

UNIVERSITY OF PUERTO RICO
MEDICAL SCIENCES CAMPUS
SCHOOL OF HEALTH PROFESSIONS
DEPARTMENT OF GRADUATE STUDIES
PHYSICAL THERAPY PROGRAM

Title of the project: Compliance with injury prevention measures in pitchers: survey to coaches in the categories from 9 to 14 years old in Little Leagues of Puerto Rico

AGE CATEGORY: 9-10 YEARS OLD

Instructions:

This questionnaire contains questions about the guidelines you follow in order to prevent injuries in pitchers.

Answer all questions by making a circle or an (X) around the premise that best describes your practice in the last year.

Answer all questions according to the age group that you are currently coaching.

1. Your team assigns a record keeper to count the pitches that pitchers throw?
 Yes No

2. Do you establish a limit per game for the amount of pitches that a pitcher can throw?
 Yes No (*go to question 8*)

3. What is the established limit?

(Amount of pitches)

4. Is there a person in charge of notifying when a pitcher has reached the pitch count limit?
 Yes No (*go to question 8*)

5. In regular tournaments, who is in charge of notifying when a pitcher has reached the pitch count limit?

Select only one answer.

- a. The pitcher's coach
- b. The other team's coach
- c. The umpire
- d. The record keeper
- e. Other (Specify)_____

6. Who must be notified that a pitcher has reached the pitch count limit?

Select only one answer.

- a. Only the umpire
- b. Only the pitcher's coach
- c. Only the other team's coach
- d. The umpire and both team's coaches
- e. Other (Specify)_____

7. What is the process to be followed once a pitcher has reached the established limit?

Select only one answer.

- a. The pitcher is removed from the game and cannot pitch again in that game, but he can continue to play in another position which isn't as a pitcher or as a catcher.
- b. The pitcher is removed from the game and can pitch again after resting for 1 inning.
- c. The pitcher is removed from the game and can pitch again after resting for 2 inning.
- d. The pitcher is removed from the game and can pitch again after resting for 3 inning.
- e. Other (Specify)_____

8. Do you establish a weekly limit to the amount of games that a pitcher can pitch in?

- Yes No (*go to question 10*)

9. What is the established limit?

Select only one answer.

- a. One game per week
- b. Two games per week
- c. Three games per week
- d. Four games per week
- e. Other (Specify)_____

10. Do you establish rest days for the pitcher according to the number of pitches he threw?

- Yes No (*go to question 13*)

11. A pitcher who has thrown 43 pitches in a game will be assigned at the least _____ rest days:

- a. 1 day
- b. 2 days
- c. 3 days
- d. 4 days
- e. Other (Specify)_____

12. A pitcher who has thrown 51 pitches in a game will be assigned at the least _____ rest days:

- a. 1 day
- b. 2 days
- c. 3 days
- d. 4 days
- e. Other (Specify)_____

13. Do you allow pitchers to throw curveballs?

- Yes No

14. Do you allow pitchers to throw “sliders”?

- Yes No

15. Does the team keep a record of injuries during the season?

- Yes No (*go to question 17*)

16. In regard to the record of injuries, what is the procedure to follow once the season is over?

Select only one answer.

- a. Keep it in an archive for use of the team.
- b. Send a copy to the Department of Recreation and Sports.
- c. Send a copy to the Department of Health.
- d. Send a copy to the Little League Baseball office.
- e. Other (Specify)_____

17. Do you, or a member of your team, educate the pitchers to develop good pitching mechanics (“wind up”)?

- Yes No

18. Does a pitcher in your team participate in practices in order to show their skills to scouts from other organizations or to other coaches from age categories older than 10 years old?

- Yes No I don't know

19. Does a pitcher in your team play in more than one league during the season?

- Yes No I don't know

20. How many months does a game season last?

(Number of months)

21. How many months does the off-season last (time without games)?

(Number of months)

22. What is the procedure to follow when a pitcher expresses or shows signs of pain?

Select only one answer.

- a. Allow the pitcher to keep throwing, but applying ice between innings.
- b. Remove the pitcher from the game immediately.
- c. Ask the pitcher if he feels well enough to keep throwing.
- d. Allow the pitcher to rest for a few innings until the pain subsides and insert him back into the game once he feels better.
- e. Other (Specify)_____

23. Do you offer some kind of education to the pitcher's parents in regard to the management of pain in his arm when he throws or when the pain persists after having thrown in a game?

- Yes No

24. Do you educate the pitchers about what they can and cannot do after a game?

- Yes No (*go to question 26*)

25. Which recommendations do you provide to the pitchers after having pitched in a game?

Mark all that apply:

- To use ice for pain management
- To lift heavy objects to strengthen the arm
- To not throw any pitches after the game
- To do stretching exercises
- Other (Specify)_____

26. As part of your training regimen for the pitchers, do you include warming up exercises before each practice and each game?

- Yes No (*go to question 28*)

27. Select the warming up exercises that you perform with your pitchers. Include:

- type of warming up exercise performed (E.g.: walking, running)
- for how much time each warming up exercise is performed (i.e.: Number of seconds or minutes that the exercise lasts)

Type of warming up exercise	Time (number of seconds or minutes)
Mark all that apply:	
<input type="checkbox"/> jumping jacks	
<input type="checkbox"/> jogging	
<input type="checkbox"/> walking	
<input type="checkbox"/> running	
<input type="checkbox"/> Other (Specify) _____ _____	

28. As part of your training regimen for the pitchers, do you include stretching exercises before each practice and each game?

- Yes No (*go to question 30*)

29. Select the stretching exercises that you perform with your pitchers. Include:

- Part of the body that is stretched (E.g.: shoulder, elbow, knee, hand)
- how much time each stretching exercise is performed (i.e.: Number of seconds or minutes that the stretch lasts)
- type of stretching exercise performed
- form in which the stretching is performed

Part of the body stretched	Time (number of seconds or minutes)	Type of stretching (i.e.: static stretching = the part of the body is stretched and maintained in that position; ballistic stretching= bouncing movements are performed in order to stretch the part of the body.)	Form in which the stretching is performed (i.e.: if the pitcher performs the stretching by himself (Active) or if another person assists him (Active-assisted))
Mark all that apply:		<input type="checkbox"/> static <input type="checkbox"/> ballistic	<input type="checkbox"/> active <input type="checkbox"/> active-assisted
<input type="checkbox"/> neck			
<input type="checkbox"/> shoulder			
<input type="checkbox"/> elbow			
<input type="checkbox"/> wrist			
<input type="checkbox"/> back			
<input type="checkbox"/> waist			
<input type="checkbox"/> hip			
<input type="checkbox"/> knee			
<input type="checkbox"/> ankle			
<input type="checkbox"/> other (Specify) _____ _____ _____ _____			

30. As part of your training regimen for the pitchers, do you include strengthening exercises?

- Yes No (*go to question 32*)

31. Select the strengthening exercises that you perform with your pitchers. Include:

- type of strengthening exercise performed (E.g.: “push-ups”, sit-ups)
- how many times per week the strengthening exercises are performed (E.g.: 1 time per week, 5 times per week)
- number of repetitions (E.g.: 5 repetitions, 30 repetitions)
- number of sets (E.g.: 5 sets, 8 sets)

Type of strengthening exercise	Times per week	Number of repetitions	Number of sets
Mark all that apply:			
<input type="checkbox"/> push-ups			
<input type="checkbox"/> sit-ups			
<input type="checkbox"/> pull-ups			
<input type="checkbox"/> free weights (specify for which part of the body they're used and how much weight is used)_____			

<input type="checkbox"/> weight machines (specify for which part of the body they're used and how much weight is used)_____			

<input type="checkbox"/> other (Specify)_____			

32. As part of your training regimen for the pitchers, do you include aerobic exercises?
 (An aerobic exercise is an exercise in which you breathe faster than the rate you normally breathe at rest.)

- Yes No (*go to question 34*)

33. Select the aerobic exercises that you perform with your pitchers. Include:

- type of aerobic exercise performed (E.g.: walking, jumping rope)
- how many times per week the aerobic exercises are performed (E.g.: 1 time per week, 7 times per week)
- for how much time each aerobic exercise is performed (E.g.: 5 minutes, 10 minutes)

Type of aerobic exercise	Times per week	Time (number of seconds or minutes)
Mark all that apply:		
<input type="checkbox"/> running		
<input type="checkbox"/> walking		
<input type="checkbox"/> jump rope		
<input type="checkbox"/> cycling		
<input type="checkbox"/> other (Specify) _____ _____ _____ _____		

34. As part of your training regimen for the pitchers, do you include cooling-down exercises after each practice and each game? (A cooling-down exercise is defined as a type of mild exercise that is performed after a strenuous physical activity with the purpose of allowing the body to return to its normal physiological state in a gradual manner.)

- Yes No (*go to question 36*)

35. Select the cooling-down exercises that you perform with your pitchers. Include:

- type of cooling-down exercise performed (E.g.: jogging, walking)
- for how much time each cooling-down exercise is performed (E.g.: 15 minutes, 20 minutes)

Type of cooling-down exercise	Time (number of seconds or minutes)
Mark all that apply:	
<input type="checkbox"/> jumping jacks	
<input type="checkbox"/> jogging	
<input type="checkbox"/> walking	
<input type="checkbox"/> stretching	
<input type="checkbox"/> push-ups	
<input type="checkbox"/> other (Specify) _____ _____ _____	

Information about the coach:

36. Age: _____

37. Gender:

F

M

38. Years of experience as a coach:

39. Highest level of education reached:

High school

Bachelor's degree

Master's degree

Doctorate degree

Other (Specify) _____

40. Currently, do you possess a license as a coach from the Department of Recreation and Sports?

Yes No

41. What kind of preparation do you have in regard to the training in good pitching mechanics?

Mark all that apply.

Have attended workshops about pitcher training regimens

Watched pitcher training regimens on television

Watched pitcher training regimens on the internet

Read about pitcher training regimens in books

Other (Specify) _____