CONCUSSION MANAGEMENT _- Return to Play/Activity

When a student shows ANY sign or symptom of a concussion:

- 1. The student is to be removed from any type of physical activity, practice, game and/or performance.
- 2. The student is not permitted to return to the physical activity, practice, game, and/or performance on the same day.
 - a. The student must be under constant supervision of the certified athletic trainer and/or coach/sponsor.
 - b. The student must be regularly monitored for the possibility of a concussion.
- 3. An on-field concussion evaluation is to be performed on the student when a certified athletic trainer is present.
- 4. The parent/guardian of the student is to be informed of the injury and possible concussion as soon as possible after the student shows ANY sign or symptom of a concussion. A form is available for this purpose and should be shared with the parent, school nurse, and trainer if appropriate. The information provided to the parent/guardian of the student must include the following:
 - a. Date, time, and extent of the injury.
 - b. The signs and symptoms of a concussion that were treated.
 - c. Any action taken to treat the student.
 - d. Signs and symptoms to observe for possible concussion.
- 5. The parent/guardian should arrange for the constant supervision of their child for the next 24 hours. If any signs or symptoms of concussion occur and/or deteriorate, take athlete to a physician or hospital emergency room immediately.
- 6. School staff will immediately contact parent/guardian and/or 911 if any signs or symptoms of concussion deteriorate while the student is under their supervision.
- 7. The student is not considered for return to any type of physical activity, practice, game, and/or performance until that athlete has been evaluated by a licensed health care professional, and received written /signed clearance to resume activity participation from a licensed health care professional and the parent/guardian of the student.
- 8. A licensed health care professional as defined by state law, is either a physician or licensed practitioner under the direct supervision of a physician, a certified athletic trainer, a neuropsychologist, or some other qualified individual who is registered, licensed, certified, or otherwise statutorily recognized by the State of Nebraska to provide health care services AND is trained in the evaluation and management of traumatic brain injuries among a pediatric population. (Member/members of the building's concussion management team will consider the input provided by the licensed health care professional and determine if the student is cleared to return to the activity using all available information).

RETURN TO PHYSICAL ACTIVITY – Return to Play/Activity

- 1. The certified athletic trainer has possession of the written and signed clearance to resume play (if an athletic/activity)/participation from a licensed health care professional, and the written permission from the parent/legal guardian of the student. These clearances permit the athlete to proceed through the return to play protocol established by the school.
- 2. The student should be cleared by a licensed health care professional for any physical activity, practice, game and/or performance, and is required to proceed through the return to play/activity protocol established by the school.
- 3. Return to play protocol:

- a. The student must be asymptomatic of the signs and/or symptoms of concussion for a minimum of 24 hours.
- b. The student is permitted to perform light aerobic exercise only; if asymptomatic of the signs and/or symptoms of concussion, proceed to next step.
- c. The student is permitted to perform sport/activity specific exercise, with progressive addition of resistance training, head impact activities not permitted during this step; if asymptomatic of the signs and/or symptoms of concussion, proceed to next step.
- d. The student is permitted to perform non-contact training drills; if asymptomatic of the signs and/or symptoms of concussion, proceed to next step.
- e. The student is permitted to perform full contact training; if asymptomatic of the signs and/or symptoms of concussion, proceed to next step.
- f. The student is permitted to resume participation in games and/or performances.
- g. IF THE STUDENT SHOWS SIGNS AND/OR SYMPTOMS OF CONCUSSION AT ANY OF THE ABOVE STEPS, HE/SHE RETURNS TO THE PREVIOUS STEP OF THE RETURN TO PLAY PROTOCOL AND WAITS A MINIMUM OF 24 HOURS BEFORE RESUMING THE RETURN TO PLAY PROGRESSION.

RETURN TO LEARN (based on Oregon Concussion Awareness Management Program)

A concussion management team develops, implements, and monitors the Return to Learn plan. That team may include the principal, AD, teacher(s), nurse, athletic trainer, doctor, parent/guardian, and student if appropriate. In most cases, a concussion will not significantly limit a student's performance in school – and is usually temporary. If needed, the recommended progress may be considered by the team:

- 1. Home Total Rest: no mental exertion, stay home, and no driving
- 2. Home Light Mental Activity: up to 30 minutes of exertion, no prolonged concentration, stay home, and no driving
- 3. School Part Time: provide place for scheduled mental rest, no significant classroom or standardized testing, modify rather than postpone academics, and provide extra time, extra help and modified assignments
- 4. School Part Time: no standardized testing, modified classroom testing, and moderate decrease of extra time, help, and modifications of assignments.
- 5. School Full Time: no standardized testing, routine tests are ok, continued decrease of extra time, help, and modifications of assignments, may require more supports in academically challenging subjects.
- 6. School Full Time: attends all classes, full homework and work load.

The team may consider a 504 evaluation and/or special education evaluation if the symptoms continue, improve slower than usual, and worsen.

In simple terms, once a student is suspected of sustaining a concussion, the following actions must occur:

- The parents are provided information as to what happened, actions taken to treat the athlete, and what steps they should take in the next 24 hours regarding the student's health and safety.
- The student must have written and signed clearances from a licensed health care

- professional and the parent(s) to return to participation. A licensed health care professional is a physician, a licensed practitioner under the direct supervision of a physician, a neuropsychologist, or other qualified individual as determined by the laws of Nebraska that is trained in the evaluation and management of traumatic brain injuries among children and youth.
- These clearances permit the student to proceed through the return to play/learn protocol. If and when the student has successfully completed the return to play/learn protocol and is judged to be asymptomatic of concussive injury, the student is released to the coach/sponsor/teacher and may resume full participation.

Signs Observed by Staff	Signs Reported by Student	Signs Observed by Parent(s)
Appears dazed or stunned	Headache	Appears dazed or stunned
Is confused about assignment	Nausea	Appears confused
Forgets plays	Balance problems or dizziness	Forgets known items
Is unsure of game, score, or opponent	Double or fuzzy vision	Is unsure of name, usual surroundings
Moves clumsily	Sensitive to light or noise	Moves clumsily
Answers questions slowly	Feeling sluggish	Answers questions slowly
Loses consciousness	Feeling foggy or groggy	Loses consciousness
Shows behavior or personality changes	Concentration of memory problems	Shows behavior or personality
		changes
Can't recall events prior to hit on the head	Confusion	Can't recall events prior to hit on the
		head
Can't recall events after the hit on the head		Can't recall events after the hit on the
		head

If you suspect that your child may have a concussion/head injury, you should:

- <u>Seek medical attention.</u> A health care professional will be able to decide how serious the concussion is and when it is safe for your child to return to sports/activities/classroom.
- <u>Keep your child out of play, activities and/or classroom.</u> Concussions take time to heal. Do not let your child return to play/classroom until a health care professional says it is OK. Students who return to play too soon--- when the brain is still healing--- risk a greater chance of having a second concussion. Second or later concussions can be very serious. They can cause permanent brain damage, affecting your child for a lifetime.
- Tell your child's coaches/sponsor/school nurse and/or school athletic trainer about any recent concussion. Coaches/sponsors/school nurse should know if your child had a recent concussion. Your child's coaches/sponsors/school nurse may not know about a concussion your child received unless you tell them. Knowing about the concussion will allow the coach/sponsor/school nurse to keep your child from activities that could result in another concussion. The school nurse can help communicate information to your child's teachers should classroom accommodations (Return to Learn plan) be necessary.
- Remind your child. It's better to miss one game/activity than the whole season/year.