

Rensselaer City School District Concussion Management Policy

The following concussion management policy shall be followed for all students in the Rensselaer City School District that display signs and symptoms of a concussion. This includes interscholastic athletes as well as students in physical education classes. This policy is based upon the Concussion Management and Awareness Act that went into effect on July 1, 2012 for all public schools and charter schools. The items listed below are required for school districts to be in compliance with the law. Some of the items are specifically spelled out in the law and others have been recommended by the State Education Department and the Department of Health and approved by the State Education Department.

The Health and Wellness Team shall guide, implement and periodically review the Concussion Management Policy. The team will include the following individuals:

- District Health Coordinator
- Athletic Director
- School Nurse
- School Chief Medical Officer
- Athletic Trainer
- Coach
- Such individuals as may be directed by the Superintendent of Schools

The Rensselaer City School District will provide concussion management and awareness information to parents and students. Information will be made available in written documents and the sign-off on the RCSD Sports Eligibility Form. Concussion management and awareness information and the school district concussion management policy will be made available on the Rensselaer City School District website.

Concussion Training:

- Each school coach, physical education teacher, nurse and athletic trainer will have to complete an approved course on concussion management on a biennial basis.
- School coaches and physical education teachers must complete the Center for Disease Control On-line Concussion Training for Coaches course at www.cdc.gov/concussion/HeadsUp/online_training.html
- School nurses and certified athletic trainers must complete the Preventing Concussion course at <http://preventingconcussions.org>
- A course completion certificate must be filed with the School District for each course.

Removal from Athletics/Physical Education Classes:

A student will be immediately removed from athletic activities if it is believed that student may have sustained a mild traumatic brain injury.

- No student will be allowed to resume athletic activities until they have been symptom-free for 24-hours and have been evaluated by and received written and signed authorization from a licensed physician. For interscholastic athletics, clearance must come from the School Chief Medical Officer, or designee, after the Concussion Management Return to Play Protocol has been completed.

- Such authorization must be kept in the student's permanent health record.
- Schools shall follow directives issued by the student's treating physician, unless otherwise directed by the School Chief Medical Officer, or designee.

On Field Evaluation:

During practices and contest, athletes demonstrating signs and symptoms of a concussion should be evaluated by the coach and/or athletic trainer. If determined to have a possible concussion, the athlete should not be permitted to continue any activity. Proper protocol and procedure must be followed as outlined in this policy. Student athletes may not return to practice or games until the *Concussion Management Return to Play Protocol* has been completed.

Physical Education Class:

Students exhibiting the signs and symptoms of a head injury must be reported to the School Nurse. Any student or student athlete reported to the nurse as exhibiting signs and symptoms of a head injury will be restricted from physical education class for a minimum of seven days and must have a physician's clearance to return to class. Clearance must come after the Concussion Management Return to Play Protocol has been completed.

Definition of a Concussion:

A concussion is a type of traumatic brain injury caused by a bump, blow or jolt to the head that can change the way your brain normally functions. Concussions can also occur from a blow to the body that causes the head to move rapidly back and forth. What appears to be a mild bump or blow to the head can be serious. This sudden movement of the brain can cause stretching and tearing of brain cells, damaging the cells and creating chemical changes in the brain.

Concussion Signs and Symptoms:

Post concussive symptoms can be physical, cognitive and emotional.

- Physical symptoms include: headache, dizziness, nausea, feeling unsteady, feeling "dinged" or "stunned" or "dazed", feeling like their "bell was rung", seeing stars or other visual disturbances, ringing in the ears, double vision, simply "not feeling right".
- Cognitive symptoms include: confusion, amnesia, disorientation, poor concentration, and memory disturbance.
- Emotional symptoms include: feeling of depression or moodiness.
- Physical signs of concussion include: loss of consciousness or impaired consciousness, poor coordination or balance, easy distractability, poor concentration, slowness answering questions and following directions, vomiting, looking "glassy eyed", photophobia, slurred speech, personality or behavior changes and significantly decreased performance or playing ability.

It is important to note that not all concussions will include all of these features. If any one of the aforementioned symptoms (or other similar symptoms) is present, concussion injury should be suspected. Symptoms and signs may be more pronounced later or the next day after the injury. A person does not

have to have lost consciousness to have sustained a concussion.

Grading Concussions:

Simple concussions refer to an athlete that suffers an injury that progressively resolves without complication over 7-10 days. Simple concussions represent the most common form of this injury. Simple concussions can be managed appropriately by primary care physicians or by certified athletic trainers working under medical supervision. Management of a simple concussion includes rest until all symptoms resolve followed by a step by step program of exertion before return to sport. All concussions mandate evaluation by a medical physician.

Complex concussions encompass cases where the athlete suffers persistent symptoms, including persistent symptom recurrence with exertion. A complex concussion will typically have characteristics such as concussive convulsions, prolonged loss of consciousness lasting longer than one minute or prolonged cognitive impairment. These athletes should be referred to and managed by physicians with specific expertise in the management of concussive injury. Such experts may include sports physicians, sports neurologists, or neurosurgeons.

Concussion Management:

A player should never return to play while symptomatic. When an athlete shows ANY symptom or sign of a concussion:

1. The player will not be allowed to return to play in the current game or practice.
2. The player will not be left alone; and regular monitoring for deterioration is essential over the initial few hours following injury. Once the athlete is released to the parent following a contest or practice, it becomes the responsibility of the parent to monitor the athlete.
3. The player should be medically evaluated following the injury using the concussion checklist on the sideline or in the trainer's office.
4. Return to play must follow a medically supervised, step by step plan currently recommended by NYSPHSAA.
5. The athlete must be picked up by the parent or guardian only.
6. A follow-up call will be made by the medical staff or person that cared for the athlete to check status of the athlete.
7. The incident must be reported to the nurse's office and an accident report must be filled out.

Return to Play Protocol:

During the recovery period, in the first few days following the injury, it is important to emphasize to the athletes that physical and cognitive rest is recommended. Activities that require concentration and attention may exacerbate the symptoms and as a result, delay recovery.

Athletes may not return to play following a concussion until the following 6-day return to play protocol has been followed:

- DAY 1** Low-impact, non-strenuous, light aerobic activity.
- DAY 2** Higher-impact, higher-exertion, moderate aerobic activity. No resistance training.
- DAY 3** Sport specific exercise. Non-contact activity. Low resistance weight training with a spotter.

- DAY 4** Sport specific activity, non-contact drills. Higher resistance weight training with a spotter.
- DAY 5** Full contact training drills and intense aerobic activity
Contact Health Office after Day 5 is completed.
Clearance from School Medical Director or designee.
- DAY 6** Return to full activities.

With this progression, the athlete should continue to the next level if asymptomatic at the current level. If any post concussion symptoms occur, the athlete should drop back to the previous asymptomatic level and try to progress again after 24 hours. Athletes should be symptom-free without the use of any medication to mask the pain. The program and return to play will be monitored by the coach or physical education staff member. Two steps cannot be done in one day.

The above policy will be followed by all health care professionals (athletic trainers, school nurse, school physician), coaches, teachers and administrators in the Rensselaer City School District that are responsible for the supervision of student athletes. **The concussion management / return to play protocol will be followed for returning an athlete to play after a concussion, despite the athlete presenting a prescription note to return to play sooner from their primary care physician or emergency room physician.** If an athlete presents a prescription from their primary care physician, they will be started on the appropriate level of the return to play protocol.

Prior to returning to play, the athlete is required to have the Return to Play Form signed by the following people: School Medical Director or designee, School Nurse, and staff or faculty member responsible for completing the 6-Day Return to Play Protocol.

Adopted by the Board of Education: January 15, 2014