Crown Point Central School

Concussion Guidelines and Procedures Policy

Education

Concussion education should be provided for all administrators, teachers, coaches, athletic trainers, school nurse and guidance counselor. Education of parents should be accomplished through preseason meetings for sport and/or information sheets provided to parents. Education should include, but not be limited to the definition of concussion, signs and symptoms of concussion, how concussions may occur, why concussions are not detected with CT Scans or MRI's, management of the injury and the protocol for return to school and return to activity or Interscholastic athletics. The protocols will cover all students returning to school after suffering a concussion regardless if the accident occurred outside of school or while participating in a school activity.

Concussion Management Team

The District will assemble a concussion management team (CMT). The CMT will consist of the Principal, athletic director, school nurse, athletic trainer and/or school physician. The District's CMT should coordinate training for all administrators, teachers, coaches and parents. Training should be mandatory for all coaches, assistant coaches and volunteer coaches that work with these student athletes regularly. In addition, information related to concussions should also be included at parent meetings or in information provided to parents at the beginning of sports seasons. Parents need to be aware of the school district's policy and how these injuries will ultimately be managed by school officials. Training should include: signs and symptoms of concussions, past concussion and second impact syndromes, return to play and school protocols, and available area resources for concussion management and treatment. Particular emphasis should be placed on the fact that **no** athlete will be allowed to return to play the day of injury and also that all athletes should abstain appropriate medical clearance prior to returning to play or school. The CMT will act as a liaison for any student returning to school and/or play following a concussion. The CMT will review and/or design an appropriate plan for the student while the student is recovering.

Concussion Management Protocol

Return to play

Return to play following a concussion involves a stepwise progression once the individual is symptom free. There are many risks to premature return to play including: a greater risk for a second concussion because of a lower concussion threshold, second impact syndrome (abnormal brain blood flow that can result in death), exacerbation of any current symptoms, and possibly increased risk for additional injury due to alteration in balance. These NYSPHAA current returns to play recommendations are based on the most recent international expert opinion. * No student athlete should return to play while symptomatic. Students are prohibited from returning to play the day the concussion is sustained. If there is any doubt as to whether a student has sustained a concussion, it should be treated as a concussion. Once the student athlete is symptom free at rest for 24 hours and has a signed release by the treating clinician, she/he may begin the return to play progression below (provided there are no other mitigating circumstances.)

Day 1: Light aerobic activity
Day 2: Sport-specific activity

Day 3: Non-contact training drills

Day 4: Full contact practice

Day 5: Returns to play

Each step should take 24 hours so that an athlete would take approximately one week to proceed through the full rehabilitation protocol once they are asymptomatic at rest and with provocative exercise. If any post-concussion symptoms occur while in the stepwise program, then the student should drop back to the previous asymptomatic level and try to progress again after a further 24 hour period of rest has passed.

Concussion Symptoms

The following are all potential signs of concussion. Appropriate action <u>MUST</u> be taken by the head coach of a given sport in <u>ANY</u> circumstance that may suggest that a child has a concussion. Typically, a concussion happens due to a blow to the head, whether it is falling, being hit by a ball or other object, or any other potential situation resulting in blunt force trauma to the head. Signs of a concussion may be but are not limited to any one or more of the following:

- Loss of consciousness
- Slurring words
- Headache
- Difficulty concentrating
- Feeling "foggy"
- Slow reaction times
- Dizziness
- Lightheadedness
- Nausea
- Sensitivity to bright lights or loud sounds
- Irritability
- Changes in sleep patterns (insomnia or sleeping significantly more)
- Easily confused
- Numbness
- Vomiting
- Dilated pupils
- Memory problems

l'imetrame for return from concussion





Symptom Complex

1st concussion

2nd concussion

3rd concussion

minutes. No postsymptoms last less than 15 Concussion traumatic

amnesia.

when

Return to play asymptomatic for one week. when for 15 minutes. Return to play asymptomatic

May return in three Terminate season. asymptomatic. months if

> amnesia lasts less than 30 minutes. consciousness. Post-traumatic No loss of

Return to play asymptomatic for at least weeks, if after two Return to play asymptomatic for one full when week.

one full week.

May return in three to Terminate season. asymptomatic. six months if

Timeframe for return from concussion





Symptom Complex

1st concussion

2nd concussion

3rd concussion

Concussion symptoms last more than 15 minutes.

Refurn to play R when asymptomatic work for one full asymptometry

Return to play Terminate season.

after two May return in three to six months if asymptomatic asymptomatic for one for one week.

Terminate season.
May return in three to six months if asymptomatic for one

Return to play

after one

month if

asymptomatic for one week. Consider terminating season.

Post-traumatic amnesia lasts longer than 30 minutes, but less than 24 hours.

Return to play when asymptomatic for one full week.

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1st concussion

2nd concussion

3rd concussion

No return to contact.

Any loss of consciousness.

Terminate reason. Discourage

Discourage return.

asymptomatic

Post-traumatic

amnesia more than 24 hours.

Transport to hospital. Return in one month if asymptomatic for two full weeks.

consciousness

Loss of

more than 5

minutes.

Terminate No return to contact. season. Return to play in three to six months if asymptomatic for two weeks.