm began after repeated hard throwing but went away after rest, only to flare up again during throwing.

Ask Player if Pitching is 'Off'

"Coaches and parents can help prevent more serious injuries by investigating when players exhibit abnormal mannerisms while fielding, throwing or batting," the report states. And if the player waits for the injury to be determined a clinical diagnosis, meaning a separation is developing between key parts of the elbow, the amount of time needed for the arm to heal is often season ending, if not worse. Catching the injury early is imperative.

The new position statement on pitching suggests pitchers throw no more than 1000 pitches per season and stay within the limits imposed by their league per game. It also recommends against pitching on more than one team with overlapping seasons.

If a pitcher's arm doesn't get time off from competitive throwing, the stresses put on the pitcher's arm – the micro-tears – could combine to the point that a single throw can cause damage requiring surgery to repair.

Dr. Andrews explained that often pitchers talk about a pop or snap sound in their arm as the injury occurs. But that throw was just "the straw that broke the camel's back," and not a single event that caused injury. "I've said for years that we take better care of our professionals than we do our youth players," Dr. Andrews said in issuing the pitching guidelines. "Those injuries [of older pitchers] don't begin at 26 years of age."

Communicate Outside Pitching

"The number one thing that is becoming more apparent and more of a problem is travel ball, where we have no control over what they pitch. They play Little League on Friday night, and then go... play in a travel league on

Dangers of Overuse Injuries

Friday, Saturday, Sunday, and pack as many games in as they possibly can. And we don't know what they do in these travel leagues. So they come back and pitch, following our rules, after four days rest, but they've already been in a travel ball league where you have no control over what they do," he stated. This leads to arm fatigue and injury, even though the player has met Little League's pitch count requirements, he cautioned. So the coach needs to communicate with the players who are in multiple leagues about when they pitch. The player should alert their travel ball team coach on pitching they've done in Little League, prior to an outside tournament as well.

Treatment and Rehabilitation

The study suggests coaches can follow some simple advice to help reduce the inflammation that hastens the onset of the development of the damage to throwers' elbows: ice. Apply ice for 15 minutes per hour for three or four hours after hard throwing to protect the muscles of the arm, either shoulder or elbow or both. If soreness

develops, take it to the next step: RICE – Rest, Ice, Compression, Elevation. (See page 8 for more.) That can mean stopping play for the player to rest the muscles, either for a few days or longer. Go see a sports physician at the first signs of arm injury to determine the correct course of action, whether simple rest and anti-inflammatory actions (ice, medication) or more extensive treatment.

"Some people criticize the pitch counts," Dr. Andrews stated. "Baseball is a developmental sport, and the players need to start early to learn it. Encourage throwing, but not *competitive* throwing. Year-round competitive throwing is the problem."

Dr. Andrews, medical director at the American Sports Medicine Institute in Birmingham, Ala., is the first surgeon to perform ulnar collateral ligament reconstruction, or, as it is better known, Tommy John surgery. In 2008, he was elected as the 23rd member of the Little League International Board of Directors.

Pitchers Need Rest in Season, Time Off Between Seasons

The American Sports Medicine Institute has issued a position statement to help educate coaches, players and parents about the risks of baseball pitching, and the ways to pitch more safely. Dr. James Andrews, medical director for ASMI, issued the following statement at the Little League Baseball World Series in Williamsport, Pa.

Position Statement for Youth Baseball Pitchers, August 2009

With the rise in elbow and shoulder injuries in youth baseball pitchers, the adult community needs to take steps to prevent these injuries. Research points to overuse as the principle risk factor. Poor pitching mechanics also contribute to injury risk. Another suggested risk factor is poor physical fitness.

Throwing curveballs has been suggested as a risk factor, but the existing research does not support this concern. However, a youth pitcher may not have enough physical development, neuromuscular control and proper coaching instruction to throw a curveball with good mechanics. Throwing curveballs too early may be counterproductive, leading to arm fatigue as well as limiting the youth's ability to master fastball mechanics.

Thus, the recommendations for preventing injuries in youth baseball pitchers are

- Watch and respond to signs of fatigue. If a youth pitcher complains of fatigue or looks fatigued, let him rest from pitching and other throwing.
- No overhead throwing of any kind for at least two to three months per year (four months is preferred). No competitive baseball pitching for at least four months per year.
- Follow limits to pitch counts and days rest.
- Avoid pitching on multiple teams with overlapping seasons.
- Learn good throwing mechanics as soon as possible. The first steps should be learned, in order: 1) basic throwing, 2) fastball pitching, and 3) change-up pitching.
- Avoid using radar guns.
- If a pitcher complains of pain in his elbow or shoulder, get an evaluation from a sports medicine physician.
- Inspire youth pitchers to have fun playing baseball and other sports. Participation and enjoyment of various physical activities will increase the youth's athleticism and interest in sports.



Curveballs, Catchers and Fatigue

Research needs to continue on links between overuse injuries and two hottest topics.

New research suggests that curveballs aren't as dangerous as some in the medical field have suggested, with stresses similar between the curveball and fastball. But let's not be so quick to accept curveballs for youngsters, warns Dr. James Andrews, orthopaedic surgeon and baseball injuries researcher. Add to that concern that catchers are joining the growing trend of patients seeing orthopaedic surgeons needing to repair their injured arms.

Dr. Andrews stated that while the most recent studies "can't show in the lab that the curveball causes more damage" than the fastball or other pitches, he does not advocate teaching or throwing curveballs until a player's arm is close to fully developed, at age 13 to 15.

Fatigue Still the Key Risk

"We still believe the two major pitches to throw... are the fastball and the change-up," Dr. Andrews said. "My personal opinion is fatigue is ... the highest risk factor in youth baseball related to injuries. If you can prevent fatigue, then you will have done 95% of what you can do to keep these kids healthy."

"So how does the curveball interact with fatigue? If you are playing competitively... they want to win, and the curveball is a major factor" in winning games, Dr. Andrews said. "Fatigue comes from the inability of a young player to throw the curveball properly with good mechanics. That's the whole key."

Dr. Andrews stated he does not call curveballs "safe" for younger players. "However, if you throw the curveball with good mechanics, there are no greater forces on the shoulder or elbow than throwing the fastball, apparently, from what we can measure in the lab."

He also explained that throwing a curveball requires a great deal of control, and "is not an easy pitch to throw, and certainly not everyone can throw it properly."

Teach Proper Curveball Mechanics

And teaching good curveball mechanics is important, no matter what age, he said. "Do we have knowledgeable coaches teaching these kids the curveball?" Dr. Andrews asked. "We've got to be really careful. When you put a kid in a competitive situation, a championship series, and call for 70% curveballs, what's that going to do to the fatigue factor? Remember, it's a highly neurologically controlled pitch: if the mechanics get off because you're fatigued, and throwing 70% curves, then we're in trouble. So be careful throwing curveballs." Dr. Andrews repeated the caution

from the position statement, that "throwing curveballs too early may be counterproductive, leading to arm fatigue as well as limiting the youth's ability to master fastball mechanics," he said. "In theory, don't throw curves till you can shave."

Catchers at Increasing Risk

When the most talented and athletic players are catchers, a coach's natural desire is to make that player a pitcher, too. But Dr. Andrews warned that catchers, good catchers who are mirroring every throw from the pitcher as well as being asked to throw long, fast, accurate throws to first, second and third bases are at increased risk of arm fatigue and subsequent injury.

"We're seeing a lot of injuries with catchers. I had a catcher come in from Atlanta, and I did surgery on him. I asked him how he got hurt. He's 15 years of age, and he's not supposed to have an injury [at that age]; but believe me, they're out there all over the place in that age group," Dr. Andrews stated.

He said the player was at a showcase and was asked to throw 100 throws in 200 seconds. Throwing a ball from home to second in 2 seconds is a good throw; and the organizers were timing the catchers on the total they could throw down in 200 seconds. "So he would throw as hard as he could throw, and then reach and they'd put a ball in his hand and do it again, to see how he fell off, what kind of stamina he had," Dr. Andrews related. "And about the 50th throw, he tore his ligament.

"Now that particular situation was almost criminal, and unfortunately what might happen down the road is it might become a criminal offense," he added. "So the timing is right to get this under control, before the federal courts and the state courts and the lawyers get it under control."



Too Busy for Warm-ups and Exercises? Don't Be.

To avoid player injuries, make sure coaches have a game plan to prepare their players to play.

Are your coaches so busy working their players on skills development that even stretching gets “left for later?” Your players may be suffering for it. Proper warm-ups and conditioning activities can help to protect your players from injury.

Research has shown that players who are less physically fit – whether in aerobic fitness, flexibility or core strength areas – are at a much greater risk of being injured doing the same things as their peers who are in better condition.

Fitness Shows Injury Potential

A study of US Army recruits going through basic training found less-fit recruits were injured at twice the rate of their more fit companions, and 2.5 times as likely to be so seriously injured that they missed training. The less-fit recruits were more often women, but when the initial fitness levels were used to classify all the recruits by ability, rather than gender, the injury rates became consistent for both males and females, based on their fitness.

In ball playing, the injuries may be slight, a simple muscle strain or joint sprain, such as a pulled thigh muscle or sprained ankle, or they could be acute, from a fall due to poor motor control or weak muscles unable to stabilize the athlete during a fielding attempt. In either situation, stronger muscles are at lower risk of injury.

The good news is that during the study, for all recruits, the less-fit saw

bigger gains than their more-fit peers, as a percentage of gain. So the gap in physical fitness can be closed to make all the athletes safer.

Warm Up Before Playing

Numerous experts and studies continue to assert the benefit of pre-event warm-ups and post-event cool-down exercises. In addition, players and coaches can't expect playing the sport will do enough to prepare the less-fit players for play. Conditioning is just that, and players need to do conditioning exercises to prepare their bodies for the stops, starts, quick turns and full runs ball playing requires.

The benefit of warm-up exercises is not just for the increased muscle flexibility and tone that protects muscles from strains and ligaments from sprains but the increase in oxygen flow to the body, preparing it for the demands of the game.

Make the exercises match the demands of the sport: sprints should be worked on above distance running. Provide shoulder stretches and arm limbering as well as core and lower body warm-ups. Speed, quickness and coordination count for more than endurance; balance drills promoting foot and hand speed and coordination with more traditional exercises.

Start early with conditioning and build gradually to increased conditioning demands. Players' bodies need time to adjust to the

physical stresses and build muscle mass and tone to be able to handle the loads of throwing long strikes from center field or sliding into home plate. The muscles that move the body also support and protect it, so the stronger those muscles, the less likely a serious injury will occur from a “normal” baseball or softball play.

Finally, Keep it Fun

Find ways to keep your practices fun like making sprints be base-stealing attempts. Alternate trips around the bases for warm-ups with “the home run trot,” and for speed or endurance with “you're going for an inside the park home run!” Have throwing races between different groups of players for short distances, to work on muscle tone, accuracy and technique.

The players will enjoy it more with just a little time spent working on making the *why* they need to do it a fun activity, instead of saying “it's good for you” or “because I told you to!”

Because a fit player is less likely to be injured, it's worth the extra time and effort to improve everyone's physical fitness.



PRICES: Keys to Protecting Player's Health

When athletes feel pain or fatigue, start healing faster with PRICES.

The basis for repetitive stress injuries is in the name: repetitive stress. When you see players, especially pitchers and catchers, dropping their elbows when throwing, holding their arms, elbows or shoulders after throwing, or especially if they express any pain, have them take a seat. Rest is the highest priority when players' arms start to be fatigued.

Rest is always good for athletes who may have an injury and is a main component of PRICES a simple acronym to help remember the basics of first aid.

PRICES begins with **Protection**. When a player feels pain or just "something wrong," he or she should stop immediately and protect the area from further harm. If a player "plays through pain," he or she risks further injury, delayed recovery and more pain.

Rest is next and includes not playing until recovery is complete; don't use the arm, stay off the leg or use a crutch to properly rest the limb, if appropriate.

Ice should be applied as soon after an injury as possible to reduce swelling and inflammation. Apply ice for no more than 5 - 10 minutes and then remove it for 5 - 10 minutes, repeating the cycle several times. Apply the ice over a towel or other dressing, and make sure the skin does not come in direct contact with the ice. Ice the area several times each day. Be careful to watch the skin color to avoid damage to the skin; when the skin is pink for light-skinned players or darker for dark-skinned athletes, remove the ice.

Compress the injured area to further reduce swelling, which if not controlled can put pressure on muscles and connective tissues, causing damage. Use elastic bandages, air casts or splints. This should be done carefully, as circulation can be restricted if done improperly; if throbbing begins, loosen the wrapping.

Elevate the area when possible above the heart to further reduce swelling.

Support is the final step. Keep the limb supported and protected from further harm.

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