HEALTH SURVEILLANCE IN SPORT - CASE STUDY: SPECIAL AMBULATORY FOR ATHLETES CRAIOVA

SUPRAVEGHEREA SĂNĂTĂŢII ÎN SPORT - STUDIU DE CAZ: AMBULATORIUL DE SPECIALITATE PENTRU SPORTIVI CRAIOVA

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Abstract: Bio-psycho-motive structures for children permanently reinforce by learning under the supervision of family and staff involved in monitoring and optimizing health. When initiating and practicing of sports, responsible for biological and mental security becomes coach. The regulations and other normative acts specified medical checks at regular intervals (medical visa for athletes), medical consulting and specialized treatment. In this way specialized feedback is about coach activity to the highest technological level: specific (sports medicine) and non-specific (GP or other medical specialist)

Key words: sports medicine, health condition, sports medical practice

INTRODUCTION

Special Ambulatory for Athletes Craiova dealing with sports clubs affiliated to the Dolj County Agency of Youth and Sports of, Dolj County Football Agency, Athletic Schools Clubs (Ministry of Education) totalling over 8000 athletes, many components of national teams. To this are added lots of athletes from Gorj, Mehedinti, Olt, Arges and Valcea country's and children and youth with physical disabilities. Also, in this unit, are organized internships for students of the Faculty of Physical Education of the University of Craiova, specialization Kinetic Therapy and Special Motricity.

PURPOSE

The aim of this study is to verify and ascertained the collaboration between the two systems: athletic instruction and sports medical control.

RESEARCH OBJECTIVES

The research objectives are:

- 1. Promoting demarches of control to teams and groups of children and youth who practice some sport branches;
- 2. Constating the interdisciplinary connection to the medical and pedagogical domains that contribute to health under stress and strain of human biological systems;
- 3. The extraction of assessments and value judgments in the form of conclusions that can optimize the quality and efficiency for the involving act of sports medicine in the instructional process of athletes.

ASSUMPTION OF RESEARCH

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In the field of operational context of training and control, appears the coherent goals and objectives ensemble, that who proposed the effective strategies of work aimed at solving, planned and scheduled tasks progress targeting by coach, practitioner and his family, on the one hand, and supervisory arrangements of education and medical control which are supposed in sports activity for preventing and limiting errors.

METHODS AND MATERIALS

In order, to verify the assumption, we used the method proposed like **direct documenting**: study of current legislation, the historian health care specialist and control of activities through the method of microcircuit and the check control recording in specific Clinical Observation Sheet. **Indirect documenting method** it was harnessed by: studies of the archived documents, operational planning documents for each medical cabinet (workstation); of the management activities, release documents as proof etc.

The research held from June 01 to August 31 2015 and included the analysis of past activity: history (the constitution and development) and year of reference - 2014.

In gathering to obtain the necessary information for attaining the number two objective, was used **interview method**. That included physicians and medical assistants, employees of Specialized Ambulatory for Athletes Craiova. To highlight the results was used the ambulatory recorded protocols that which yielded data published below.

RESULTS

Objective No. 1

Sports medicine activity in Craiova begins in 1952 at once with appearance, by government authorities since then, Patriotic Volunteers Association (Asociația Voluntarilor pentru Apărarea Patriei - **Evenimentul Zile**i, 17 oct. 2006). This association was expressed by two paramilitary organizations: GMA (*Gata pentru Muncă și Apărare - Ready for Labour and Defence* - 16 years) and FGMA (*Fii Gata pentru Muncă și Apărare - Be Ready for Labour and Defence* - under 16). Classification by age has been preserved over the years trough normative acts by the Romania Government through Ministry of Health (at 16, each individual is considered "young adult"). The first "physicians of physical culture" (**Avrămoiu Şerban**, manuscript) of Craiova are: N. Moldoveanu physician, physicians Genescu (husband and wife) and physician Marinescu employee by Şcoala Tehnică de Cultură Fizică (*Technical School of Physical Culture*) from Craiova. The first of Physical Medicine courses have been organized in the fall of 1955 and the first dedicated sports medicine cabinet was create in 1956.

In 2015, Specialized Ambulatory for Athletes Craiova is conducted under the tutelage of Dolj County Emergency Hospital and is led by chief physician, MD. Dinu Valentina, PhD, Assistant leader Dumitru Ciurea and supported by other employees:

- 16 physicians, which 14 are primary physicians (eight PhD), two specialized physicians and a biologist;
- 15 medical assistants, a laboratory assistant, a dental technician, a professor of CFM (medical physical culture), four kinetotherapists, a massage assistant, two registrars (card-index), two guards and a maintenance mechanic.

Operating structure comprises:

- 1. The Cabinet of Internal Medicine;
- 2. The Cabinet of Orthopedics Traumatology;
- 3. The Cabinet of Stomatology;
- 4. Investigation Laboratory Cabinet;
- 5. The Rehabilitation Cabinet (physiotherapy);
- 6. Sports Medicine Cabinet Testing exercise capacity;
- 7. Sports Medicine Cabinet Anthropology Sports and Nutrition;

- 8. Sports Medicine Cabinet Medical Opinion Delivered Sports;
- 9. Sports Medicine Cabinet Microcircuits (medical visa);
- 10. Sports Medicine Cabinet in sporting facilities (Stadium, Gym "Vointa").
- 11. Fitness Kinetotherapy Gym;

From 1952 until today (2015), Medicine of Physical Culture at first, Sports Medicine today, helps in biological and medical preparedness of athletes by directing normative instruments established by the Ministry of Health, practice of the field, and adopting scientific progress.

In 2014, activity of Specialized Ambulatory for Athletes Craiova, as covered by reporting to the Dolj County Emergency Hospital, performed the following activities:

Table 1	Modical	activities	carried out	in 2014
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Activities	Medical co	onsultations	Medical t	reatments	CFM (medical gymnastics)						
Age	16 <	> 16	16 <	> 16	16 <	> 16					
Total	24 973	20 884	24 765	29 293	18 992	17 873					
Grand total	136 780										

The activities, listed in Table 1, include consultations and treatments for former athletes that have practiced a total of 42 sports and sport branches. Since 1952, the activities of medical support for biological adaptation to the demands imposed by competition, can state that Sports Medicine in Craiova has contributed to an impressive list of prizes:

Table 2. Rresults of athletes and sports clubs in Dolj County from 1952 to 2014

Level	Gold medals	Silver medals	Bronze medals
Olympic Games	3	6	5
World Championships (World Cups)	14	27	39
European Championships	45	35	51

In this presentation are not mentioned Balkan Championships (approx. 20 pages B5 from reference - **Daneş Aurel şi colab**, 2008 vol I şi 2010 vol II). Difficult to present are, also the classifications at the National Championships in Romania. For example - in 1952 are recorded six gold medals in: national boxing championships (4), plane modeling (1) and weightlifting (1). The number of medals continues to grow and in 1999 are recorded 101 gold medals, and in 2009 are 134 and so on.

The result presented in Table 2 and above, refers to the results achieved by children, juniors and classified sportsmen, who have directly benefited from the specialty support of Specialized Ambulatory for Athletes Craiova.

Objective No. 2

The large number of medical activities (*Table 1*) is explained by the fact that currently there is a pool of about 8 000 legitimated athletes in Dolj County to which was added the athletes and sports teams from adjacent counties. The explanation continues by the fact that because some sports branch (chess, shooting, etc.) permit a long period of time for practice, some over 30 years and with obligatory medical visa to every six months. Currently adult athletes and former athletes, now parents, bring their children and their parents for various medical consultations on this unit.

Since the first contact with children (initiation stage), physicians and medical employees in this unit, pay more attention to communication with them. Through this communication are following some psycho-pedagogical objectives of medium generality:

1. Self-service:

Table 3. Activities of sports medicine of six months obligatory medical visa for athletes in 2014

nth	In	Consultations of functional explorations				Orthopedics consultation				Physiotherapy consultation		Motor exploration consultation				Medical Opinion delivered - Sports				Sporting specifically microcircuits		Activity in sporting facilities (same)		EKG of effort		rtEKG of effort		monthly			
Month	Urban		Rural		Urban		Rural		Urb	Urban Rura		ral	Url	Urban		Urban		Rural		Urban		Rural		an	Urb	oan	Cod M of H 12600		Cod M of H 12605		activity
	16 <	> 16	16 <	> 16	16 <	> 16	16 <	> 16	16 <	> 16	16 <	> 16	16 <	> 16	16 <	> 16	16 <	> 16	16 <	> 16	16 <	> 16	16 <	> 16	16 <	> 16	16 <	> 16	16 <	> 16	
1	74	258	2	74	63	0	271	52	68	289	29	91	72	348	43	291	0	54	36	135	42	129	100	20	239	315	57	398	0	5	3555
2	266	214	0	48	224	219	0	24	71	313	40	120	239	251	170	305	0	22	149	86	168	79	142	28	226	337	296	274	0	2	4313
3	305	176	0	39	281	148	1	18	74	315	45	125	295	156	202	246	0	0	73	157	49	173	140	21	218	305	307	188	0	2	4059
4	500	82	0	1	339	44	0	1	69	303	38	109	336	64	235	127	0	0	41	139	52	160	141	20	237	351	346	69	0	3	3807
5	365	52	0	0	337	39	0	0	72	310	42	152	315	44	262	115	0	0	53	127	49	174	152	15	258	382	387	52	0	1	3755
6	250	55	0	8	241	0	41	8	80	314	44	114	199	47	216	103	0	0	31	119	39	182	154	19	273	368	239	63	0	0	3207
7	109	260	0	62	103	3	54	221	78	303	41	109	80	218	69	247	0	67	69	163	64	187	150	25	267	336	81	269	0	1	3636
8	322	105	0	70	511	116	0	29	33	108	28	56	165	455	219	179	0	6	139	116	117	94	151	10	238	362	121	177	0	0	3927
9	313	196	12	24	271	185	9	2	81	307	42	105	143	426	184	272	6	21	156	98	129	136	157	21	251	378	288	215	0	2	4430
10	384	123	0	5	346	0	94	4	82	303	40	102	333	129	270	187	0	0	189	53	207	43	160	15	262	406	271	114	0	2	4124
11	299	114	8	1	320	75	0	1	85	310	39	98	342	131	238	140	0	0	43	194	46	134	170	14	218	341	283	107	0	0	3751
12	128	60	0	0	117	5	0	0	70	260	27	77	160	73	117	113	0	0	116	57	106	51	168	18	178	252	127	62	0	0	2342
Total	3315	1695	22	332	3153	834	470	360	863	3435	455	1258	2679	2342	2225	2325	6	170	1095	1444	1068	1542	1785	226	2865	4133	2803	1988	0	18	44906

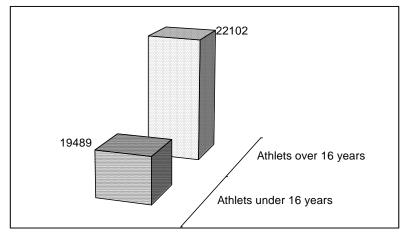


Fig. 1 Graphical representation of athletes who presented annually for sports medical visa (Source: Table no. 3)

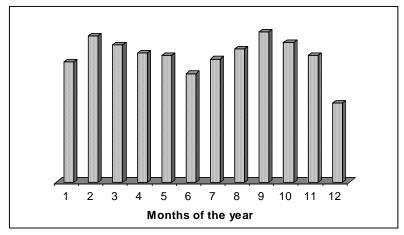


Fig. 2 Graphical representation of the load of activities for medical visa (Source: Table no. 3)

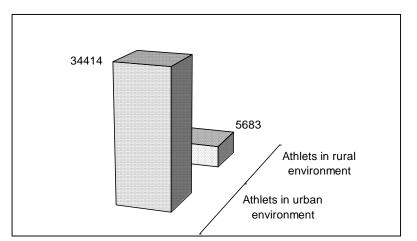


Fig. 3 The graphical representation of the comparison between the sports movement development between urban and rural environment (Source: Table no. 3)

- Drinking water and liquids in general, in separate containers in practice and after;
- Washing fruits before consumption;
- Brushing of the teeth, combing hair, washing hands, to cut nails and other personal hygiene items;
- To choose their clothing according to the season;

2. Verbal communication:

- rules and elements of medical jargon on the communication of health status and accidents;
- to report events using simple words and sentences;
- to respect order of event in according with schedule and clock;
- to complete key points on the received forms;

3. Socialization:

- to care for colleagues, beginners or younger;
- to understand verbal instructions in different environment;
- to obtain information from unfamiliar personnel;

4. Self-management protection skills in practice:

- their health surveillance: size, weight etc. and how it should develop physically;
- do not execute physical exercise beyond those indicated by the coach;
- practical advice for hygiene compliance in the use of bases and sports equipment;

ANALYSIS AND CONCLUSIONS

- 1. The difference between the large number of practitioners, the category of "over 16" and number of "under 16", shown in Table 3, expressed graphically in Figure 1, is explained, on the one hand, by insufficient public space for sports in urban environment, the accumulation of a large number of consecrated sportsmen or being consecration and, on the other hand, consequences of urbanization.
- 2. Getting the desired results through informal education, on the level of Specialty Ambulatory for Athletes Craiova, leading to mutual knowledge (medical person and child) and granting mutual trust between the athlete and physician. The level of mutual understanding will lead to a collaboration increasingly more pronounced over the years, as shown in Table 1. The psycho-pedagogical objectives of medium generality listed above, once achieved by increasing the perception of children on various medical specializations, have a practical expression in traffic flow of athletes, from a consulting room to another, explaining the excessive load of operations, as shown in Table 3 and intuitively shown in Fig. 2.

This fact is underlined by the total of the activities in Table 3, for biannually obligatory medical visa and total activities carried out in 2014, Table 1, and to report and prize list presented in Table 2 and the next paragraph of that table.

Summary of the data in Table 3, Fig. 3 highlights:

- villages underdevelopment is expressed by lack of access to education and sports training for children and youth in rural areas¹;
- social needs and underdevelopment of appropriate infrastructure for practicing sports;

Finally can state that prize list amassed by sportsmen from region Oltenia is due to the cumulative: increase in the number of physicians specializing in sports medicine, the increase quantitative and qualitative of workspaces and logistics who is dedicate to sports medicine and increasing the quality and quantity education in the specialization of sports medicine.

¹ There are some programs of the Ministry of Youth and Sports (e.g. programm "Pierre de Coubertin") with results still uncertain.

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