

**Martin County School District**

**Concussion Management Policy  
For Student Athletes**

**1. Introduction**

The following procedures have been developed for the management and treatment of concussions in Martin County School District high school student-athletes. These recommendations along with the accompanying forms and informational material serve to provide guidance to parents, coaches and student-athletes who have, or are suspected of having a sports related concussion.

Any student-athlete suspected of having a concussion **must be evaluated by an Appropriate Health Care Professional (AHCP), as defined by the FHSA Sports Medicine Advisory Committee, as soon as practical.**

This policy also makes provisions for the academic accommodation of the student athlete in their post-concussion recovery.

This policy requires:

- coaches to receive concussion awareness training through the National Federation of High Schools certification course as directed by FHSA.
- student-athletes and parents acknowledging receipt of concussion awareness information

**2. Background**

**What is a Concussion?**

A concussion is a brain injury that is caused by a bump, blow, or jolt to the head. They can also occur from a fall or blow to the body that causes the head to snap back and forth which can cause the brain to move rapidly within the skull. Even what appears to be a mild bump to the head or “ding” can be serious. The severity of a concussion is based on the symptoms displayed and the duration of symptoms.

**In what sports do Concussions usually occur?**

Concussions, typically, occur in contact and collision sports such as football, soccer and lacrosse; however, even non-contact individual sports can produce concussions.

### 3. Education

The most effective way to implement a successful policy is to have everyone involved (student-athletes, parents, coaches, school administrators) receive education in the recognition of concussions, the subsequent treatment and management of concussions, and the eventual Return To Participation protocols.

#### Coaches Education

All coaches are required to receive concussion awareness training as directed by the FHSAA before they begin practice every year.

##### **Proof of Completion**

Certificates of completion of Concussion course must be submitted to the Assistant Principal of Athletics as a condition of coaching employment to ensure that school is in compliance with FHSAA regulations.

### 4. Return to Participation (RTP)

Current medical studies have shown on the average, concussion symptoms last 10-14 days. Concussions symptoms may be delayed between 24-72 hours or even longer, therefore the totality of the injury may not be recognized for up to 3 days after the injury. *The greatest risk of returning an athlete to play too soon after a concussion, is sustaining another concussion before being fully recovered from the previous one.* If this happens, athletes are at risk for prolonged concussion symptoms, permanent disability and even death (called "Second Impact Syndrome" where the brain swells uncontrollably).

- No athlete is permitted to return to play or practice on the same day of a suspected concussion. "When in doubt, sit them out!"
- Any athlete suspected of having a concussion **must be evaluated** by an AHCP (MD or DO) as soon as practical.
- Any athlete who has sustained a concussion **must be medically cleared** by an AHCP (MC or DO) prior to resuming participation in any practice or competition. A Parent cannot authorize return to play for his/her child, even if the parent is an AHCP.

## 5. Removal and Return-to-Participation (RTP) Procedures

### What should coaches do if they suspect a concussion?

#### 1. Remove the athlete from play

- Look for signs and symptoms of a concussion. When in doubt, keep the student-athlete out of play. Alert the athletic trainer.

#### 2. Athlete must be evaluated by an AHCP

- Do not attempt to evaluate the student-athlete yourself; only a qualified healthcare professional can assess the severity of a concussion.

#### 3. Inform the student-athlete's parents about the injury and give them the FHSAA required document(s). Make sure they understand their child must be seen by a healthcare professional, AHCP.

### Sideline Evaluation

1. Evaluation on the sideline, when available, may consist of: King-Devick Sideline Test, SCAT3 and/or CDC checklist, and administered by a Certified Athletic Trainer, MD or DO.
2. If no immediate medical attention is needed, the athlete must follow-up with an AHCP as soon as practical.

### Return to Participation

1. FHSAA form AT18 will **not** begin until the athlete:
  - Is asymptomatic
  - Has a normal neurologic exam (administered by an AHCP)
  - Is off all medications related to this concussion
  - Baseline testing (as available) has returned to normal
2. Student-athlete will bring FHSAA form AT18 to AHCP to have signed clearing the athlete to begin the RTP Protocol.
3. Step 4 of the RTP Protocol: "Full Contact Practice" must involve a regular full team contact practice which simulates game situations. A scheduled walk-through practice does not satisfy this step.
4. After the FHSAA form AT18 has been completed (minimum of 5 days), the form will be returned to an AHCP who will sign the Return to Competition Affidavit stating that the athlete is cleared for a complete return to full contact physical activity without restrictions, or written clearance from the AHCP to return to play without restrictions.

## **Treatment and Recovery**

### Guidance for Parents:

- During the first 24-48 hours, make sure your child rests, both physically and cognitively and drinks plenty of fluids. It is important to understand rest includes **no physical activity whatsoever** until the symptoms have resolved and the student-athlete has been medically evaluated.
- No prescription or non-prescription drugs without medical supervision.  
Including:
  - sleeping medication
  - aspirin
  - anti-inflammatory medicine (Motrin, Tylenol, Aleve, ibuprofen)
- Do not drive until medically cleared

If you notice any change in behavior, vomiting, dizziness, worsening headache, double vision or excessive drowsiness, this is an indication that you must take your child to the nearest Emergency Room.

- Allow your student-athlete to rest in a quiet area, away from bright lights and loud noises such as the TV and stereo. Do not allow overstimulation such as video gaming, texting and social media. Limit visitors while in the recovery process.
- It is not uncommon for a concussed athlete to become tired and lethargic. This is the body's way of shutting down in order to heal. It is okay for your student-athlete to sleep. However, excessive sleepiness and lethargy would be cause to seek further evaluation from a medical doctor.
- If the student-athlete is suspected of having a concussion from an activity outside of MCSD athletics, and does not have supporting documentation, the student-athlete will be evaluated by the athletic trainer and automatically referred to AHCP if concussion symptoms are present.

**Please Note:** *Normal brain and skull imaging (x-rays, CT scans) by themselves do not diagnose or rule out a concussion, nor do they predict a timeline for a safe return to physical activity.*

# APPENDIX

## **Concussion Management Packet**

This packet is designed to assist our Athletes, Parents, Coaches, Athletic Trainers, Physicians and other medical professionals in the management of sports related concussions on student-athletes.

**Florida State Statute Requires:** *any youth athlete suspected of sustaining a concussion must be evaluated by an "Appropriate Health Care Professional" (AHCP).* The Florida High School Athletic Association (FHSAA) defines an AHCP as a Medical Doctor or a Doctor of Osteopathy (MD or DO).

This packet contains the following:

**Concussion information** - Also available to parents on the school/district website as an informational tool after a suspected concussion.

**CDC Concussion Fact Sheet for Parents** – Fact sheet for parents (pages 6-7).

**CDC Concussion Fact Sheet for Athletes** – Fact sheet for athletes (page 8).

**Consent and Release form (EL3CH)** – Completed by the athlete and parent prior to participation in athletic activities. The original signed version should be on file with each individual school (pages 9-10).

**Return to Participation form (AT18)** – Requires that the AHCP complete and date this form to initiate the RTP step program. It must be signed by the AHCP in order for to begin the supervised progression program. Each phase of this plan must be completed under the supervision of an AHCP or athletic trainer and must be dated and initialed after each phase. The form must be signed upon its final completion of all the steps. This form must then be signed by the AHCP or team physician, or written clearance from the AHCP to return to play (pages 11-12).





## Heads Up to Schools: KNOW YOUR CONCUSSION ABCs

Assess  
the  
situation

Be alert for  
signs and  
symptoms

Contact a  
health care  
professional

## A Fact Sheet for Parents

### What is a concussion?

A concussion is a type of brain injury that changes the way the brain normally works. A concussion is caused by a bump, blow, or jolt to the head. Concussions can also occur from a blow to the body that causes the head and brain to move rapidly back and forth. Even what seems to be a mild bump to the head can be serious.

Concussions can have a more serious effect on a young, developing brain and need to be addressed correctly.

### What are the signs and symptoms of a concussion?

You can't see a concussion. Signs and symptoms of concussion can show up right after an injury or may not appear or be noticed until hours or days after the injury. It is important to watch for changes in how your child or teen is acting or feeling, if symptoms are getting worse, or if s/he just "doesn't feel right." Most concussions occur without loss of consciousness.

If your child or teen reports *one or more* of the symptoms of concussion listed below, or if you notice the symptoms yourself, seek medical attention right away. Children and teens are among those at greatest risk for concussion.

### SIGNS AND SYMPTOMS OF A CONCUSSION

#### SIGNS OBSERVED BY PARENTS OR GUARDIANS

- Appears dazed or stunned
- Is confused about events
- Answers questions slowly
- Repeats questions
- Can't recall events *prior* to the hit, bump, or fall
- Can't recall events *after* the hit, bump, or fall
- Loses consciousness (even briefly)
- Shows behavior or personality changes
- Forgets class schedule or assignments

#### SYMPTOMS REPORTED BY YOUR CHILD OR TEEN

##### Thinking/Remembering:

- Difficulty thinking clearly
- Difficulty concentrating or remembering
- Feeling more slowed down
- Feeling sluggish, hazy, foggy, or groggy

##### Physical:

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Fatigue or feeling tired
- Blurry or double vision
- Sensitivity to light or noise
- Numbness or tingling
- Does not "feel right"

##### Emotional:

- Irritable
- Sad
- More emotional than usual
- Nervous

##### Sleep\*:

- Drowsy
- Sleeps *less* than usual
- Sleeps *more* than usual
- Has trouble falling asleep

*\*Only ask about sleep symptoms if the injury occurred on a prior day*

To download this fact sheet in Spanish, please visit: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion). Para obtener una copia electrónica de esta hoja de información en español, por favor visite: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR DISEASE CONTROL AND PREVENTION





## DANGER SIGNS

Be alert for symptoms that worsen over time. Your child or teen should be seen in an emergency department right away if s/he has:

- One pupil (the black part in the middle of the eye) larger than the other
- Drowsiness or cannot be awakened
- A headache that gets worse and does not go away
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Difficulty recognizing people or places
- Increasing confusion, restlessness, or agitation
- Unusual behavior
- Loss of consciousness (even a brief loss of consciousness should be taken seriously)

Children and teens with a concussion should **NEVER** return to sports or recreation activities on the same day the injury occurred. They should delay returning to their activities until a health care professional experienced in evaluating for concussion says they are symptom-free and it's OK to return to play. This means, until permitted, not returning to:

- Physical Education (PE) class,
- Sports practices or games, or
- Physical activity at recess.

## What should I do if my child or teen has a concussion?

1. **Seek medical attention right away.** A health care professional experienced in evaluating for concussion can determine how serious the concussion is and when it is safe for your child or teen to return to normal activities, including physical activity and school (concentration and learning activities).
2. **Help them take time to get better.** If your child or teen has a concussion, her or his brain needs time to heal. Your child or teen may need to limit activities while s/he is recovering from a concussion. Exercising or activities that involve a lot of concentration, such as studying, working on the computer, or playing video games may cause concussion symptoms (such as headache or tiredness) to reappear or get worse. After a concussion, physical and cognitive activities—such as concentration and learning—should be carefully managed and monitored by a health care professional.
3. **Together with your child or teen, learn more about concussions.** Talk about the potential long-term effects of concussion and the dangers of returning too soon to normal activities (especially physical activity and learning/concentration). For more information about concussion and free resources, visit: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).

## How can I help my child return to school safely after a concussion?

Help your child or teen get needed support when returning to school after a concussion. Talk with your child's teachers, school nurse, coach, speech-language pathologist, or counselor about your child's concussion and symptoms. Your child may feel frustrated, sad, and even angry because s/he cannot return to recreation and sports right away, or cannot keep up with schoolwork. Your child may also feel isolated from peers and social networks. Talk often with your child about these issues and offer your support and encouragement. As your child's symptoms decrease, the extra help or support can be removed gradually. Children and teens who return to school after a concussion may need to:

- Take rest breaks as needed,
- Spend fewer hours at school,
- Be given more time to take tests or complete assignments,
- Receive help with schoolwork, and/or
- Reduce time spent reading, writing, or on the computer.



\*To learn more about concussion and to order materials **FREE-OF-CHARGE**, go to: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion) or call 1.800.CDC.INFO.

# HEADS\*UP

## CONCUSSION IN HIGH SCHOOL SPORTS

A FACT SHEET FOR **ATHLETES**

### What is a concussion?

A concussion is a brain injury that:

- Is caused by a bump, blow, or jolt to the head.
- Can change the way your brain normally works.
- Can range from mild to severe.
- Can occur during practices or games in any sport.
- Can happen even if you haven't been knocked out.
- Can be serious even if you've just been "dinged" or had your "bell rung."

### How can I prevent a concussion?

It's different for every sport. But there are steps you can take to protect yourself from concussion.

- Follow your coach's rules for safety and the rules of the sport.
- Practice good sportsmanship at all times.
- Use the proper sports equipment, including personal protective equipment (such as helmets).  
In order for equipment to protect you, it must be:
  - Appropriate for the game, position, and activity
  - Well maintained
  - Properly fitted
  - Used every time you play

### How do I know if I've had a concussion?

You can't see a concussion, but you might notice some of the symptoms right away. Other symptoms can show up days or weeks after the injury. It's best to see a health care professional if you think you might have a concussion. An undiagnosed concussion can affect your ability to do schoolwork and other everyday activities. It also raises your risk for additional, serious injury.

### What are the symptoms of a concussion?

- Nausea (feeling that you might vomit)
- Balance problems or dizziness
- Double or fuzzy vision
- Sensitivity to light or noise
- Headache
- Feeling sluggish
- Feeling foggy or groggy
- Concentration or memory problems (forgetting game plays)
- Confusion

### What should I do if I think I have a concussion?

- **Tell your coaches and your parents.** Never ignore a bump, blow, or jolt to the head. Also, tell your coach if one of your teammates might have a concussion.
- **Get a medical check up.** A health care professional can tell you if you have had a concussion and when you are OK to return to play.
- **Give yourself time to recover.** If you have had a concussion, your brain needs time to heal. While your brain is still healing, you are much more likely to have a second concussion. Second or later concussions can cause permanent brain damage, and even death in rare cases. Severe brain injury can change your whole life.

**It's better to miss one game than the whole season.**

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR DISEASE CONTROL AND PREVENTION







Florida High School Athletic Association

## Consent and Release from Liability Certificate for Concussion and Heat-Related Illness (Page 1 of 2)

This completed form must be kept on file by the school. This form is valid for 365 calendar days from the date of the most recent signature.

### Concussion Information

#### What is a concussion?

Concussion is a brain injury. Concussions, as well as all other head injuries, are serious. They can be caused by a bump, a twist of the head, sudden deceleration or acceleration, a blow or jolt to the head, or by a blow to another part of the body with force transmitted to the head. You can't see a concussion, and more than 90% of all concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. All concussions are potentially serious and, if not managed properly, may result in complications including brain damage and, in rare cases, even death. Even a "ding" or a bump on the head can be serious. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, your child should be immediately removed from play, evaluated by a medical professional and cleared by a medical doctor.

#### What are the signs and symptoms of concussion?

Concussion symptoms may appear immediately after the injury or can take several days to appear. Studies have shown that it takes on average 10-14 days or longer for symptoms to resolve and, in rare cases or if the athlete has sustained multiple concussions, the symptoms can be prolonged. Signs and symptoms of concussion can include (not all-inclusive):

- Vacant stare or seeing stars
- Lack of awareness of surroundings
- Emotions out of proportion to circumstances (inappropriate crying or anger)
- Headache or persistent headache, nausea, vomiting
- Altered vision
- Sensitivity to light or noise
- Delayed verbal and motor responses
- Disorientation, slurred or incoherent speech
- Dizziness, including light-headedness, vertigo (spinning) or loss of equilibrium (being off balance or swimming sensation)
- Decreased coordination, reaction time
- Confusion and inability to focus attention
- Memory loss
- Sudden change in academic performance or drop in grades
- Irritability, depression, anxiety, sleep disturbances, easy fatigability
- In rare cases, loss of consciousness

#### What can happen if my child keeps on playing with a concussion or returns too soon?

Athletes with signs and symptoms of concussion should be removed from activity (play or practice) immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to sustaining another concussion. Athletes who sustain a second concussion before the symptoms of the first concussion have resolved and the brain has had a chance to heal are at risk for prolonged concussion symptoms, permanent disability and even death (called "Second Impact Syndrome" where the brain swells uncontrollably). There is also evidence that multiple concussions can lead to long-term symptoms, including early dementia.

#### What do I do if I suspect my child has suffered a concussion?

Any athlete suspected of suffering a concussion should be removed from the activity immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without written medical clearance from an appropriate health-care professional (AHCP). In Florida, an appropriate health-care professional (AHCP) is defined as either a licensed physician (MD, as per Chapter 458, Florida Statutes), a licensed osteopathic physician (DO, as per Chapter 459, Florida Statutes). Close observation of the athlete should continue for several hours. You should also seek medical care and inform your child's coach if you think that your child may have a concussion. Remember, it's better to miss one game than to have your life changed forever. When in doubt, sit them out.

#### When can my child return to play or practice?

Following physician evaluation, the **return to activity process** requires the athlete to be completely symptom free, after which time they would complete a step-wise protocol under the supervision of a licensed athletic trainer, coach or medical professional and then, receive written medical clearance of an AHCP.

For current and up-to-date information on concussions, visit <http://www.cdc.gov/concussion/nyouthsports/> or <http://www.seeingstarsfoundation.org>

#### Statement of Student Athlete Responsibility

I accept responsibility for reporting all injuries and illnesses to my parents, team doctor, athletic trainer or coaches associated with my sport including any signs and symptoms of CONCUSSION. I have read and understand the above information on concussion. I will inform the supervising coach, athletic trainer or team physician immediately if I experience any of these symptoms or witness a teammate with these symptoms. Furthermore, I have been advised of the dangers of participation for myself and that of my child/ward.

_____ Name of Student-Athlete (printed)	_____ Signature of Student-Athlete	_____ Date
_____ Name of Parent/Guardian (printed)	_____ Signature of Parent/Guardian	_____ Date



Revised 05/14



Florida High School Athletic Association

## Consent and Release from Liability Certificate for Concussion and Heat-Related Illness (Page 2 of 2)

This completed form must be kept on file by the school. This form is valid for 365 calendar days from the date of the most recent signature.

### FHSAA Heat-Related Illnesses Information

People suffer heat-related illness when their bodies cannot properly cool themselves by sweating. Sweating is the body's natural air conditioning, but when a person's body temperature rises rapidly, sweating just isn't enough. Heat-related illnesses can be serious and life threatening. Very high body temperatures may damage the brain or other vital organs, and can cause disability and even death. Heat-related illnesses and deaths are preventable.

Heat Stroke is the most serious heat-related illness. It happens when the body's temperature rises quickly and the body cannot cool down. Heat Stroke can cause permanent disability and death.

Heat Exhaustion is a milder type of heat-related illness. It usually develops after a number of days in high temperature weather and not drinking enough fluids.

Heat Cramps usually affect people who sweat a lot during demanding activity. Sweating reduces the body's salt and moisture and can cause painful cramps, usually in the abdomen, arms, or legs. Heat cramps may also be a symptom of heat exhaustion.

#### Who's at Risk?

Those at highest risk include the elderly, the very young, people with mental illness and people with chronic diseases. However, even young and healthy individuals can succumb to heat if they participate in demanding physical activities during hot weather. Other conditions that can increase your risk for heat-related illness include obesity, fever, dehydration, poor circulation, sunburn, and prescription drug or alcohol use.

By signing this agreement, the undersigned acknowledges that the information on page 1 and page 2 have been read and understood.

\_\_\_\_\_  
Name of Student-Athlete (printed)

\_\_\_\_\_  
Signature of Student-Athlete

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Parent/Guardian (printed)

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

- 2 -



Florida High School Athletic Association



Revised 09/13

## Post Head Injury/Concussion Initial Return to Participation

(Page 1 of 2)

This form must be completed for any student-athlete that has sustained a sports-related concussion and must be kept on file at the student-athlete's school.

Athlete Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Injury Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Sport: \_\_\_\_\_ School: \_\_\_\_\_ Level (Varsity, JV, etc.): \_\_\_\_\_

I (treating physician) certify that the above listed athlete has been evaluated for a concussive head injury, and currently is/has:  
(All Boxes MUST be checked before proceeding)

☐ Asymptomatic ☐ Normal neurological exam ☐ Returned to normal classroom activity  
☐ Off medications related to this concussion ☐ Neuropsychological testing (as available) has returned to baseline

The athlete named above is cleared to begin a graded return to play protocol (outline below) under the supervision of an athletic trainer, coach or other health care professional as of the date indicated below. If the athlete experiences a return of any of his/her concussion symptoms while attempting a graded return to play, the athlete is instructed to stop play immediately and notify a parent, licensed athletic trainer or coach.

Physician Name: \_\_\_\_\_ Signature/Degree: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Today's Date: \_\_\_\_\_

### Graded Return to Play Protocol

Each step, beginning with step 2, should take at least 24 hours to complete. If the athlete experiences a return of any concussion symptoms they must immediately stop activity, wait at least 24 hours or until asymptomatic, and drop back to the previous asymptomatic level. This protocol must be performed under supervision, please initial and date the box next to each completed step

Once the athlete has completed full practice i.e. stage 5, please sign and date below and return this form to the athlete's physician (MD/DO) for review and request the physician complete the return to competition form for the athlete to resume full activity.

Rehabilitation stage	Functional exercise at each stage	Objective	Date completed	Initials
1. No Activity	Rest; physical and cognitive	Recovery	Noted above	Signed above
2. Light aerobic exercise	Walking, swimming, stationary bike, HR<70% maximum; no weight training	Increased heart rate		
3. Sport-specific exercise	Non-contact drills	Add movement		
4. Non-contact training	Complex (non-contact) drills/practice	Exercise, coordination and cognitive load		
5. Full contact practice	Full contact practice	Restore confidence and simulate game situations		
6. Return to full activity	Return to competition	After completion of the steps above; Form AT18, Page 2 must be completed by physician		

I attest the above named athlete has completed the graded return to play protocol as dated above.

Athletic Trainer / Coach

Name: \_\_\_\_\_ AT License Number: \_\_\_\_\_ Phone: \_\_\_\_\_

(If coach) AD/Principal Name: \_\_\_\_\_ School: \_\_\_\_\_ Phone: \_\_\_\_\_

Athletic Trainer / Coach

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Athlete Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Physician Reviewed:



Florida High School Athletic Association

AT18

Revised 09/13

## Post Head Injury/Concussion Initial Return to Participation

(Page 2 of 2)

This form must be completed for any student-athlete that has sustained a sports-related concussion and must be kept on file at the student-athlete's school.

### Return to Competition Affidavit

Student-Athlete's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Injury Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Formal Diagnosis: \_\_\_\_\_

School: \_\_\_\_\_

Sport: \_\_\_\_\_

I certify that I have reviewed the signed graded return to activity protocol provided to me on behalf of the athlete named above.  
This athlete is cleared for a complete return to **full-contact physical activity** as of \_\_\_\_/\_\_\_\_/\_\_\_\_.

**This student-athlete is instructed to stop play immediately and notify a parent, licensed athletic trainer or coach and to refrain from activity should his/her symptoms return.**

Physician Name: \_\_\_\_\_

Physician Signature: \_\_\_\_\_ License No.: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_