UNIVERSITÀ
DEGLI STUDI DI MILANO-BICOCCA

COURSE SYLLABUS

Seminars 3

2526-3-I0201D148

Aims

To define the areas of competence of the physiotherapist in prevention, rehabilitation, and return-to-sport within the athletic context.
(DdD 1)

To acquire basic knowledge of preventive, rehabilitative, and return-to-sport models, with particular reference to the main musculoskeletal issues encountered in sports, with a focus on young athletes.
(DdD 1)

To understand the relevant quality standards for injury risk profiling, screening, and readiness assessment in young athletes.
(DdD 1)

To develop basic skills in supporting shared decision-making between the athlete, the healthcare team, and the coaching staff.
(DdD 2)

Contents

-Introduction to the Main competencies of the sports physiotherapist from IFSPT guidelines

-Prevention models and injury risk profiles

-Characteristics of the youth athletes

-Screening and assessment modalities (anamnestic, structural and functional)

-Return to sports models and multidisciplinary approach

Detailed program

-The competencies of sports physiotherapist in athlete management, lifestyle promotion, professional formation, innovation and EBM practice

-Knowledge of the historical evolution of the injury prevention models, use of epidemiological data, generic risk index and individual risk index.

Knowledge of basic prevention programs, the multifactorial approach and their efficacy

-Anatomical, physiological, pathophysiological and psychological characteristic in the youth athlete and the impact of early specialization.

-Technical exercise and assessment of the athlete in anamnestic, structural and functional areas aimed to recognize the multifactorial nature of injuries etiogenesis

-Theoretical models of management of injuries through the return to sport process, from injury to return to performance.

-Review of the scientific evidence and contextualization of common sports rehabilitation practices with some practical demonstrations (es. Taping, joint mobilization and recovery strategies and the multidisciplinary approach

-Antidoping policy promotion based on WADA and AIS (Australian Institute of sports) Guidelines.

Prerequisites

no

Teaching form

Frontal teaching 5h
interactive teaching - clinical practice activity 3h

Textbook and teaching resource

-American College of Sports Medicine. (2000). ACSM's guidelines for exercise testing and prescription. Philadelphia :Lippincott Williams & Wilkins,

-Brukner, P., Khan, K., & Brukner, P. (2012). Brukner & Khan's clinical sports medicine. Sydney: McGraw-Hill

-Haff, G., & Triplett, N. T. (2016). Essentials of strength training and conditioning. Fourth edition. Champaign, IL:

Human Kinetics.

-http://ifspt.org/wp-content/uploads/2012/04/SPTCompetenciesStandards-final-draft.pdf

-Joyce, D., & Lewindon, D. (2016). Sports injury prevention and rehabilitation: integrating medicine and science for performance solutions. Abingdon, Oxon ; New York, NY: Routledge.

-Gokeler A, Seil R, Kerkhoffs G, Verhagen E. A novel approach to enhance ACL injury prevention programs. J Exp Orthop. 2018 Jun 18;5(1):22. doi: 10.1186/s40634-018-0137-5. PMID: 29916182; PMCID: PMC6005994.

-James O'Brien, Caroline F. Finch, Ricard Pruna & Alan McCall (2019) A new model for injury prevention in team sports: the Team-sport Injury Prevention (TIP) cycle, Science and Medicine in Football, 3:1, 77-80, DOI:

-Bird, Stephen & Wilson, Greg & O'Connor, Donna & Baker, Daniel & Jones, Julian. (2008). Resistance training for children and youth: A position stand from the Australian Strength and Conditioning Association (ASCA) Part 1. Journal of Australian Strength and Conditioning.. 16. 35-42.

Semester

2nd semester

Assessment method

Group Project work

Office hours

by appointment

Sustainable Development Goals

GOOD HEALTH AND WELL-BEING | QUALITY EDUCATION | GENDER EQUALITY