

# ***Governor Mifflin Sports Medicine***



## ***Concussion Management Policy Information and Procedures***

# GOVERNOR MIFFLIN SCHOOL DISTRICT

## SPORTS MEDICINE DEPARTMENT

### CONCUSSION POLICY AND MANAGEMENT GUIDELINES

**Protocol Statement:** This document outlines protocol and procedures to assist in the management of concussions and the safe return to academics and sport for student-athletes managed by the Governor Mifflin Sports Medicine department.

**Purpose:** To define, develop and communicate a comprehensive outline for the Sports Medicine team on the proper recognition, evaluation, and management of a student-athlete who sustains a concussion.

#### **What is a concussion (Mild Traumatic Brain Injury)?**

A concussion occurs when a sudden force to the body interrupts brain function.

- Can occur when an athlete is struck in the head by an object (ball, baseball bat, lacrosse/fh stick)
- Can occur when the athlete's moving head strikes some fixed object (floor, turf, goal post), which results in impact deceleration of the brain.
- Can happen even if an athlete has not lost consciousness.

#### **What are the symptoms of a concussion?**

Concussions cannot be seen on typical medical imaging; however, in a potentially concussed student athlete, any **one** of the symptoms listed below may become apparent.

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Bothered by light or noise
- Feeling sluggish, hazy, foggy, or groggy
- Difficulty paying attention
- Memory problems
- Fatigue
- Ringing in ears
- Confusion
- Loss of consciousness
- Irritable

- Nervous
- Inappropriate emotions
- Vacant staring

**What should athletes do if they believe that they may have a concussion?**

- Athletes feeling any of the symptoms set forth above should immediately tell their coach.
- That athlete should then be evaluated by a sports medicine professional.
- If diagnosed with a concussion, the athlete must take the time for his/her brain to heal
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**Repeat concussions can increase the time it takes for an already concussed athlete to recover and may cause more damage to his/her brain. Such damage can have long term consequences. It is important that a concussed athlete rest and not return to physical activity until he/she is symptom-free and receives a clearance note from a physician.**

**Don't hide it. Report it. Take time to recover.**

## **SECTION I: EDUCATION RECOMMENDATIONS**

The following educational recommendations for all Governor Mifflin School District athletics groups including coaches, parents and student-athletes has been established.

1. An informational meeting on concussions should be held annually or before each sport season for coaches, parents and student-athletes. These meetings should include but not limited to:

- a. Prevention Strategies
- b. Management
- c. Plan of Care
- d. Return to Academics
- e. Return to Play

2. Coaches and parents/guardians will share in the success of the Governor Mifflin Sports Medicine Department's concussion policy by attending scheduled educational sessions and supporting their student athletes as they adhere to the guidelines and progress through the recovery process.

3. All students desiring to participate in any athletic program and the student's parent or guardian shall, sign and return to the school an acknowledgement of their receipt and review of concussion and traumatic brain injury information, located in the PIAA physical packet, each school year.

4. Additional training material is available on-line through the Pennsylvania Department of Education or Health ([www.state.pa.us](http://www.state.pa.us)) and through the Centers for Disease Control and Prevention ([www.cdc.gov](http://www.cdc.gov)).

## **SECTION II: PREVENTION STRATEGIES**

### **Student-Athlete**

1. Student-athletes will be educated on the importance of taking responsibility for reporting their signs and symptoms to their coach, parent, and athletic trainer, as well as adhering to the Governor Mifflin Sports Medicine Concussion Policy.
2. The student-athlete is responsible for performing daily inspections of their equipment and reporting any issues to the appropriate designate prior to the next team event. The student-athlete may not perform any maintenance on their equipment nor alter their equipment. Sports equipment includes but is not limited to helmets, protective eye wear and mouth guards.

### **Coach**

1. The concussion policy will be reviewed annually with coaches by members of the Governor Mifflin Sports Medicine Team.
2. Once each year, all coaches will be required to complete a PA Department of Health approved concussion management certification course.
  - a. See the following link: <http://www.piaa.org/news/details.aspx?ID=2924>
3. All headgear must be certified by the appropriate governing organization and fitted by a designate that has appropriate knowledge of equipment fitting.

### **Parents**

1. Parents will be educated on the importance of reporting their child's signs and symptoms to the coach, athletic trainer, or other appropriate school official as well as adhering to the concussion policy.

## **SECTION III: MANAGEMENT**

### ***Step 1: Acute Management***

1. Any student-athlete who exhibits any signs and/or symptoms of a concussion while participating in a school sponsored athletic event will be removed from activity for the day and not allowed to perform any activities that may increase the severity of the signs and/or symptoms.
2. If an athletic trainer or a team physician is on site, the student-athlete will be referred to that individual for an immediate concussion evaluation.
3. After examination by the team physician or athletic trainer, a student-athlete who is suspected to have suffered a concussion will be excluded from participation for the remainder of the day. Return to participation on the same day will only be allowed if the team physician and/or athletic trainer determine that no concussion or other brain injury has occurred and the student-athlete is otherwise in good health.
4. The athletic trainer must contact the student-athlete's parents or guardian if he or she is exhibiting any signs and/or symptoms of a concussion or other brain injury.
5. If a physician or athletic trainer is not present at the event, the head coach for the team will be responsible for keeping the student-athlete out of play for the day and must contact the athletic trainer and the parent or guardian of the student-athlete.

### ***Step 2: Monitoring and Emergent Referral***

1. Following a suspected concussion, the athletic trainer or coach should perform serial monitoring every 15-20 minutes for signs of cognitive or neurological deterioration.
2. Any deterioration or displaying of the following signs or symptoms will warrant immediate emergency referral:
  - a. Loss of consciousness
  - b. Deterioration of neurological function
  - c. Decreasing level of consciousness
  - d. Abnormally unequal, dilated, or unreactive pupils
  - e. Any signs or symptoms of associated head/neck injuries, spine or skull fractures, or bleeding
  - f. Changes in mental status
  - g. Slurring of speech
  - h. Headaches that are worsening over time
  - i. inability to recall new events after the injury (anterograde amnesia)
  - j. Seizure
  - k. repetitive vomiting
3. Parents will be notified of concussion as soon as possible once student-athlete is stabilized.
4. Student-athletes will be withheld from vigorous activity until cleared by a physician.

### ***Step 3: Plan of Care***

1. The student-athlete will be referred to a physician trained in the evaluation and management of concussions. The GM sports medicine staff will help to facilitate this appointment.
  - The physician will make return to school recommendations and articulate this with the student-athlete, parent/guardian, and athletic trainer.
  - The athletic trainer will be responsible for notifying coaches of the student-athletes concussion, and will be updated regularly on their appropriate level of participation.
2. The student-athlete will be instructed to check in with the athletic trainer daily and if applicable the school nurse.
  - A decline in condition will be communicated directly to the treating physician.

### ***Step 4: Return to Academics***

#### **Secondary School**

The athletic trainer and parent/guardian will work together to ensure the school nurse is notified once concussion is suspected and physician notes given upon receipt. The school nurse and school guidance counselor will work collaboratively to notify the appropriate teachers of the student-athlete's concussion, and possible classroom modifications (see addendum 1 for an example). Special classroom modifications may include but are not limited to:

- Take rest breaks as needed
- Spend fewer hours at school (have a shortened school day)
- Be given more time to take tests or complete assignments. (All courses should be considered).
- Receive help with schoolwork (e.g. pre-teaching, outlines, note-taker).
- Reduce time spent on the computer, reading, and writing.
- Be granted early dismissal from each class to avoid crowded hallways.
- No standardized testing (e.g. PSSA, SAT) until cleared by the treating physician
- No band or chorus activities.

### **Step 5: Return to Play**

Return to play depends on several factors

1. Children and adolescents should not return to sport until they have successfully returned to academics.
  - a. Early introduction of symptom-limited physical activity may be appropriate.
2. Physical exam
3. Past history of concussion or other brain injury
4. Recommendations of the treating physician and athletic trainer

The student-athlete must meet **ALL** of the following criteria to begin his/her return to play protocol:

1. Asymptomatic at rest, in the classroom, and with limited physical exertion.
2. Written clearance from a physician must be obtained prior to beginning return-to-play protocol.

Once a physician note is handed in to the sports medicine department, the athlete is **still not cleared to immediately return to their sport.**

After being cleared by a physician, all athletes must complete the GM sports medicine staff's graduated return to play protocol.

***\*Notes from outside physicians will not be used to override the GM sports medicine protocol.***

**RTP Protocol:** Progression through the return to play protocol is individualized and will be determined on a case-by-case basis. The speed of progression will be established by collaboration between student-athlete and GM sports medicine staff. A typical return to play protocol will last 4 days.

An example of a return to play protocol is as follows:

**Day 1 – 30 minutes on stationary bike**

**Day 2 – circuit workout using running/bike with body weight strength exercises**

**Day 3 – NON-CONTACT practice**

**Day 4 – FULL CONTACT PRACTICE**

- If an athlete's symptoms return during any phase of the return to play protocol, they will be put on rest for 24 hours until symptoms subside and must return to the same day of their return to play protocol that they were on before symptoms surfaced.
  - **If your child's symptoms continue to return during the return to play protocol, he/she must go back to his/her physician for re-evaluation and return with a detailed note explaining the plan of action.**
- Once your child has been cleared by the physician and successfully completes the return to play process, they will be cleared to return to athletics.

## **SECTION IV: RESOURCES**

### **Centers for Disease Control and Prevention – Concussion Toolkit**

[http://www.cdc.gov/concussion/HeadsUp/physicians\\_tool\\_kit.html](http://www.cdc.gov/concussion/HeadsUp/physicians_tool_kit.html)

<http://www.cdc.gov/concussion/headsup/pdf/ACE-a.pdf>

[http://www.cdc.gov/concussion/headsup/pdf/ACE\\_care\\_plan\\_school\\_version\\_a.pdf](http://www.cdc.gov/concussion/headsup/pdf/ACE_care_plan_school_version_a.pdf)

[http://www.cdc.gov/concussion/headsup/pdf/Concussion\\_in\\_Sports\\_palm\\_card-a.pdf](http://www.cdc.gov/concussion/headsup/pdf/Concussion_in_Sports_palm_card-a.pdf)

**National Federation of State High Schools Association- Online “Concussion in Sports” training program:** [www.nfhs.org](http://www.nfhs.org)

**Brain Injury Association of Pennsylvania (BIAPA):** [www.biapa.org](http://www.biapa.org)

**Pennsylvania Athletic Trainers Society (PATS):** [www.gopats.org](http://www.gopats.org)

**Pennsylvania Interscholastic Athletic Association (PIAA):** [www.piaa.org](http://www.piaa.org)