

The Year Sports Died

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It was a typically busy, chaotic Thursday morning when I met Dale. Elderly and frail, he looked scared as he was rolled quickly into Room 11 of the emergency department, where I practice weekly to keep up my skills from residency training. The local nursing home sent him over for fever and shortness of breath. Dale was wearing a faded Brewers t-shirt that contained a few scattered holes and had definitely witnessed its fair share of Brewers games. I never asked him about the t-shirt. I didn't need to. I could just tell what it meant to him, just like mine means to me. It is our favorite baseball team. He didn't look good, and neither did his chest x-ray. His swab confirmed COVID-19. I reassured Dale things were going to be okay, admitted him to the ward, and said a prayer as they rolled him away.

Being about two-thirds of the way through my sports medicine fellowship, things were flowing. Everything was really starting to come together. Sure, most days I felt like I was going 120 miles per hour with not enough time in the day, but that is what made it challenging and enjoyable. Then one day, everything came to a sudden stop. Sports ended, and in a way, it

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seemed as though my fellowship did too. That day was supposed to be my first day covering a Spring Training baseball game in Arizona. The forecast: sunny and warm. I had even come prepared with a fresh bottle of sunscreen to protect

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my pale, winterized Wisconsin skin. I didn't need it. Not one drop. You see, I never had the opportunity to cover a game. I never even witnessed a single pitch. Instead, I was thrown a COVID-19 curveball, so well disguised that even the great "Hammerin" Hank Aaron would have struggled to hit it out of the ballpark. I will never forget that day—the day sports died.

Bleachers are empty. Gymnasiums are dark. Training rooms are vacant. Sports have seen brighter days. Fans have no games to watch, and athletes have no games to play. No longer do fans hear the perfect harmonies of the gameday chorus—blades cutting the ice, the "swish" of the net, the pop of a catcher's mitt, or the roar of the crowd. The sounds that we have come to associate with sports have been replaced by silence. Life without sports just doesn't feel right—like peanut butter without jelly or a hammer without a nail. Its absence

emphasizes that sports provide society with more than just games and camaraderie. For many, its meaning goes far beyond any statistics as well. Sports yields optimism and serves as an avenue to cope with tough times. Now,

more than ever, we are reminded that the lessons we learn through sports—whether it be as a fan, player, coach, or team physician—are instrumental in bringing people, communities, and our nation together.

As the pandemic began to unfold, I found myself searching for ways to cope, both inside and outside the walls of medicine. I turned to sports and the ideals it has instilled in me since childhood. If you are like me, you fondly remember Saturday morning soccer games, Little League baseball tournaments, and Friday night football games. Participation in sports allows for the development of a unique skill set that can be applied toward any career, especially medicine. The cornerstone of such a foundation is undoubtedly the concept of "team"—the idea that each team member plays an integral role in achieving a common goal. Teamwork has since been fundamental to

my training as an emergency medicine physician, and currently, as a sports medicine fellow. Whether it be running a code in the hospital or spine boarding an athlete on the sidelines, working together remains key.

Adaptability is rooted in sports and medicine as well. Like a game-time decision in sports that makes the difference between a win or a loss, physicians must adapt acutely in uncomfortable and stressful situations to make life or death decisions. As health care providers, we are frequently asked to adjust to the ever-changing world of medicine. The advent of COVID-19 has required residents, fellows, and physicians to modify how health care is delivered. Though the core values remain intact, we are called to implement changes such as telehealth and virtual medicine. The landscape of medicine now includes patient and staff screening, limited visitor exposure, and mandatory masks. We have traded hugs for hand waving and white coats for PPE. The final days of life are now more commonly spent alone rather than surrounded by loved ones.

In a perfect sports world, walk-off home runs, buzzer-beater jump shots, Cinderella upsets, and overtime thrillers would dominate the headlines. Spring sports would be in full swing and summer recreational leagues, where my friends and I pretend to still be in our twenties, would be underway. Instead, our current world of sports is far from perfect. In fact, it's extinct. The current score: COVID: 19, Sports: 0. The pandemic has challenged sports medicine physicians, physical therapists, athletic trainers, and other allied staff both physically and emotionally. It has created a raw loneliness. Our field of work revolves around sports. It is part of our DNA. From the adrenaline of covering events to managing injuries on the field, we look forward to helping athletes regain their full potential. With a lack of sports, the usual broken bones and ligamentous injuries we are so accustomed to seeing have become scarce. Concussions have almost vanished. However, it's the human element we miss most; the personal, hands-on, emotional bond we develop with our patients. Learning about their lives outside of sports—their hobbies, families, and inspirations brings an even greater depth to the relationship. How do we overcome such adver-

sity and emerge stronger than before? Plain and simple: perseverance.

Like the fourth quarter of a close game, the last quarter of the academic year brings with it a heightened sense of excitement for upcoming graduation and transition to finally practicing as an attending physician. Ideally, fine-tuning procedural skills and managing clinic independently occur during the last few months of sports fellowship. COVID-19 has undoubtedly hijacked this process. On a personal level, my fellowship training has undergone a transformation, where the only thing predictable is the unpredictable. Usually flooded, elective diagnostic and interventional ultrasound procedures for musculoskeletal pathologies are parched and currently undergoing drought-like conditions. While nothing fully replaces hands-on training, new, unique experiences have been gained. Weekly didactics and grand rounds are now virtual and multi-institutional. National conferences have followed suit. Collaborating to draft protocols for return-to-play at the adolescent and professional levels amidst a pandemic has been challenging and

thought-provoking as well. My fellowship will end as scheduled, and I will leave with confidence that despite the uncharacteristic training of this year, I am prepared to practice the art of sports medicine.

While navigating through these unprecedented times, let us not forget the impact sports has on society and our everyday lives. As both a spectator and teammate, sports taught me not only teamwork and adaptability but, most importantly, perseverance during times of adversity. It is what we, as health care professionals promise our patients—we will be there for them. We will get through this together. Hope heals. Sports heals. In the end, there are many things more important than sports—namely, human life. The emptiness of losing a loved one holds no comparison. As physicians, we are blessed to possess the power to heal. May we embody such a gift, so that patients like Dale can watch one more baseball game.

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