

Why football helmets stay on after a neck injury — but motorcycle, lacrosse, and ice hockey helmets often don't

If a football player gets hurt and might have a neck injury, you'll often see the medical team leave the helmet on. But if a motorcycle rider crashes or a lacrosse or ice hockey player goes down, their helmet is usually removed right away. Why the difference? Aren't helmets all supposed to protect the head and neck the same way? Not exactly. Different sports use different types of helmets and shoulder pads, and that changes how medical teams handle injuries.

Football helmets and shoulder pads work together

Football helmets aren't physically attached to shoulder pads, but when worn together, they help keep the neck and spine in a safe, neutral position. Football shoulder pads are thick and raise the shoulders. If you take the helmet off and leave the shoulder pads on, the head can tilt backward, which may move the spine and cause further injury. Even small movements can make a neck injury worse.

To avoid this, the helmet is usually left on, and instead, the facemask is unclipped so medical staff can reach the player's face and help with breathing, without moving the head or neck. However, in some serious cases, certified athletic trainers may remove both the helmet and shoulder pads. They do it in a very careful and trained way using special tools to cut straps or press release buttons. These trainers know exactly how football gear works and how to keep the neck in a safe position. Sometimes certified athletic trainers remove both pieces to avoid confusion or mistakes in the emergency room, where doctors may not be as familiar with football equipment.

Motorcycle, lacrosse, and ice hockey helmets are different

Lacrosse and ice hockey helmets are smaller and used with thin shoulder pads. These pads don't raise the shoulders much, so if one removes the helmet, the head doesn't tip backward. This keeps the neck in a neutral and stable position. That's why in these sports, the helmet is often removed right away especially if the player is unconscious or having trouble breathing.

Motorcycle helmets are also handled differently. Motorcycle riders don't wear shoulder pads like football players, so their helmets can usually be removed more easily without affecting the neck's position.

Protecting the neck and spine comes first

In every sport, one of the most important goals during an injury is protecting the neck and spine. Helmets and shoulder pads work together to keep everything in line, and any mismatch in size or fit can cause problems if handled the wrong way. Football gear, in particular, needs to be treated carefully to avoid making a neck injury worse.

That's why medical teams often leave the helmet on and just remove the facemask at first. If the helmet and pads do need to come off, they're removed together and only by trained professionals who know how to do it safely.

Key takeaways

— Football helmets stay on to protect the spine because the thick shoulder pads can cause the head to tilt if the helmet is removed alone.

— Lacrosse, ice hockey, and motorcycle helmets can usually be removed safely because they're used with smaller or no shoulder pads.

— Certified athletic trainers are specially trained to remove football gear correctly when needed.

— The most important thing is always to keep the neck in a neutral position and avoid any movement that could make an injury worse.

James Slauterbeck, MD, is an orthopedic surgeon whose special interests include sports medicine, adolescent sports medicine, female sports medicine, and high school and college athletic injuries. He is affiliated with UNC Health Orthopedics at Southeastern Health Park and UNC Health Southeastern. To learn more, call (910) 738-1065 or visit <https://www.unchealth.org/care-services/doctors/s/james-r-slauterbeck-md>.

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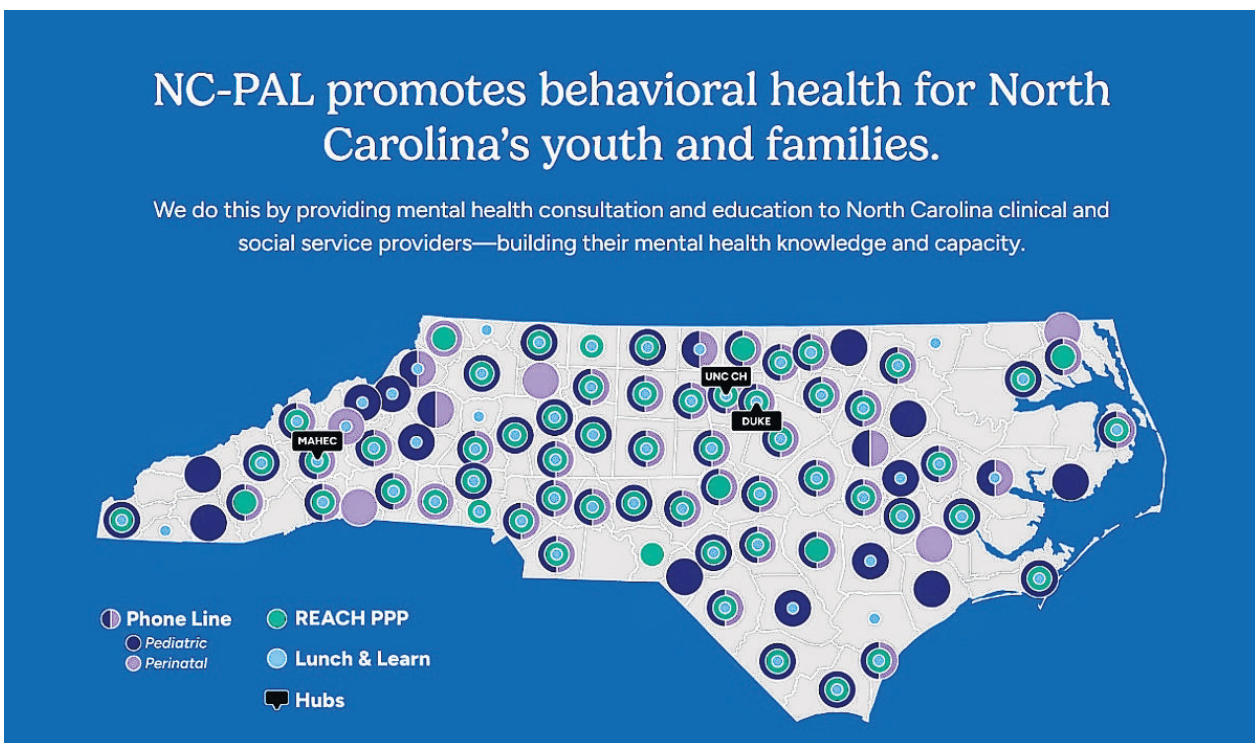
UNC Health Southeastern has enhanced its women's health services through a two-year, multi-phased initiative to upgrade its hospital services for women, mothers, and babies, as well as to consolidate its women's health clinics into one combined setting.

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NC-PAL graphic
This screengrab shows where the North Carolina Psychiatric Access Line, or NC-PAL, operates in North Carolina. Operated jointly by Duke and UNC schools of medicine with support from the state Department of Health and Human Services, NC-PAL offers a free phone line where pediatricians, family doctors and other providers can consult directly with behavioral health specialists about their patients.

Helpline gives pediatricians crucial mental health information to help kids, families

Emily Chambliss
NC Health News

In North Carolina, the odds of finding a child psychiatrist depend too often on your ZIP code. Even in urban counties such as Wake or Mecklenburg, families may wait months for an appointment. In much of rural North Carolina, the wait is indefinite: There is simply no one to see.

Sixty-one counties lack a child psychiatrist, according to the UNC Sheps Center for Health System Research. The shortage is not new, but the urgency is. Duke University reported a significant increase in suicide-related hospitalizations for children during the COVID-19 pandemic, with as many as 50 referrals a day to specialty care. The rate has come down some since the spike in 2020, but between 2013 and 2023 (the latest year for complete data) the overall suicide

for teens increased by 30 percent.

More than half of North Carolina's 2.6 million children under the age of 19 get their health care from Medicaid, yet only about 150 child psychiatrists statewide see Medicaid patients, said Gary Maslow, a psychiatrist with Duke Health. That size workforce is unable to keep pace with demand.

"The distance between care and your home can be really far, especially the farther you are from the larger cities," Maslow said. "It can leave psychiatric care almost entirely inaccessible for many people in our state."

This means pediatricians and family doctors — often with little mental health training — are faced with the prospect of diagnosing complex conditions and prescribing powerful medications.

The North Carolina Psychiatry Access Line

was launched in 2017 to help close that gap. Operated jointly by Duke and UNC schools of medicine with support from the state Department of Health and Human Services, NC-PAL offers a free phone line where pediatricians, family doctors and other providers can consult directly with behavioral health specialists about their patients.

'Not fumbling anymore'

NC-PAL operates weekdays from 8 a.m. to 5 p.m. Providers call a central number and are first connected with a behavioral health consultant — often a social worker or psychologist — who gathers details about the case. If the issue involves diagnosis or medication, the call is transferred to a child or perinatal psychiatrist.

Maslow, who directs the program, described the approach as "consultation through education." Providers leave the call with prac-

tical guidance they can use with future patients.

For pediatricians like Debi Best at Duke Health, that support is reassuring.

"When I call, I walk back into the room with a family and I'm not fumbling anymore," she said. "The parents see that I have a plan, and the relief on their faces — that's the difference NC-PAL makes."

Training the existing workforce

North Carolina medical schools don't have room to train enough psychiatrists to meet demand. Maslow said it would take doubling the workforce just to make a dent, so NC-PAL focuses on strengthening the skills of existing providers.

Emily Chambliss is a 2025 summer intern for NC Health News. She just graduated from the journalism program at UNC Chapel Hill and is headed off to NYU's masters degree in science journalism program in the fall.

Long named to Becker's 2025 Supply Chain Leaders to Know List

Amanda Crabtree
For The Robesonian

LUMBERTON — UNC Health Southeastern Director of Supply Chain Management Candace Long was named as one of Becker's Hospital Review's 64 hospital and health system supply chain leaders to know in the list published in August 2025. Long was also recognized with this honor in 2023 and 2024.

According to Becker's, "Supply chain leaders are behind-the-scenes strategists who keep hospitals and health systems running

smoothly and efficiently. With deep expertise in healthcare supply chain management, they deliver cost savings, build strong strategic partnerships and ensure critical inventory is available. These leaders navigate through supply chain challenges with grace, developing more resilient operations."

Long's entry reads: "Ms. Long has led her organization through two major supply chain system implementations during UNC Health

Southeastern's integration with Chapel Hill, N.C.-based UNC Health, ensuring operational stability during times of transition. In her role, Ms. Long chairs the UNC Health supply chain guidelines and procedures committee, serves

on the systemwide supply chain leadership team and represents her community hospital on the value analysis team. She works closely with the group purchasing organization to identify programs that improve



Long



contract utilization and drive cost savings. Ms. Long was promoted to director in May 2022 after serving as interim director for more than six months."

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Carolina Eye Associates welcomes new physician

Staff report

LUMBERTON — Carolina Eye Associates is pleased to announce the addition of Molly Walsh, M.D., to its medical staff. She will be serving patients in the Cheraw, Fayetteville, Lumberton and Southern Pines clinics.

Molly Walsh, M.D.

is a specialist in glaucoma treatment and cataract surgery. Dr. Walsh received her medical degree from Tulane University School of Medicine in New Orleans, Louisiana. She completed her Glaucoma fellowship at Duke University



Walsh

Medical Center. Using state-of-the-art diagnostic and surgical equipment, she is experienced in diagnosing, monitoring and treating many types of ocular diseases. Dr. Walsh spent time on the Ophthalmology faculty at Duke Uni-

versity from 2006 to 2021. She relocated to North Carolina and joined Carolina Eye Associates in 2025 after living in Indiana for several years. She is a member of the American Academy of Ophthalmology and part of the Associates for Research in Vision and Ophthalmology.