CANDIDATE FOR MEMBER-AT LARGE

Margot Putukian, MD, FACSM, FAMSSM

BIOGRAPHICAL INFORMATION

Chief Medical Officer, Major League Soccer Team Physician (TP), US Women's National Soccer Teams Past President, American Medical Society for Sports Medicine

Background:

- Former Director of Athletic Medicine/Head TP, Princeton University (2004-2021). Previously @Penn State University
- BS degree; Yale University
- Board certified in Internal Medicine and Subspecialty Certification in Sports Medicine
- USOPC TP Olympics (Beijing 2022 & Paris 2024)
- US Men's National Lacrosse TP, 2010-2018

Committees:

- Senior advisor for the NFL Head, Neck & Spine
- US Soccer Medical
- NFL General Medical
- FA Research Task Force
- IOC Mental Health Work Group
- USOPC Mental Health Task Force
- Former Chair, USA Lacrosse Sport Science & Safety Committee (2010-2019)

Publications:

- Invited expert/co-author International CISG Conferences (2008-2022)
- Co-author several TP Consensus Statements, AMSSM Position Statements.
- Editor for Netter's Sports Medicine textbook, involved in clinical research, >150 peer-reviewed publications, >60 book chapters and >240 regional, national or international presentations.

CANDIDACY STATEMENT

I am honored to be nominated to serve as an at large member for the CISG Board. I went to medical school knowing I wanted to be a team physician. Early in my career I was particularly fascinated by athletes with sport-related concussion (SRC). One patient was complicated, and I referred her to a sports neuropsychologist. That referral led to more and subsequently the opportunity to participate in sentinel clinical research involving collegiate student-athletes. Learning about sports neuropsychology and SRC from a leader in the field helped shape my career.

Being asked to participate as an expert panelist/author in the CISG (since 2008) is a highlight of my career. Learning from athletic trainers (ATs), neuropsychologists, physical therapists, researchers and physicians from many disciplines is what makes CISG powerful. Bridging the gaps between research and

clinical practice is essential, and what I think is the most important initiative for CISG; bringing science to the field. My experience as a team physician on the sideline, office and treating SRC alongside other specialists, as well as my research background provides an important perspective to serve the CISG.

I have experience as a team physician, caring for several sports of all ages including collegiate and Olympic/National teams. Being on the sideline and in clinic, working with athletes, ATs, coaches and other stakeholders has been an immense privilege. I've contributed to SRC research; evaluating sideline tools, risk factors for SRC and prolonged recovery, as the first PI for the Ivy-Big Ten TBI Study and for Princeton in the NCAA-DoD CARE Consortium.

I've had opportunities to co-author published Statements on SRC including; the NATA, Team Physician Consensus, the CISG and AMSSM. I've served on several committees, including the NFL Head, Neck & Spine (HNS), US Soccer Sports Medicine, and the FA Research Task Force. When I joined the NFLHNS Committee in 2010, I chaired the subcommittee on RTP and, along with other CISG members, helped develop the "NFL-SCAT", at a time when no standardized protocol for SRC existed. To see the CISG outputs inform/improve the protocols of professional/elite sport all the way down to grassroots sport, is tremendous.

The CISG has the opportunity to continue its leadership by providing education, as well as networking and mentoring opportunities in research and clinical practice. Providing resources and opportunities to improve the quality of research is essential, with more collaborations around the world such that a diversity of athletes is included to address the deficits in the current literature.

As the CISG outputs evolve, our ability to diagnose and treat SRC improves. We need to understand the sensitivity/specificity of the SCAT6/SCOAT6. Components of brain health including mental health, nutrition, and cognitive and oculovestibular training deserve additional attention. We need to know more about prevention, and emerging technologies to allow us to predict, measure and follow the "signal" of SRC. I hope that I can serve the CISG Board by providing a perspective as a sideline/clinic physician with research experience to bridge the gap between the science and the field.