

<u>X</u>	Monitored
<u>X</u>	Mandated
<u>X</u>	Other Reasons

Policy

SPORTS RELATED CONCUSSION AND HEAD INJURY

A concussion is a traumatic brain injury (TBI) caused by a direct or indirect blow to the head or body.

Requirements

- A. A student who participates in interscholastic athletics and who sustains or is suspected of sustaining a concussion or other head injury shall be immediately removed from the completion or practice. Student athlete may not return to play until they obtain medical clearance in compliance with the district return-to-play policy; **Any sustained # loss of consciousness will result in the athlete being sent to the emergency room via EMS.**
- B. All coaches, school nurses, school/team physicians and certified athletic trainers must complete an interscholastic head injury training program **dealing with the recognition and management of sports related concussion.**
- C. The athletic head injury training program must include:
 - 1. The recognition of the symptoms of head and neck injuries, concussions, and injuries related to second impact syndrome; and
 - 2. Describe the appropriate time to delay the return to sports competition or practice of a student – athlete who has sustained a head injury or other head injury, but if no additional time is specified for a particular age-group or sport, the student-athlete may return when written medical clearance is given the student-athlete stating that he/she is asymptomatic, and the student-athlete has completed an appropriate graduated individualized return-to-play protocol.
- D. An athletic head injury training program such as the National Federation of State High Schools Association online “Concussion in Sports” training program or a comparable program that meets mandated criteria shall be completed by all staff or others required by the district policy;
- E. Distribution of New Jersey Department of Education, *Concussion and Head Injury Fact Sheet* to every student-athlete who participates in interscholastic sports. The chief school shall ensure that a signed acknowledgement of the receipt of the fact sheet is completed by the student-athlete’s parent/guardian and is kept on file for future reference. **Parents are also encouraged to visit www.nfhsLearn.com and take advantage of the free 20 minute video entitled: Concussion in Sports: What You Need to Know regarding the recognition and management of sports related concussion.**

Prevention and Treatment of Sports Related Concussions and Head Injuries

A student-athlete who is suspected of sustaining a sports related concussion or other head injury during competition or practice shall be immediately removed from play and may not return to play that day.

- A. Possible signs (could be observed by coaches, athletic trainer, school/team physician, school nurse):
 - 1. Appears dazed, stunned, or disoriented;
 - 2. Forgets plays, or demonstrates short term memory difficulty;
 - 3. Exhibits difficulties with balance or coordination;
 - 4. Answers questions slowly or inaccurately;
 - 5. Loses consciousness;

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- B. Possible symptoms (reported by the student athlete to coaches, athletic trainer, school/team physician, school nurse, parent/guardian):
1. Headache;
 2. Nausea/vomiting;
 3. Balance problems or dizziness;
 4. Double vision or changes in vision;
 5. Sensitivity to light or sound/noise;
 6. Feeling sluggish or foggy;
 7. Difficulty with concentration and short term memory;
 8. Sleep disturbance.
- C. To return to competition and practice the student-athlete must follow the protocol:
1. Immediate removal from competition or practice;
 2. School personnel (athletic trainer, school nurse, coach, etc.) should make contact with the student-athletes parent/guardian and inform them of the suspected sports related concussion or head injury;
 3. School personnel (athletic trainer, school nurse, coach, etc.) shall provide student-athlete with the approved information/medical checklist to provide their parent/guardian and physician or other licensed healthcare professional **trained in the recognition and management of sports related concussion.**
 4. **Should the diagnosis be consistent with concussion, the student-athlete will refrain from activity for a minimum of 7 days at which time concussive symptoms will be monitored by the nurse and athletic trainer.**
 5. **The 7 day breakdown is as follows: When the athlete is determined to be “symptom free” for 48 hours (2), they may begin the Graduated Return to Activity Protocol (5) see below:**

Graduated Return to Competition and Practice Protocol

- A. After written medical clearance is given stating that the student athlete is asymptomatic, the student-athlete may begin a graduated individualized return-to-play protocol:
- Step 1:** No activity, complete physical and cognitive rest. The objective of this step is recovery;
- Step 2:** Light aerobic exercise, which includes walking, swimming, or stationary cycling, keeping the intensity less than 70% maximum percentage heart rate: no resistance training. The objective of this step is increased heart rate;
- Step 3:** Sport-specific exercise including skating, and/or running; no head impact activities. The objective of this step is to add movement;
- Step 4:** Non-contact training drills (e.g. passing drills). The student-athlete may initiate progressive resistance training;
- Step 5:** Following medical clearance (consultation between school personnel and students athletes physician), participation in normal training activities. The objective of this step is to restore confidence and assess functional skills by the coaching staff;
- Step 6:** Return to play involving normal exertion or game activity.
6. **If the student-athlete a re-emergence of any post-concussion signs or symptoms during the GRTCP, then physical activity will be discontinued for a 24 hour rest period. Once asymptomatic, they will return to the previous level of symptom free activity and then advance as tolerated.**
- B. Symptom checklists, baseline testing (**IMPACT, MACE**) and balance testing may be utilized;

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- C. If the student athlete exhibits a re-emergence of any post concussion signs or symptoms once he or she returns-to-play, they will be removed from exertional activities and returned to their school/team physician or primary care physician;
- D. In the event that a student-athlete presents a physician's note for return to play that does not comply with the GCSD Concussion Policy and Return to Play Guidelines, then upon examination, the Gloucester City School District physician will have final say in the return to play decision.**
- E. If a student-athlete is diagnosed with a concussion by an outside physician or emergency room from a non GCSD activity or accident, they must follow up with a trained physician to begin the process of care outlined in this document.**

Temporary Accommodations for Student-Athletes with Sports Related Head Injuries

Consideration of the cognitive effects in returning to the classroom is also an important part of the treatment of sports related concussions and head injuries. Mental exertion increases the symptoms from concussions and affects recovery. To recover, cognitive rest is just as important as physical rest. Reading, studying, testing, texting – even watching movies if a student is sensitive to light – can slow down a student's recovery.

In accordance with the Centers for Disease Control (CDC) toolkit on managing concussions, the board may look to address the cognitive needs of students who return to school after a concussion in the following ways:

- A. Take rest breaks as needed;
- B. Spend fewer hours at school;
- C. Be given more time to take tests or complete assignments;
- D. Receive help with schoolwork;
- E. Reduce time spent on the computer, reading, and writing;
- F. Be granted early dismissal from classes to avoid crowded hallways.

Implementation

- A. A training program and policy for the prevention and treatment of sports related concussions and head injuries shall be completed by the school/team physician, coaches, athletic trainer, school nurse, and any other school employee the chief school administrator deems necessary;
- B. The chief school administrator or his or her designee shall monitor that all assigned staff and/or others complete the interscholastic head injury training program such as the National Federation of State High Schools Association's online, "Concussion in Sports" program, which includes:
 1. The recognition of the symptoms of head and neck injuries, concussions, and injuries related to second-impact syndrome;
 2. The protocol for a return to competition or practice, which may specify an appropriate amount of time to delay the return to sports competition or practice of a student-athlete who has sustained a concussion or other head injury.
- C. The educational fact sheet shall be distributed annually to the parents or guardians of student-athletes. A signed acknowledgement of the receipt of the fact sheet shall be obtained from the student-athlete and his parent or guardian and retained by the school;
- D. Any student who participates in an interscholastic sports program and is suspected of sustaining a concussion or other head injury in competition or practice shall be immediately removed from the sports

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competition or practice. A student-athlete who is removed from competition or practice shall not participate in further sports activity until he/she is evaluated by a physician or other licensed healthcare provider **and receives written clearance from a physician trained in the evaluation and management of concussions to begin the asymptomatic Graduated Return to Play Protocol.**

- E. Baseline Testing with ImPACT: In the sports of football, field hockey, soccer, wrestling, basketball, baseball and softball at the high school level (grades 9 – 12), we will have baseline ImPACT (Immediate Post-Concussion Assessment and Cognitive Testing) testing. The 40 minute program is set up in a video game format. It tracks neuro- cognitive information such as memory, reaction time, brain processing speed and concentration. A post-concussive test, when the athlete is asymptomatic, will allow the monitoring until scores return to normal. Please note that this program is used only as an additional tool in making return to play decisions. Additional information about ImPACT can be found at www.impacttest.com. Athletes who do not participate in the sports requiring baseline testing may take the test on a voluntary basis.**

Adopted:

Key Words

Concussion, Head Injury, Sports, Athletics,

<u>Legal References:</u>	<p><u>N.J.S.A.</u> 18A:16-6, -6.1 <u>N.J.S.A.</u> 18A:35-4.6 <u>et seq.</u> <u>N.J.S.A.</u> 18A:40-1</p> <p><u>N.J.S.A.</u> 18A:40-3 <u>N.J.S.A.</u> 18A:40-5 <u>N.J.S.A.</u> 18A:40-6 <u>N.J.S.A.</u> 18A:40-7, -8, -10, -11 <u>N.J.S.A.</u> 18A:40-23 <u>et seq.</u> <u>N.J.S.A.</u> 18A:40-41.4</p> <p><u>N.J.A.C.</u> 6A:16-1.1<u>et seq.</u> <u>See particularly:</u> <u>N.J.A.C.</u> 6A:16-1.1, -1.3, -1.4, -2.1, -2.3, -2.4</p> <p><u>N.J.A.C.</u> 6A:26-12.1 <u>et seq.</u> <u>See particularly:</u> <u>N.J.A.C.</u> 6A:26-12.3</p>	<p>Indemnity of officers and employees against civil actions <u>Parents Right to Conscience Act of 1979</u> Employment of medical inspectors, optometrists and nurses; salaries; terms; rules Lectures to teachers Method of examination; notice to parent or guardian In general</p> <p>Exclusion of students who are ill Nursing Services for Nonpublic School Students Removal of student athlete from competition, practice; return Programs to Support Student Development</p> <p>Operation and Maintenance of School Facilities</p>
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Plainfield Board of Education v. Cooperman, 105 NJ 587 (1987)

Possible

<u>Cross References:</u>	<p>*1410 Local units 1420 County and intermediate units *3510 Operation and maintenance of plant *3516 Safety *4131/4131.1 Staff development; inservice education/visitations/conferences 4151.2/4251.2 Family illness/quarantine *5125 Student records *5141 Health *5141.1 Accidents *5141.2 Illness *5141.3 Health examinations and immunizations *5141.21 Administering medication</p>
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*5142	Student safety
*5200	Nonpublic school students
*6142.4	Physical education and health

*Indicates policy is included in the Critical Policy Reference Manual.

**# Defined as “ no response to stimuli” after an elapsed time of 5 seconds or greater.
1 Cantu, RC. Posttraumatic Retrograde and Anterograde Amnesia: Pathophysiology and Implications
in Grading and Safe Return to Play. Journal of Athletic Training. 2001: 36(3):244-248.**