## Testimony before the Kansas House of Representatives Health and Human Services Committee Representative Dan Hawkins, Chair February 4, 2016

Good afternoon, my name is John Gallagher and I am a licensed Kansas physician with Board Certification in Emergency Medicine. I serve as the Medical Director for the Sedgwick County Emergency Medical System but today I am here as a representative for the Kansas Medical Society, the Kansas Academy of Family Physicians and the Medical Society of Sedgwick County to provide comments regarding the proposed changes to House Bill 2578 – an act amending the school sports head injury prevention.

In the United States, concussion among athletes of all ages and sports is a rapidly growing concern. According to the National Institute of Health, 1.7 million people sustain traumatic brain injury annually with an associated 1.365 million emergency room visits and 275,000 hospitalizations with a direct and indirect costs of \$60 billion dollars (1).

Kansas student athletes are certainly not immune to sports related concussions. This very committee took strong action several years ago and passed a very timely bill that has served Kansas athletes, parents, coaches, and educators very well. It's impossible to determine the number of sports related head injuries that have been prevented through the passage of Kansas Sports Concussion bill. As a practicing physician, I want to acknowledge today that I feel this legislation is doing the job you intended it to do – preventing sports related head injuries.

The proposed changes before you today pose serious concerns to the membership of the Kansas Medical Society, the Kansas Academy of Family Physicians, Medical Society of Sedgwick County and members of the Kansas Sport Concussion Partnership. Let me outline just a couple concerns.

First, the field of concussion diagnosis, treatment and management is a rapidly changing field of medicine. Advances in our knowledge are coming from multiple areas of medical specialty including neurology and sports medicine. As such, physicians are the most highly educated and trained within our health care system now to render the best possible medical advice in treating young athletes who have sustained sports related head injuries.

Secondly, the risk of death, permanent injury and disability are ever present in the assessment and diagnosis of concussion among Kansas student athletes. These high stakes require the highest level of medical knowledge and training to determine whether a Kansas student athlete is cleared to return to play or practice. While a comprehensive team of medical and education professionals would be the gold standard in diagnosing and managing sports related head injury that team must be led by the professional with the highest level of knowledge and training. In our health care system today, that person is the Kansas physician.

In closing, this body provided clear leadership several years ago with the passage of the Kansas Sports Concussion bill. I believe that legislation is serving the student athletes, their families and others very well. Reducing the standard of who can release an injured student athlete back to play or practice is a

weighty decision that should be reserved for the highest trained medical professional in our state – the Kansas physician.

Thank you for the chance to share with you today.

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## References

1. Daneshvar DH, Nowinski CJ, McKee A, Cantu RC. The Epidemiology of Sport-Related Concussion. Clinics in sports medicine. 2011;30(1):1-17. doi:10.1016/j.csm.2010.08.006.