

OAKWOOD CUSD #76

Parent and Student Agreement/Acknowledgement Form Performance-Enhancing Substance Testing Policy

- Illinois state law prohibits possessing, dispensing, delivering or administering a steroid in a manner not allowed by state law.
- Illinois state law also provides that body building, muscle enhancement or the increase in muscle bulk or strength through the use of a steroid by a person who is in good health is not a valid medical purpose.
- Illinois state law requires that only a licensed practitioner with prescriptive authority may prescribe a steroid for a person.
- Any violation of state law concerning steroids is a criminal offense punishable by confinement in jail or imprisonment in the Illinois Department of Corrections.

STUDENT ACKNOWLEDGEMENT AND AGREEMENT

As a prerequisite to participation in IHSA athletic activities, I agree that I will not use performance-enhancing substances as defined in the IHSA Performance-Enhancing Substance Testing Program Protocol. I have read this form and understand that I may be asked to submit to testing for the presence of performance-enhancing substances in my body, and I do hereby agree to submit to such testing and analysis by a certified laboratory. I understand that testing may occur during selected IHSA state series events or during the school day. I further understand and agree that the results of the performance-enhancing substance testing may be provided to certain individuals in my high school as specified in the IHSA Performance-Enhancing Substance Testing Program Protocol which is available on the IHSA website at www.IHSA.org. I understand and agree that the results of the performance-enhancing substance testing will be held confidential to the extent required by law. I understand that failure to provide accurate and truthful information could subject me to penalties as determined by IHSA.

PARENT/GUARDIAN CERTIFICATION AND ACKNOWLEDGEMENT

As a prerequisite to participation by my student in IHSA athletic activities, I certify and acknowledge that I have read this form and understand that my student must refrain from performance-enhancing substance use and may be asked to submit to testing for the presence of performance-enhancing substances in his/her body. I understand that testing may occur during selected IHSA state series events or during the school day. I do hereby agree to submit my child to such testing and analysis by a certified laboratory. I further understand and agree that the results of the performance-enhancing substance testing may be provided to certain individuals in my student's high school as specified in the IHSA Performance-Enhancing Substance Testing Program Protocol which is available on the IHSA website at www.IHSA.org. I understand and agree that the results of the performance-enhancing substance testing will be held confidential to the extent required by law. I understand that failure to provide accurate and truthful information could subject my student to penalties as determined by IHSA.

Oakwood CUSD #76 Concussion Guidelines

Return to Play and Return to Learn

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move rapidly back and forth. This sudden movement can cause the brain to bounce around or twist in the skull, stretching and damaging the brain cells and creating chemical changes in the brain.

Concussion signs and symptoms generally show up soon after the injury. However, you may not know how serious the injury is at first and some symptoms may not show up for hours or days. A Concussion Oversight Team (COT) consisting of the building administrator, athletic director, school nurse, and athletic trainer (as available) in conjunction with the student’s physician, will oversee the return-to-play and return-to-learn plans for each individual student affected with a concussion.

Concussion signs and symptoms:

Athletes who experience one or more of the signs and symptoms listed below after a bump, blow, or jolt to the head or body may have a concussion.

Symptoms reported by athlete could include:

- Headache or “pressure in the head”
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light and or noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems, confusion
- Just not “feeling right” or “feeling down”

Signs observed by coaching staff could include:

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes
- Can’t recall events prior to hit or fall

If you suspect that an athlete has a concussion, you should take the following steps:

1. Remove the athlete from play.
2. Complete the ‘Concussion Signs and Symptoms Checklist’.
3. Inform the athlete’s parents or guardians about the possible concussion.
4. Ensure that the athlete is evaluated by a health care professional experienced in evaluating for concussion. This can be their primary doctor or sports medicine professional.
5. Keep the athlete out of play the day of the injury. An athlete should only return to play with permission from a health care professional, who is experienced in evaluating for concussions.

6. Complete the 'IHSA/IESA Post-concussion Consent Form' once the treating physician releases the student to return-to-play and return-to-learn.

Return-to-Play (RTP) Step Progression

After a concussion, an athlete should only return to sports practices with the approval and under the supervision of their health care provider and/or certified athletic trainer. A student must follow the five step return to play progression. In some cases, the athlete may be able to work through one step in a single day, while in other cases it may take several days to work through an individual step. This gradual process may take several weeks to months to work through the entire 5-step progression.

Baseline

As the baseline step of the Return-to-Play (RTP) Progression, the athlete needs to have completed physical and cognitive rest and not be experiencing concussion symptoms for a minimum of 24 hours. The athlete is back to their regular school activities, is no longer experiencing symptoms from the injury when doing normal school activities, and has the green-light from their health care provider to begin the RTP process.

Step 1: Light, aerobic activity

- Begin with light aerobic exercise only to increase an athlete's heart rate; 5 to 10 minutes on an exercise bike, walking or light jogging.
- No weight lifting, jumping or hard running at this point.

Step 2: Moderate activity

- Continue with activities to increase an athlete's heart rate with limited body or head movement; moderate jogging, brief running, moderate-intensity stationary biking, moderate intensity weightlifting.
- Less time and less weight from their typical routine.

Step 3: Heavy, non-contact activity

- Add more intense, non-contact physical activity close to typical routine, such as sprinting/running, high intensity stationary biking, regular weightlifting routine, non-contact sport-specific drills.

Step 4: Full contact practice or training

Step 5: Full game play

It is important to monitor symptoms and cognitive function carefully during each increase of exertion. Athletes should only progress to the next level of exertion if they are not experiencing symptoms at the current level. If concussion signs and behaviors return at any step, an athlete should stop these activities as this may be a sign the athlete is pushing too hard. Only after additional rest, when the athlete is once again not experiencing symptoms for a minimum of 24 hours, should he or she start again at the previous step during which symptoms were experienced.

Reminders for coaches:

1. No athlete should RTP or practice on the same day of a concussion.
2. Any athlete suspected of having a concussion should be evaluated by an appropriate health-care professional or certified trainer that day.
3. Any athlete with a concussion should be medically cleared by an appropriate health-care professional or certified trainer prior to resuming participation in any practice or competition.
4. After medical clearance, RTP should follow a step-wise protocol with provisions for delayed RTP based upon return of any signs or symptoms.
5. A coach of an interscholastic team may not authorize a student's return to play or return to learn.

Return-to-Learn (RTL) Step Progression

With the increasing prevalence of concussions, protocols for returning a student to learning after a concussion are essential. The lack of outward physical symptoms of illness make it sometimes difficult for school staff to recognize the need for accommodations for a student with a concussion. Though a concussion may seem to be an "invisible injury", a concussion can affect a student in many different ways: physically, cognitively, emotionally and with sleep.

These symptoms can impact learning and schoolwork. Physical symptoms such as headache, dizziness, and visual changes, may interfere with the student's ability to focus and concentrate. Cognitive symptoms may impact the ability of the student to learn, memorize and process information as well as keep track of assignments and tests. Struggling with schoolwork may cause symptoms to increase. Students may experience feelings of frustration, nervousness and/or irritability both as a direct result of concussion and due to resulting academic difficulties. Disturbances in sleep patterns often result in fatigue and drowsiness during the day.

Recovery from a concussion is an individualized process. Caution must be taken not to compare students suffering from concussions. Every brain and every student are different; every concussion is different. Assessing problems with learning and school performance, and then making appropriate and necessary changes to a student's learning plan is a collaborative effort between physician and school staff. Some students may not miss any school and need few accommodations. Others may endure months of symptoms that can significantly impact academic performance and require extensive accommodations such as 504 or IEP plans.

A student's best chance for a full recovery from a concussion depends on timely implementation of two critical components: cognitive rest and physical rest. There is increasing evidence that using a concussed brain to learn may worsen concussion symptoms and prolong recovery.

Phase 1: No School/complete cognitive rest:

- Student is experiencing high level of symptoms that will keep the student out of school.
- Provide students with copies of class notes.
- NO homework, quizzes or tests during this time.

Phase 2: Part-Time School Attendance with Accommodations:

- Re-introduce student to school.
- The goal of first few days of returning to school is to simply make sure the student can tolerate the school environment without worsening of symptoms.
- Part time school attendance, with focus on prioritizing what classes should be attended and how often.

- Eliminate busy work or non-essential assignments or classes.
- Limit screen time on computers, reading and other visual stimuli based on the student's symptoms.
- NO TESTS OR QUIZZES.
- Homework load based on symptoms.
- No due dates on homework assignments.
- No physical activity including no PE or recess.

Phase 3: Full-Day Attendance with Accommodations:

- As the student improves, gradually increase demands on the brain by increasing the amount, length of time, and difficulty of academic requirements, as long as this does not worsen symptoms.
- Continue to prioritize assignments, tests and projects: limit students to one test per day with extra time to complete and breaks as needed.
- Gradually increase homework.
- No physical activity.

Phase 4: Full-Day Attendance without Accommodations:

- Accommodations are removed when student can participate fully in academic work at home and school without triggering symptoms.
- Physical activities allowed if specified by physician.

Phase 5: Full School and Extracurricular Involvement:

- Student is symptom free, consistently tolerating full school days without triggering any symptoms.
- Student must receive written clearance and complete the RTP progression before returning to physical education and/or sports.

The RTL team (social worker, school nurse, teacher, principal and student's physician) should recognize that communication is the key for success of the management plan. Students are encouraged to meet with teachers regularly to discuss progress, grades and make up work.

References:

www.cdc.gov/concussion

www.luriechildrens.org/sports