

Concussion Management Policy

Concussions have become a major concern not only in the state of Pennsylvania but across the nation at all levels of athletic competition. The recognition, treatment, and return to participation has become a national priority as a result of an increasing number of studies that have revealed the long-term consequences of concussions not properly treated and repeated numbers of concussions. The NFHS, along with the PIAA have adopted procedures for participation schools to follow. Manheim Township High School has developed this policy to ensure the safety and optimal health of all athletes participating in sports in accordance with PA State Act 101.

What is a Concussion?

A concussion is a traumatic brain injury that is caused by a blow to the head or body, a fall, or another injury that jars or shakes the brain inside the skull. A concussion can range from mild to severe. An increase in the number of concussions an athlete sustains has been shown to cause more severe and longer-lasting symptoms that can lead to permanent brain damage. Concussions not treated properly and a premature return to participation has shown an increased risk and severity of another concussion known as the Second Impact Syndrome.

Signs Observed

- Appears dazed or stunned
- Confused about assignment or position
- Forgets instructions
- Unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Mood, Behavior, or Personality changes
- Can't recall events prior to hit or fall
- Can't recall events after hit or fall
- Loss of Consciousness

Symptoms Reported by Athlete

- Headache or pressure in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Does not "feel right" or "feeling down"

Prevention

To help prevent concussions, mouthpieces and equipment should be fitted properly and adjusted or replaced as needed. Any type of modification of equipment should NOT be allowed to ensure the integrity of the equipment is not impacted. This would include after-market chin straps and hair coverings.

Reporting a Concussion

Anyone that suspects an athlete has suffered a concussion or notices any signs or symptoms of a concussion must remove the athlete from participation and notify the ATC (Athletic Trainer).

Acute Management of a Concussion

Any athlete that is suspected of suffering a concussion or is experiencing any signs and symptoms should be removed from participation for evaluation by the ATC. Following evaluation, the ATC will make the decision whether the athlete should be transported to the hospital for emergency care or to be seen by a physician. An athlete suffering a concussion shall not return to participation for the

remainder of that day. This is to ensure that the athlete is not exposed to a greater risk of increasing injury.

Post-Acute Concussion Management

Any athlete that has suffered a concussion will need to be cleared by the appropriate medical provider: a licensed physician (MD or DO), a physician assistant, a neurologist. **The ATC has the right to hold the athlete out of participation even with a clearance from a physician if the ATC deems that the athlete is still symptomatic.**

An athlete who has suffered a concussion will check in with the athletic trainer daily and fill out a symptom tracking sheet to ensure symptoms are not increasing or becoming worse.

Return to Participation Protocol

An athlete returning to participation will start the protocol once asymptomatic for 24 hours and cleared by the appropriate medical professional. Protocol is based on the NFHS Guidelines for Management of Concussion in Sport. Each step represents a day.

Step 1: Light Aerobic Exercise

- 10 minutes of stationary bike or jogging
- Static Stretching
- Low-intensity balance exercises
- No weight training, jumping, or hard running

Step 2: Moderate Aerobic Exercise

- 15 minutes of stationary bike or jogging
- Dynamic Stretching
- Balance exercises with multi-tasking

Step 3: Sport Specific, Non-Contact Drill

- Non-contact drills in full uniform
- Interval training
- Agilities
- Weight training may resume
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Step 4: Full Contact Practice

- Initiate contact working up to full contact
- Completion of full practice

Step 5: Full Game Play

- No restrictions
- Full return to participation.

Return of Symptoms

If at any point during the return to participation protocol, symptoms or signs of a concussion reoccur, the athlete will stop activity and begin the protocol again once asymptomatic for 24 hours.

Education

In order to provide a comprehensive concussion management policy, the student-athlete, parents, and coaches must have an understanding of concussions. Please see the concussion management teams document below.

Athletes / Parents

Prior to participation, both the athlete and the parent will sign an information sheet and acknowledgement form. This form is Section 3 of the PIAA Comprehensive Initial Pre-Participation Physical Evaluation.

Athletes will be addressed by their coaches on proper equipment fitting and usage. The ATC will also discuss each team about concussions and the importance of self-reporting symptoms.

Coaches

All coaches, paid and volunteer, must complete an annual training on concussion and management practices. The training must be an approved course or seminar as provided by the athletic director and/or the ATC. Documentation for the complete course must be submitted to the athletic director.

Concussion Management Teams (CMT)

A concussion is a mild traumatic brain injury. Concussion occurs when normal brain functioning is disrupted by a blow or jolt to the head, neck, face, or chest. Recovery from concussion will vary. Avoiding re-injury and overexertion from physical activity and cognitive activity until fully recovered are the cornerstones of proper concussion management.

The District has assembled Concussion Management Teams that consist of symptom monitors (school nurses and/or athletic trainers) and academic monitors (school counselors).

Any student believed to have sustained a concussion or who is demonstrating signs, symptoms, or behaviors consistent with a concussion while participating in a school-sponsored class, extracurricular activity, or interscholastic athletic activity shall be immediately removed from the game or activity and evaluated as soon as possible by the athletic trainer or school nurse. Their assessment may result in any of the following: a referral to parent/guardian for observation and monitoring, recommendation to consult with the student's medical provider, or urgent medical evaluation.

If the head injury occurs outside of school or school sponsored events, the student should report to the school nurse on their return to school for possible initiation of the Concussion Management Team.

Students do not need medical clearance to resume academic activities. They may not return to extracurricular and school sponsored activities while experiencing symptoms consistent with those of a head injury. Academic adjustments will remain in place and or be modified relative to symptomatic improvement. Student athletes will follow the Return to Play protocol per the athletic department and will require clearance by an appropriate medical provider in order to resume interscholastic competitions.

Guidelines:

- Students are referred to a nurse or athletic trainer for a report of concussion or possible concussion.
- Nurse/athletic trainers (symptom monitors) add students' names to a shared spreadsheet.
- Nurse (symptom monitor) and Academic monitor initiate Concussion Management Team. Athletic Trainer initiates Return to Play protocol.
- Student information is entered by the nurse into CMT spreadsheet.
- Nurse utilizes symptom monitoring tool in initial assessment/visit with student. Outcome of tool, in collaboration with nursing assessment, will determine if the student will be monitored for 1-2 days for possible concussion and/or initiate CMT.
- If the CMT is initiated, the nurse will review the Medical Alert template and individualized academic adjustments to students' needs. Copy and paste medical alert template into a medical alert. Print and provide a copy to the student with the date revised. Update medical alert banner with date of next anticipated follow up health room visit.

- Parent notification as needed.
- If full CMT is not warranted, teachers will be notified via medical alert: “student is currently being monitored for concussion symptoms. Please work with the student regarding tests, screen time, and making up work for the next few days.”
- Academic monitoring tools are sent and collected from the teachers weekly by academic monitor.
- Students will meet weekly with the nurse. Symptoms will be evaluated by either a checklist or verbal report by student. Academic adjustments will be made accordingly. Teachers will receive weekly update via medical alert.
- Teachers will be notified via medical alert when academic adjustments can be discontinued.
- Students experiencing academic challenges beyond those addressed with basic academic adjustment will be referred to their school counselor.
- If a student remains symptomatic at four weeks post concussion or if the student meets recommendation for earlier referral, BrainSTEPS will be notified. Parents will be contacted and an initial meeting will be scheduled with BrainSTEPS consultant, parent, student, and ideally the student's guidance counselor, if available. Parents will be required to sign the district's permission to release information form and a permission form for BrainSTEPS' involvement either at the time of referral to the BrainSTEPS team or at the initial meeting.