

Arlee School District
Student-Athlete Protocol / Procedures on Concussions

Pursuant to Montana State law and the Dylan Steiger’s Protection of Youth Athletes Act, the Montana High School Association implemented a concussion protocol requiring schools to distribute information regarding concussions and head injuries. Montana law now requires that each year, before beginning practice for an organized activity, student – athletes and student-athlete’s parent/guardian must be given information on concussions and concussion protocol. Arlee School District requires student athletes and their parent/guardian sign and return a concussion information and protocol form *before* the student athlete is allowed to participate. This form must be signed each year. Arlee School District would like to include all students, athletes and non-athletes, in the protocol/procedure to help ensure all students with a documented concussion receive sufficient time to recuperate.

Recognition of concussion as well as management, treatment and referral guidelines are extremely important to all Arlee School staff. Ensuring that the student is ready to return to the classroom/playing field is also important.

A concussion is a brain injury that is caused by a bump/blow to the head. It can change the way your brain normally works and can occur at any time, not just during practice or games. Any time an individual receives a bump or blow to the head there is the possibility of a concussion. Concussions can happen even if you haven’t been knocked out and can be serious even if you’ve just been “dinged”

Signs and symptoms of a concussion can vary but here are a few of the more common symptoms.

- 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, groggy
- Difficulty paying attention, memory problems
- Confusion
- General description of not “feeling right”

Student-athletes should talk to their parent/coach/teacher/staff member if they think they may have a concussion. Never ignore a bump/blow to the head even if you feel fine. Parents should contact their health care provider. Only a doctor or health care professional can tell you if you have a concussion and when you are ready to return to play/school. Most importantly your brain needs time to thoroughly heal. While your brain is still healing you are much more likely to have a second concussion.

Remember, when in doubt, sit it out. It’s better to miss an event than the whole season.

Links to other resources

- ✓ CDC-Concussion in Sports – <http://www.cdc.gov/concussion/sports/index.html>
- ✓ National Federation of State High School Association/Concussion in Sports What you need to know – www.nfhslearn.com
- ✓ Montana High School Association – Sports Medicine Tab – <http://www.mhsa.org/SportsMedicine/SportsMed.html>

ImPACT- is an acronym for Immediate Post-Concussion Assessment and Cognitive Testing. This research based software tool is utilized to evaluate a concussion victim after a concussion occurs. It was developed by doctors at the University of Pittsburgh Medical Center. ImPACT evaluates and documents verbal and visual memory, attention span, brain processing speed, reaction time and post-concussive symptoms. The ImPACT testing is a tool to help clinicians

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determine a diagnosis and manage a concussion. It does not provide a specific medical diagnosis and does not determine return to play. All concussions should be managed on an individual basis.

Arlee School District requires all student athletes to take a baseline ImpACT test prior to participation in sports and they are required to take a “new” baseline test every two years.

Management and suggested guidelines

- Student-athletes with a witnessed loss of consciousness (LOC) and/or neck pain should be placed on a spine board and transported to the nearest emergency department via emergency vehicle.
- Student-athletes having any of the following symptoms should be transported to the nearest emergency department via emergency vehicle:
 - Deterioration of neurological function
 - Decreasing level of consciousness
 - Decrease or irregularity in respirations
 - Decrease or irregularity in pulse
 - Unequal, dilated, or un-reactive pupils
 - Any sign/symptom of suspected spine injury, significant bleeding or suspected skull fracture
 - Mental status change; drowsy, cannot be awakened, confusion or agitation
 - Seizure activity
- Students-athletes who may be symptomatic but stable may be transported by his/her parents. Parents need to be advised to contact the student-athlete’s health care provider or seek care at the nearest emergency department on the day of the injury.
- Parent/guardian has the option of emergency transportation even if you do not feel it is necessary.
- Student should NOT drive after injury until cleared by a HCP to resume driving.

Three simple steps (3R’s) should be followed. Recognize - Remove - Refer. When in doubt, it is always best to be cautious. **Coaches usually follow the rule when in doubt, sit them out.** Arlee School District has hired a L.A.T. (Licensed Athletic Trainer) to attend the majority of home games. The L.A.T. uses the SCAT2 Sports Concussion Assessment Tool 2, standardized method of evaluating injured athletes for concussion. **It is encouraged that all coaching staff utilize the same SCAT2 evaluation in the absence of the L.A.T. at sporting events.**

Treatment of a concussion is individually based depending on the severity of injury and student-athlete recovery. Returning to the classroom is another crucial and important part of their recovery.

- Most important in treatment of a concussion is rest. Physical and mental activity should be limited
- Student-athlete should have an environment free or limited of
 - Loud noises
 - Bright lights
 - Computers
 - Video games
 - Television
 - Phones (cell phone including texting)

Cognitive exertion, thinking processes and the stimulation of a school environment may increase or worsen the symptoms of a concussion. Student-athletes may need to be removed from school in order to recover from a concussion.

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The parent/guardian need to communicate with their health care provider in the treatment of their child's concussion. Relaying the information obtained from the health care provider to school personnel (health officer/principal/coach/teacher) will ensure that everyone involved is updated on the progress of a student recovering from a concussion.

Responsibility of school personnel after notification of student's concussion;

- Notify the student's P.E. teacher immediately that the student-athlete is restricted from all physical activity until further notice from the HCP. Written notice from the HCP is required before returning to physical activity.
- Notifying all classroom teachers of the occurrence of a concussion and what symptoms to watch for.
- Notification to appropriate personnel on concussion injury so that an appointment for ImPACT testing can be made.
- 504 Plan may need to be considered.

Responsibility of the student-athlete's parent/guardian on the student's concussion;

- Monitor their child closely and when needed coordinate evaluation and treatment by the HCP trained in the management of head injuries.
- Monitor their child closely and recommend appropriate academic accommodations for students who are exhibiting symptoms of post-concussion syndrome.
- Communicate with appropriate school personnel on a regular basis and provide the most effective care for their child.

Sports Related Concussions: Most concussions are related to sports but all concussions will be treated with the same care. A student-athlete who exhibits any sign or symptom of concussion or abnormal cognitive behavior/testing WILL NOT be allowed to return to play without a HCP medical release. Before returning to play after a concussion, the student athlete must meet all of the following criteria:

- Student-athlete must be asymptomatic at rest, without medication and with performance
- Within normal range of baseline on post-concussion ImPACT testing
- Medical release of full clearance from HCP.

The student-athlete will be progressed back to full activity following these guidelines. Progression is individually based and determined on a case by case basis. Previous history of concussion, duration of symptoms, and age of the athlete will be some, but not all, of the criteria used.

- Progression steps. The following steps are guidelines. Progression is based on completion of the previous step. Additional requirements may be utilized.
 - Day 1: Injury – Removal from activity and referral to HCP.
 - Day 2: Physical and mental rest- duration will be determined on an individual basis.
 - Day 3: School-if good, ImPACT and see HCP regarding the trauma injury. Written release from HCP to start following steps is required.
 - Day 4: Light exercise – walking/stationary bike (30 min at 70% of maximum heart rate). NO WEIGHT TRAINING.
 - Day 5: Activity specific training (if student is athlete)-shooting, running. No contact and maximum time of one hour of activity.
 - Day 6: Non-contact training drills with team in a practice setting. Low weight training permitted.

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- Day 7: See HCP to be cleared to full contact practice – NOT GAME participation. Note: If student-athlete has received two or more concussions in a twelve month period, it is strongly suggested the student-athlete see a neurologist for clearance.
- Day 8: Game play and full return to activities after day 8 if HCP allows.

**If the student-athlete experiences any signs/symptoms during any phase of the above steps, the student-athlete should immediately stop the activity. If student-athlete is asymptomatic within twenty-four hours of any sign/symptoms they return to the step process and will be required to back up one step and start again to resume the progression.

The HCP along with parent/guardian and student should discuss appropriate activities each day of the process. During steps 6-8, the student-athlete must be given written instructions from their HCP regarding permitted activity. A copy of the written instructions will need to be turned in to appropriate school personnel (office/principal/AD).



It is recommended that the student-athlete have daily contact with their HCP for re-assessment and instructions until he or she has progressed to unrestricted activity and can be given a written report to that effect from their HCP.

Be Prepared

A concussion is a type of traumatic brain injury, or TBI, caused by a bump, blow, or jolt to the head that can change the way your brain normally works. Concussions can also occur from a blow to the body that causes the head to move rapidly back and forth. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious. Concussions can occur in any sport or recreation activity. All coaches, parents, and athletes need to learn concussion signs and symptoms and what to do if a concussion occurs.

SIGNS AND SYMPTOMS OF A CONCUSSION

SIGNS OBSERVED BY PARENTS OR GUARDIANS	SYMPTOMS REPORTED BY YOUR CHILD OR TEEN	
<ul style="list-style-type: none"> •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 	<p><u>Thinking/Remembering:</u></p> <ul style="list-style-type: none"> •Difficulty thinking clearly •Difficulty concentrating or remembering •Feeling more slowed down •Feeling sluggish, hazy, foggy, or groggy <p><u>Physical:</u></p> <ul style="list-style-type: none"> •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” 	<p><u>Emotional:</u></p> <ul style="list-style-type: none"> •Irritable •Sad •More emotional than usual •Nervous <p><u>Sleep*:</u></p> <ul style="list-style-type: none"> •Drowsy •Sleeps less than usual •Sleeps more than usual •Has trouble falling asleep <p><i>*Only ask about sleep symptoms if the injury occurred on a prior day.</i></p>

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Pursuant to the Dylan Steigers’ Protection of Youth Athletes Act, schools are required to distribute information sheets for the purpose of informing and educating student-athletes and their parents of the nature and risk of concussion and head injury to student athletes, including the risks of continuing to play after concussion or head injury. Montana law requires that each year, before beginning practice for an organized activity, a student-athlete and the student-athlete’s parent(s)/legal guardian(s) must be given an information sheet on concussions and concussion protocol. Both parties must sign and return the form, acknowledging receipt of the information, to an official designated by the school district, prior to the student-athlete’s participation during the current school year. The law further states that a student-athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from play at the time of injury and may not return to play until the student-athlete has received a written clearance from a licensed health care provider (HCP).

After reading the information sheet, I am aware of the following information:

Student-Athlete Initials		Parent/Legal Guardian Initials
	A concussion is a brain injury, which should be reported to my parents, my coach(s), or a medical professional if one is available.	
	A concussion can affect the ability to perform everyday activities such as the ability to think, balance, and classroom performance.	
	A concussion cannot be “seen.” Some symptoms might be present right away. Other symptoms can show up hours or days after an injury.	
	I will tell my parents, my coach, and/or a medical professional about my injuries and illnesses.	N/A
	If I think a teammate has a concussion, I should tell my coach(s), parents, or licensed health care professional about the concussion.	N/A
	I will not return to play in a game or practice if a hit to my head or body causes any concussion-related symptoms.	N/A
	I will/my child will need written permission from a licensed health care professional to return to play or practice after a concussion.	
	After a concussion, the brain needs time to heal. I understand that I am/my child is much more likely to have another concussion or more serious brain injury if return to play or practice occurs before concussion symptoms go away.	
	Sometimes, repeat concussions can cause serious and long-lasting problems.	
	I have read the concussion symptoms on the Concussion fact sheet.	

I/we have read and understand the severity of a head injury and the progression of activity for my child to return to school/activities including, but not limited to, P.E., Football, Volleyball, Cross Country, Wrestling, Basketball, Track and Softball. I/we understand that if I/we have any questions or concerns regarding this policy, I/we should request a meeting with the Arlee School District Principal to review our concerns.

Please review and discuss this information with your child. Please sign below, and return this page to the school office along with other required pre-season forms. Signature below is considered acknowledgement that you have read and understand ASD, MHSAA, and Montana State Law as explained to you in this document.

Parent/Guardian/Caretaker signature

Date

Student/Athlete

Date

Principal/AD/Coach Signature

Date