Complete Summary

GUIDELINE TITLE

Protective eyewear for young athletes.

BIBLIOGRAPHIC SOURCE(S)

Protective eyewear for young athletes. Pediatrics 2004 Mar;113(3 Pt 1):619-22. [13 references] PubMed

GUIDELINE STATUS

This is the current release of the guideline.

American Academy of Pediatrics (AAP) Policies are reviewed every 3 years by the authoring body, at which time a recommendation is made that the policy be retired, revised, or reaffirmed without change. Until the Board of Directors approves a revision or reaffirmation, or retires a statement, the current policy remains in effect.

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SCOPE

DISEASE/CONDITION(S)

Eye injury

GUIDELINE CATEGORY

Prevention

CLINICAL SPECIALTY

Family Practice
Ophthalmology
Optometry
Pediatrics
Sports Medicine

INTENDED USERS

Advanced Practice Nurses
Allied Health Personnel
Health Care Providers
Physician Assistants
Physicians

GUIDELINE OBJECTIVE(S)

To provide recommendations for the use of protective eyewear for all the participants in sports in which there is a risk of eye injury

TARGET POPULATION

All youth involved in organized sports

INTERVENTIONS AND PRACTICES CONSIDERED

Protective eyewear

MAJOR OUTCOMES CONSIDERED

- Incidence of sports- and recreation-related eye injuries
- Incidence of eye injuries by age group
- Incidence of eye injuries by sport

METHODOLOGY

METHODS USED TO COLLECT/SELECT EVIDENCE

Searches of Electronic Databases

DESCRIPTION OF METHODS USED TO COLLECT/SELECT THE EVIDENCE

Not stated

NUMBER OF SOURCE DOCUMENTS

Not stated

METHODS USED TO ASSESS THE QUALITY AND STRENGTH OF THE EVIDENCE

Not stated

RATING SCHEME FOR THE STRENGTH OF THE EVIDENCE

Not applicable

METHODS USED TO ANALYZE THE EVIDENCE

Review

DESCRIPTION OF THE METHODS USED TO ANALYZE THE EVIDENCE

Not stated

METHODS USED TO FORMULATE THE RECOMMENDATIONS

Not stated

RATING SCHEME FOR THE STRENGTH OF THE RECOMMENDATIONS

Not applicable

COST ANALYSIS

A formal cost analysis was not performed and published cost analyses were not reviewed.

METHOD OF GUIDELINE VALIDATION

Peer Review

DESCRIPTION OF METHOD OF GUIDELINE VALIDATION

Not stated

RECOMMENDATIONS

MAJOR RECOMMENDATIONS

1. All youths involved in organized sports should be encouraged to wear appropriate eye protection.
2. The recommended sports-protective eyewear as listed in Table 2 in the original guideline document should be prescribed. Proper fit is essential. Because some children have narrow facial features, they may be unable to wear even the smallest sports goggles. These children may be fitted with 3-mm polycarbonate lenses in American National Standards Institute (ANSI) standard Z87.1 frames designed for children (American National Standards Institute, 2003). The parents should be informed that this protection is not optimal, and the choice of eye-safe sports should be discussed.

3. Because contact lenses offer no protection, it is strongly recommended that athletes who wear contact lenses also wear the appropriate eye protection listed in Table 2 in the original guideline document.
4. An athlete who requires prescription spectacles has 3 options for eye protection:
    a. Polycarbonate lenses in a sports frame that passes American Society for Testing and Materials (ASTM) standard F803 for the specific sport
    b. Contact lenses plus an appropriate protector listed in Table 2 in the original guideline
    c. An over-the-glasses eyeguard that conforms to the specifications of ASTM standard F803 for sports in which an ASTM standard F803 protector is sufficient. (American Society for Testing and Materials, 2003)
5. All functionally 1-eyed athletes should wear appropriate eye protection for all sports.
6. Functionally 1-eyed athletes and those who have had an eye injury or surgery must not participate in boxing or full-contact martial arts. (Eye protection is not practical in boxing or wrestling and is not allowed in full-contact martial arts.) Wrestling has a low incidence of eye injury. Although no standards exist, eye protectors that are firmly fixed to the head have been custom made. The wrestler who has a custom-made eye protector must be aware that the protector design may be insufficient to prevent injury.
7. For sports in which a face mask or helmet with an eye protector or shield must be worn, it is strongly recommended that functionally 1-eyed athletes also wear sports goggles that conform to the requirements of ASTM standard F803 (for any selected sport) (American Society for Testing and Materials, 2003). This is to maintain some level of protection if the face guard is elevated or removed, such as for hockey or football players on the bench. The helmet must fit properly and have a chinstrap for optimal protection.
8. Athletes should replace sports eye protectors that are damaged or yellowed with age, because they may have become weakened and are, therefore, no longer protective.

CLINICAL ALGORITHM(S)

None provided

EVIDENCE SUPPORTING THE RECOMMENDATIONS

REFERENCES SUPPORTING THE RECOMMENDATIONS

References open in a new window

TYPE OF EVIDENCE SUPPORTING THE RECOMMENDATIONS

The type of evidence supporting each recommendation is not specifically stated.

BENEFITS/HARMS OF IMPLEMENTING THE GUIDELINE RECOMMENDATIONS

POTENTIAL BENEFITS

Although eye protectors cannot eliminate the risk of injury, appropriate eye protectors have been found to reduce the risk of significant eye injury by at least 90% when fitted properly.

Subgroups Most Likely to Benefit

- Athletes who are functionally 1-eyed
- Athletes who have had eye surgery or trauma to the eye

POTENTIAL HARMS

Not stated

IMPLEMENTATION OF THE GUIDELINE

DESCRIPTION OF IMPLEMENTATION STRATEGY

An implementation strategy was not provided.

INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT CATEGORIES

IOM CARE NEED

Staying Healthy

IOM DOMAIN

Effectiveness

IDENTIFYING INFORMATION AND AVAILABILITY

BIBLIOGRAPHIC SOURCE(S)

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ADAPTATION

Not applicable: The guideline was not adapted from another source.

DATE RELEASED

2004 Mar

GUIDELINE DEVELOPER(S)

American Academy of Pediatrics - Medical Specialty Society

SOURCE(S) OF FUNDING

American Academy of Pediatrics

GUIDELINE COMMITTEE

Committee on Sports Medicine and Fitness

COMPOSITION OF GROUP THAT AUTHORED THE GUIDELINE

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FINANCIAL DISCLOSURES/CONFLICTS OF INTEREST

Not stated

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GUIDELINE AVAILABILITY

Electronic copies: Available from the American Academy of Pediatrics (AAP) Policy Web site.

Print copies: Available from American Academy of Pediatrics, 141 Northwest Point Blvd., P.O. Box 927, Elk Grove Village, IL 60009-0927.

AVAILABILITY OF COMPANION DOCUMENTS

None available

PATIENT RESOURCES

None available

NGC STATUS

This summary was completed by ECRI on June 8, 2004. The information was verified by the guideline developer on July 6, 2004.

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