

Central Square School District

Comprehensive Concussion Management Regulation

The Board of Education of the Central Square School District recognizes that concussions and head injuries are commonly reported injuries in children and adolescents who participate in sports and recreational activity. The district also recognizes that serious consequences can result if concussions are not managed carefully. Therefore, the CSSD adopts the following regulations to assist in the proper evaluation and management of head injuries:

Definition:

A concussion is a type of traumatic brain injury (TBI) that occurs when normal brain functioning is disrupted by a blow or jolt to the head. Concussions can also occur from contact causing the head to move rapidly back and forth, rattling the brain within the skull.

Signs and Symptoms of a Concussion:

Certified athletic trainers and physicians need to be aware of the signs and symptoms of a concussion to properly recognize and intervene on behalf of the student-athlete.

Physical Symptoms

Headache
Impaired Vision
Nausea
Dizziness
Balance Difficulties
Light Sensitivity
Fatigue

Cognitive Symptoms

Memory Loss
Attention Disorders
Reasoning Difficulties

Emotional Symptoms

Irritability
Sadness
Nervousness
Sleep Disturbances

Any student demonstrating signs, symptoms, or behaviors consistent with a concussion shall be removed from the game or activity and be evaluated as soon as possible by an appropriate health care professional. This includes all students participating in a school sponsored class, extracurricular activity, or interscholastic athletic event. A member of the CSSD concussion management team should notify the student's parents or guardians and recommend appropriate management of the injury. The student will not return to activity until released by an appropriate health care professional and the school nurse. A student that continues to have signs or symptoms upon return to activity must be removed from play and re-evaluated by his/her health care provider.

Any student who sustains a head injury, or confirmed concussion outside of school should report the incident to the school nurse for an evaluation prior to participating in any school related activity.

Education:

Each school coach, physical education teacher, nurse, and athletic trainer will have to complete an approved course on concussion management on a biennial basis, starting with the 2012-2013 school year. Education of parents will be accomplished through preseason meetings for sports and/or information sheets. Additional information is available at: <http://www.nysphsaa.org/safety>

Updated 11/17/14

Neurocognitive Testing

The Central Square School District may allow credentialed District staff to use validated neurocognitive computerized testing as a concussion management tool. These programs establish baselines for student-athletes and allow for post-concussion performance evaluations. Neurocognitive testing is not a replacement for a medical evaluation of a student's condition, but may be used in the Return to play (RTP) procedure as established by the CSSD.

Concussion Management Team:

The Central Square School District may establish a concussion management team (CMT). The team may consist of the athletic director, school nurse, athletic trainer, teachers, coaches, and the school physician. It is the duty of this group to implement and monitor the concussion management policy and program. The CMT will also act as a liaison for any student returning to school and/or play following a concussion, reviewing and/or designing an appropriate plan for the student while he/she recovers.

Return to Play Protocol:

Return to play (RTP) following a concussion involves a stepwise progression once the individual is free from symptoms. There are many risks associated with premature return to play including: a greater risk for second concussion because of a lower concussion threshold, second impact syndrome (abnormal brain blood flow that can result in death), exacerbation of any current symptoms, and an increased risk for additional injury due to alteration in balance. The current RTP recommendations through the NYSPHAA require:

- The immediate removal from athletic activities of any pupil that has, or is believed to have sustained a mild traumatic brain injury. "When in doubt, sit them out"

The above prohibits a student from returning to play on the day the head injury was sustained and will require the student to be evaluated by a licensed physician. A student will not be allowed to return to any activity until a physician completes the Concussion Evaluation Form indicating that the student is asymptomatic.

Scenario 1 (no concussion):

If the physician, following examination and the completion of the Concussion Evaluation Form, determines that the student **did not** sustain a concussion, the following protocol should be adhered to once the student is *symptom free for **24 hours** and cleared by the treating physician and school nurse:*

- Day 1: Low impact, non-strenuous, light aerobic activity
Higher impact, higher exertion, moderate aerobic activity. No resistance training.
- Day 2: Sport-specific non-contact activity and low resistance weight training.
Sport-specific activity, non contact drills and higher resistance weight training.
- Day 3: Full contact training drills and intense aerobic activity.
- Day 4: Return to full activities.

If there is any return of symptoms during the RTP protocol, the student will return to the previous day's activities until symptom free for 24 hours at that step.

Scenario 2 (concussion):

If the physician, following examination and the completion of the Concussion Evaluation Form, determines that the student **did** sustain a concussion, the following protocol should be adhered to once the student is *symptom free for **7 consecutive days** and cleared by the treating physician and school nurse:*

- 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 non-contact activity and low resistance weight training.
- Day 4: Sport-specific activity, non contact drills and higher resistance weight training.
- Day 5: Full contact training drills and intense aerobic activity.
- Day 6: Return to full activities.

If there is any return of symptoms during the RTP protocol, the student will return to the previous day's activities until symptom free for 24 hours at that step.

Multiple Concussion Policy

A student or student-athlete must be evaluated by a concussion expert in order to determine if it is safe and prudent for them to return to activity given the following scenarios:

- a) Pupil suffers three (3) medically diagnosed concussions during his/her lifetime or
- b) Pupil sustains two (2) medically diagnosed concussions within 12-15 months or less

The physician may make alternative suggestions for acceptable sport participation though there is always the possibility that the student will no longer be able to participate in any sport or activity offered by the school district given his/her concussion history.