

# Sports Medicine Australia NSW Branch



## Level 2 Sports Taping Workshop

# Types of Skin Reactions to Tape

- Physical Irritation
- Chemical Reaction
- Allergic Response

# Who is at Risk from Tape Reactions?

- Red hair/fair skin
- Soft skin areas
- Commonly allergic people
- Prolonged exposure to tape
- Sunburnt skin
- Elderly skin
- Infant/juvenile skin
- Medication induced skin, hyper-sensitive
- Around recent scar sites

# Preventing Skin Reactions to Tape

- **Limit exposure to tape eg 1/2 day only**
- **White (less adhesive) tape**
- **Cover any open skin areas**
- **Avoid shaving just prior to application**
- **Frequently re-assess the skin**
- **Avoid recycling techniques**
- **Use Hypo-allergenic tape under brown tape eg Fixomull**
- **Use Hypo-allergenic rigid tape eg Fixomull**
- **Barrier skin preparation**
- **Remove all tape residue off skin**
- **Use of liquid tape remover eg Leuko**

# Managing an Allergic Reaction

- Remove all tape and residue
- Referral to a Medical Practitioner
- Apply a topical corticosteroid
- Use of oral antibiotics if infected
- Avoid use of topical drying agents such as Betadine
- Gradual re-introduction to tape following resolution of reaction
- Use as many of the preventative measures as required

# Shoulder Acromio-Clavicular (A/C) Joint Sprain



**Preparation:** Position the shoulder at a 45 degree angle by resting the forearm on a bed or table.

**A)** Apply Fixomull stretch (5 or 10cm) as skin protection. Leukofoam pads are cut ( Circle and Rectangle) to protect the nipple and bony prominence of the AC joint.

**B)** Two vertical anchors of Leuko rigid tape are applied over the shoulder girdle.

## **Shoulder Acromio-Clavicular (A/C) Joint Sprain (continued)**

- C)** Two transverse (horizontal) anchors around the chest below nipple.
  
- D)** Two anchors are applied on the humerus at the level of the Deltoid insertion.
  
- E)** Two diagonal strips in one direction are then applied from the shoulder anchor to the Deltoid anchor. Note: Larger shoulders may need three strips.

## **Shoulder Acromio-Clavicular (A/C) Joint Sprain (continued)**

- F)** Two diagonal strips are repeated in the opposite direction. Extra diagonal strips can also be applied alternately for added support.
  
- G)** Locking strips on the anchors reinforce and complete the procedure by covering the ends of the diagonal strips.



# Anterior Shoulder Dislocation Prevention

- A)** Prepare skin. Prepare shoulder with Fixomull, nipple Orthopaedic Leukofoam Pad and vertical and transverse anchors, as described for A/C joint taping.
- B)** Position shoulder/arm at the end of range of desired movement. This position will most probably be 90° abduction (or just short of), horizontal flexion and internal rotation.

## **Anterior Shoulder Dislocation - Prevention (continued)**

- C)** Apply desired number of strips of sportstape starting from the deltoid anchor, anteriorly and down, around the arm to the back of the upper arm, over the top and front of shoulder finishing at the vertical anchors. At 90° abduction the taping should limit/prevent external rotation and horizontal extension, that is “putting the arm in a coat position”.
- D)** Lock off.

# FOOT TAPING

## (Medial Longitudinal Arch)

**Applications:** Pronation correction, plantar fasciitis, shin soreness and hallux valgus (adapted)

### **Technique:**

Anchor (Proximal to metatarsal heads)

Stirrups (Along medial forefoot, around heel, cut under cuboid to support the arch and finish on dorsum of forefoot).

**Tape:** Rigid (38mm) and +/- Fixomull

# Elbow Epicondylar Tendonitis Unloading



- Application:  
Lateral epicondylitis=Tennis elbow, Medial epicondylitis=Golfers elbow
- Technique: Unload common wrist extensor/flexor origin or along extensor/flexor muscle bellies.  
Unload lateral to medial direction using 2-3 pieces of tape.
- Tape: 38mm rigid or smaller, +/- Fixomull underneath rigid

# Knee Anterior Cruciate ligament (ACL)

- Maintain the knee joint in 5-10° of flexion. Protect the popliteal space (back of knee) with a sponge or felt pad.
- Apply 4 spiral tapes of 38 mm Leuko Sportstape from calf to mid-thigh.

# Knee Anterior Cruciate ligament (ACL) (continued)

- Tape 1: From the posteromedial aspect of the upper calf over the tibial tubercle to the lateral aspect of the knee, across the popliteal space and around the thigh.
- Tape 2: Spiral on the opposite side from the posterolateral aspect of the calf to posteromedial thigh.

# Knee Anterior Cruciate ligament (ACL) (continued)

- Tape 3: Take the same course as Tape 1 overlapping by half.
- Tape 4: Take the same course as Tape 2 overlapping by half.
- Complete the strapping with transverse locking tapes covering the thigh and calf components.

# Scenarios to think about...

1. IRB [ Rubber Ducky] NSW SLISA Championships.

IRB Operator dislocates Right Shoulder in competition, which is reduced on site and iced. Devise a shoulder strapping that will enable the operator to resume competition that day.



# Scenarios to think about...

2. Basketball player has minor hairline fracture over the anterior angle of his Right 9th rib. He needs to play to stay in State qualifiers. devise a padded rib strapping that will support the area and allow him to compete that day.