Interventions (or Assessment of Risk Factors) The Oslo Sports Trauma Research Centre Overuse Injury Questionnaire was used weekly to register OKIs and OAs over 16 weeks.

Main Outcome Measurements Self-reported OKIs (e.g., patellar tendinopathy, patellofemoral syndrome) and OAs (e.g., Achilles tendinopathy) and symptom duration.

Results Female teams participated in 52 basketball sessions (range 42–61, SD 8.6, 42% games) and males in 53 sessions (range 51–54, SD 1.2, 42% games). In the season, 30.4% of females and 27.8% of males reported an OKI and 19.1% of females and 8.3% of males an OA. The median symptom duration (burden) of OKIs was 7 weeks for females and 4 weeks for males. Median time to onset for new OKI cases was 4 weeks for female players and 7 weeks for male players. The median symptom duration of OAs was 9 weeks for females and 2 weeks for males. Median time to onset for new OA cases was 3 weeks for females and 7 weeks for males.

Conclusions The seasonal prevalence and symptom duration of OKIs and OAs is higher in female youth basketball players compared to males. OKIs represent a greater proportion of lower extremity overuse injury in males compared to OAs. Females reported new OKIs and OAs earlier in the season compared to males.

Background Sport-related concussions (SRC) have gained more attention in the recent years due to its detrimental short-term and long-term effects on the players.

Objective To assess the awareness and knowledge of SRC among sports physical therapists.

Design A cross-sectional study.

Setting An online survey.

Patients (or Participants) A total of 517 sports physical therapists completed the survey.

Interventions (or Assessment of Risk Factors) The survey consisted of multiple-choice questions related to the knowledge of physical therapy in managing SRC patients, case identification, and preventive measures was distributed to sports physical therapists. The questions of the survey were developed using instructions published by the University of Michigan School of Kinesiology Concussion Center (Ann Arbor, MI, USA).

Main Outcome Measurements SRC awareness levels and knowledge among sports physical therapists.

Results The survey scores ranged from 40% to 100%, with an average score of 62.7%. The highest educational qualification (46%) recorded among the respondents was a master’s degree. There was a difference in the score based on participants’ qualifications (Welch’s F (2, 308.3) = 15.3, p < 0.001). Pairwise comparisons revealed that participants with a doctoral/fellowship degree (62.1±18.5) or a masters’ degree (62.7±18.5) obtained greater scores than participants holding a bachelor’s degree (56.7±13.8) (p > 0.001). Additionally, there was no difference in the score between participants with a doctoral/fellowship degree or a masters’ degrees (p = 0.073). Furthermore, there was no difference in the survey score based on participants’ region (Welch’s F (4, 143.3) = 0.08, p = 0.988).

Conclusions The results suggested that a great number of sports physical therapists around the world are aware of current standards and guidelines regarding SRC assessment and management. However, the greatest difference was attributed to higher educational qualification, which denotes its significance recognizing and managing SRC.