

Lapeer Community Schools Concussion Program

The following concussion program has been established for use with all Lapeer Community Schools athletes. The concussion program contains three components:

- baseline testing of athletes
- assessment of injury
- return to play procedures

The purpose of the LCS concussion program is to provide specific procedures to manage concussions in accordance with current medical standards and research and to be in compliance with the policies and procedures of the following organizations:

1. Lapeer Community Schools
2. Michigan High School Athletic Association (MHSAA)

The concussion program is managed by the certified athletic trainer who serves as the Lapeer Community Schools Athletic Department "Designated Healthcare Professional."

Definition

A concussion is a brain injury which results in a temporary disruption of normal brain function. A concussion occurs when the brain is violently rocked back and forth or twisted inside the skull as a result of a blow to the head or body. An athlete does not have to lose consciousness ("knocked-out") to suffer a concussion. *From the National Federation of State High School Associations.*

Baseline Testing

Lapeer Community Schools will conduct baseline testing utilizing the ImPACT (Immediate Post-Concussion Assessment and Cognitive Testing) program. This program, supported by current medical research, is utilized in order to objectively evaluate the athlete following an injury in order to ensure that safety of the athlete when returning to play and prevention of further injury.

This is ONE tool in the process to help assess and manage our student-athletes in their care of concussion injuries. The baseline test provides an initial measure of cognitive function, prior to any injury, and use in comparison, post injury.

Baseline testing will be conducted prior to the start of the athletic competitive season for the following athletes every two years:

- All athletes in grades 7, 9 and 11;
- Any athlete in grades 8, 10 or 12 who did not receive baseline testing the previous year;
- Any athletes with a previous history of concussion during last year of participation;
- Any Athletes who received poor baseline data on previous baseline test.

Trained program administrators will compare athletes' results to norms and standards set forth by ImPACT program, and any athlete with results consistent with ImPACT's "sandbagging" criteria will be re-tested in efforts to curtail all athletes from "sandbagging" on baseline test thereby making it easier to pass a post concussion test.

Trained LCS staff members and/or the designated healthcare professional will administer baseline testing. East and West High School, Rolland-Warner and Zemmer Middle Schools will each will maintain two staff members trained in the administration of baseline testing.

Assessment of Injury

Any LCS student-athlete (in-season) suspected of concussion and/or demonstrating behaviors consistent with a concussion is to be referred to the athletic trainer (AT) for further assessment, during a practice, contest, or occurring outside of athletic participation. If the AT is not available, parent/guardian should be contacted and student referred to a primary care physician/ER for further assessment. The AT is to be notified and follow up assessment to be performed as soon as available (based on circumstances).

If it is confirmed by the AT that the student did not sustain a concussion, the athlete may reenter practice or an athletic contest.

If the athlete has been referred to a physician/ER for further assessment, the following procedures must occur:

1. Athlete is removed from continued athletic participation for that day (*MHSAA policy*)
2. Referral to primary care physician/ER for medical evaluation/clearance
3. Parent/guardian of the athlete is contacted and provided instructions
4. Coach completes *LCS Incident Report* within 24 hours and forwards to athletic director. Athletic director will forward to the business office
5. AT monitors until asymptomatic

A student with persistent symptoms should continue to follow up with their Primary Care Physician or other medical professional, as needed.

Return to Play Process (RTP)

Medical clearance by a primary care physician/ER is NOT the only factor in determining when the student-athlete may return to play, but ONE step in the process. When an athlete has been referred for medical attention, all of the following steps will be completed prior to resuming full athletic participation:

1. Obtain written medical clearance, by MD/DO. However, this may not be used to return on same day as initial injury. Clearance should be provided on the *Return to Competition* form.
2. Must be symptom free, as reported on the follow up assessments, from the AT;
3. Demonstration of "normal" function on ImpACT software (if baseline data was obtained). Athletes may be assessed 24-48 hours after onset of symptoms and can be retested again once symptom free. Post-injury results will be reviewed with Dr. Czarnota, PhD. Athlete will not be allowed to return to play until ImpACT testing, as confirmed by Dr. Czarnota, is normal.

Full return to participation is not immediate.

In accordance with current medical research/recommendations, pertaining to adolescent student – athletes, following a confirmed concussion, athletes will complete a standard progression of activity, progressing to each step the following day (2 steps may be combined into one day at the AT's discretion):

1. Rest until symptom free for 24 hours (physical/cognitive)
2. light aerobic exercise (ex: stationary cycle)
3. Sport specific exercise, jogging, light cardio work, basic skills - non contact
4. Non contact training drills (start light resistance training)
5. Full contact training
6. Return to competition (game play)

If symptoms present at any stage above, activity is to stop and resume the same step the next day (as long as symptoms have resolved by that time).

Educational Material for Parents and Students (Content Meets MDCH Requirements)

Sources: Michigan Department of Community Health, CDC and the National Operating Committee on Standards for Athletic Equipment (NOCSAE)

UNDERSTANDING CONCUSSION

Some Common Symptoms

Headache
Pressure in the Head
Nausea/Vomiting
Dizziness

Balance Problems
Double Vision
Blurry Vision
Sensitive to Light

Sensitive to Noise
Sluggishness
Haziness
Fogginess
Grogginess

Poor Concentration
Memory Problems
Confusion
“Feeling Down”

Not “Feeling Right”
Feeling Irritable
Slow Reaction Time
Sleep Problems

WHAT IS A CONCUSSION?

A **concussion is a type of traumatic brain injury** that changes the way the brain normally works. A concussion is caused by a fall, bump, blow, or jolt to the head or body that causes the head and brain to move quickly back and forth. A concussion can be caused by a shaking, spinning or a sudden stopping and starting of the head. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious. A concussion can happen even if you haven’t been knocked out.

You can’t see a concussion. Signs and symptoms of concussions can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If the student reports any symptoms of a concussion, or if you notice symptoms yourself, seek medical attention right away. A student who may have had a concussion should not return to play on the day of the injury and until a health care professional says they are okay to return to play.

IF YOU SUSPECT A CONCUSSION:

- 1. SEEK MEDICAL ATTENTION RIGHT AWAY** – A health care professional will be able to decide how serious the concussion is and when it is safe for the student to return to regular activities, including sports. Don’t hide it, report it. Ignoring symptoms and trying to “tough it out” often makes it worse.
- 2. KEEP YOUR STUDENT OUT OF PLAY** – Concussions take time to heal. Don’t let the student return to play the day of injury and until a health care professional says it’s okay. A student who returns to play too soon, while the brain is still healing, risks a greater chance of having a second concussion. Young children and teens are more likely to get a concussion and take longer to recover than adults. Repeat or second concussions increase the time it takes to recover and can be very serious. They can cause permanent brain damage, affecting the student for a lifetime. They can be fatal. It is better to miss one game than the whole season.
- 3. TELL THE SCHOOL ABOUT ANY PREVIOUS CONCUSSION** – Schools should know if a student had a previous concussion. A student’s school may not know about a concussion received in another sport or activity unless you notify them.

SIGNS OBSERVED BY PARENTS:

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Can’t recall events prior to or after a hit or fall
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes

CONCUSSION DANGER SIGNS:

In rare cases, a dangerous blood clot may form on the brain in a person with a concussion and crowd the brain against the skull. A student should receive immediate medical attention if after a bump, blow, or jolt to the head or body s/he exhibits any of the following danger signs:

- One pupil larger than the other
- Is drowsy or cannot be awakened
- A headache that gets worse
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Cannot recognize people/places
- Becomes increasingly confused, restless or agitated
- Has unusual behavior
- Loses consciousness (even a brief loss of consciousness should be taken seriously.)

HOW TO RESPOND TO A REPORT OF A CONCUSSION:

If a student reports one or more symptoms of a concussion after a bump, blow, or jolt to the head or body, s/he should be kept out of athletic play the day of the injury. The student should only return to play with permission from a health care professional experienced in evaluating for concussion. During recovery, rest is key. Exercising or activities that involve a lot of concentration (such as studying, working on the computer, or playing video games) may cause concussion symptoms to reappear or get worse. Students who return to school after a concussion may need to spend fewer hours at school, take rests breaks, be given extra help and time, spend less time reading, writing or on a computer. After a concussion, returning to sports and school is a gradual process that should be monitored by a health care professional.

Remember: Concussion affects people differently. While most students with a concussion recover quickly and fully, some will have symptoms that last for days, or even weeks. A more serious concussion can last for months or longer.

To learn more, go to www.cdc.gov/concussion.

Revised September 2013

Parents and Students Must Sign and Return the Educational Material Acknowledgement Form

Signature Acknowledgment

We, student and parent/guardian, have reviewed and understand the rules and regulations set forth in the Lapeer Community School's Student Athletic Code and agree to abide by same.

Print Student Name _____

Student's Signature _____

Print Parent or Guardian Name _____

Parent or Guardian's Signature _____

NOTE: This form is to be signed and returned to the school before the student will be allowed to go out for practice in any sport.