

### Student Health: Concussions

Physical activity is an integral part of a school environment including, but not limited to, recess, physical education classes, or participation in sports. Physical activity carries with it an inherent risk of injury, and concussions are a common and potentially serious injury that students may experience. In the interest of keeping Beresford students safe from serious injury, the following will be the policy of the Beresford School District on concussions.

A concussion is a traumatic brain injury that interferes with normal brain function. An athlete does not have to lose consciousness (be "knocked out") to have suffered a concussion.

Behavior or signs observed indicative of a possible concussion:

- Loss of consciousness
- Appears dazed or stunned
- Appears confused
- Forgets plays or lines
- Unsure of game, score, opponent or situation
- Moves clumsily
- Answers questions slowly
- Shows behavior or personality changes
- Can't recall events prior to or after the injury
- Symptoms reported by a player indicative of a possible concussion:
  - Headache, nausea
  - Balance problems or dizziness
  - Double or fuzzy vision
  - Sensitivity to light or noise

- Feeling sluggish, foggy or groggy
- Concentration or memory problems, confusion

Students who exhibit behavior or signs indicative of a concussion shall be immediately removed from the activity and examined by an appropriate health-care professional. An appropriate health care professional shall be defined as a medical doctor and/or certified athletic trainer. A student who exhibits behavior or signs indicative of a concussion may only resume the activity if both the appropriate health care professional and the student's parent/guardian sign a Return to Activity Permission form. If no appropriate health care professional is available or if the appropriate health-care professional does not grant permission for the student to resume the activity, the student shall not return to the activity until permission is granted.

Legal Refs.: SDCL 13-36-9; 13-36-11; 13-36-12

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