

STUDENT-ATHLETE
CONCUSSIONS DURING
EXTRACURRICULAR
ACTIVITIES

Informational Packet
for Parents and Student-Athletes

STUDENT-ATHLETE CONCUSSIONS DURING EXTRACURRICULAR ACTIVITIES

The Pittsylvania County School Division desires the safe return to activity for all student-athletes participating in extracurricular physical activities following an injury, but particularly after a concussion. The goal of this policy is to ensure (i) that coaches, school staff, volunteers, student-athletes, and their parents or guardian are aware of the short-term and long term effects of concussions; (ii) that concussed student-athletes are identified, removed from play immediately, and referred appropriately; and (iii) that concussed student-athletes are returned to play only after receiving appropriate medical care, given adequate time to heal, and are symptom free.

Definitions

Concussion: *a brain injury that is characterized by an onset of impairment of cognitive and/or physical functioning, and is caused by a blow to the head, face or neck, or a blow to the body that cause a sudden jarring of the head (i.e., a helmet to the head, being knocked to the ground). A concussion can occur with or without a loss of consciousness, and proper management is essential to the immediate safety and long-term future of the injured individual.*

Licensed Health Care Provider: *a physician, physician assistant, osteopath or athletic trainer licensed by the Virginia Board of Medicine, a neuropsychologist licensed by the Board of Psychology, or a nurse practitioner licensed by the Virginia State Board of Nursing.*

Return to Play: *to participate in a non-medically supervised practice, game, or athletic competition.*

I. Pittsylvania County Schools Concussion Management Team

- a. The Pittsylvania County Schools Concussion Management Team (“CMT”) shall be appointed by the Superintendent of Schools and shall consist of a school administrator, an athletic administrator, a licensed health care provider, a coach, a parent or guardian of a student-athlete, a student athlete, and any such other person the Superintendent determines will assist the CMT in its actions.
- b. The CMT shall develop concussion training materials for school personnel, volunteers, student-athletes, and parents of student-athletes. The CMT shall also develop concussion reporting, management, and review protocols for the school division. The CMT shall maintain a record of all incidents where a student-athlete has been removed from a game, competition, or practice because he or she has been suspected of sustaining a *concussion*.
- c. The CMT shall meet at least once per semester and shall evaluate the division’s training materials, concussion reporting, management, and review protocols annually.

II. Required Concussion Training for School Personnel and Volunteers:

- a. Every Coach, Assistant Coach, School Staff, Adult Volunteer, or other person serving in a coaching or advisory role over student-athletes during games, competitions, or practices shall receive training in the signs and symptoms of sports-related concussions, strategies to reduce the risk of concussions, how to seek proper medical treatment for concussions, and the process by which a concussed student-athlete may safely return to practice or competition. Each school and the CMT shall maintain a written record of the names and dates of completion for all persons completing the school's concussion training.
- b. Each school shall ensure that no person is allowed to coach or advise a student-athlete in any practice, game, or competition who has not completed the school's concussion training within the previous twelve months.

III. Distribution of Training Materials to Student-Athletes and Parent/Guardian:

- a. Prior to participating in any extracurricular physical activity, each student-athlete and the student-athlete's parent or guardian shall review concussion training materials developed by the CMT and sign a statement acknowledging receipt of such information. The concussion training materials shall describe the short-and long-term health effects of concussions.
- b. The signed statements acknowledging the receipt of concussion training materials shall be valid for one calendar year and will Satisfy the concussion training requirements for all of a student-athlete's extracurricular physical activities for a calendar year.

IV. Removal from Extracurricular Physical Activities

- a. A student-athlete suspected by a student-athlete's coach, athletic trainer, or team physician of sustaining a concussion or brain injury in a practice, game, or competition shall be removed from the activity immediately, evaluated, and if necessary, referred for further treatment. A student-athlete who has been removed from play, evaluated, and suspected to have sustained a concussion shall not return to play that same day.
- b. In determining whether a student-athlete removed from play is suspected of having sustained a concussion, an appropriate licensed health care provider or other properly trained individual, shall evaluate the student-athlete at the time of removal utilizing a standardized concussion sideline assessment instrument (e.g., Sideline Concussion Assessment Tool [SCAT-II], the Standardized Assessment of Concussion [SAC], or the Balance Error Scoring System [BESSI])
- c. The determination of whether a student-athlete removed from play is suspected of having sustained a concussion shall be the sole determination of the licensed health care provider or other properly trained individual conducting the concussion sideline assessment. Such determination is final and may not be overruled by another licensed

health care provider or other properly trained individual, coach, assistant coach, school staff, or another person serving in a coaching or advisory role, the student-athlete, or the parent or guardian of the student-athlete.

- d. The coach of a student-athlete may elect not to return the student-athlete to play, even if after the concussion sideline assessment, it is determined that the student-athlete is no longer suspected of having sustained a concussion.

V. Return to Play Protocol

- a. *No* student-athlete shall be allowed to return to extracurricular physical activities, which includes the student-athlete's practices, games, or competitions, until the student presents a written medical release from the student-athlete's licensed health care provider. The written medical release shall certify that (i) the provider is aware of the current medical guidance on concussion evaluation and management; (ii) the student-athlete no longer exhibits signs symptoms or behaviors consistent with a concussion at rest or with exertion; and (iii) that the student-athlete has successfully completed a progressive return to sports participation program. The length of progressive return to sports participation program shall be determined by the student-athlete's licensed health care provider but shall last a minimum of five calendar days.
- b. The coach of a student-athlete may elect not to allow a student-athlete to return to extracurricular physical activities, even after the production of written medical release from the student-athlete's licensed health care provider, if the coach observes signs and symptoms of sports-related concussions. If the student-athlete's coach makes such a decision, the coach shall communicate the observations and concerns to the student-athlete's parent or guardian within one day of the decision not to allow such student-athlete to return to extracurricular physical activities.

VI. Return to Learn Protocol

- a. School personnel shall be alert to cognitive and academic issues that may be experienced by a student-athlete who has suffered a concussion or other head injury, including (i) difficulty with concentration, organization, and long-term and short-term memory; (ii) sensitivity to bright lights and sounds; and (iii) short-term problems with speech and language, reasoning, planning, and problem solving.
- b. School personnel shall accommodate the gradual return to full participation in academic activities by a student-athlete who has suffered a concussion or other head injury as appropriate, based on the recommendation of the student-athlete's licensed health care provider as to the appropriate amount of time that such student-athlete needs to be away from the classroom.

VII. Helmet Replacement and Reconditioning

- a. All helmets used in school physical activities must conform to the National

Operations Committee on Standards for Athletic Equipment (NOCSAB) and certified as conforming by the manufacturer at the time of purchase.

- b. Reconditioned helmets that have been purchased must be recertified as conforming to the NOCSAR by the reconditioner.

Adopted: July 12, 2011

REVISED: August 12, 2014

Legal Ref.: Code of Virginia, 1950, as amended, §22.1-271.5

Acts 2014,.c. 349.

Virginia Board of Education Guidelines for Policies on Concussions in Student-Athletes (Adopted Jan. 13, 2011).

Cross Ref.:

A FACT SHEET FOR High School Athletes



This sheet has information to help you protect yourself from concussion or other serious brain injury and know what to do if a concussion occurs.

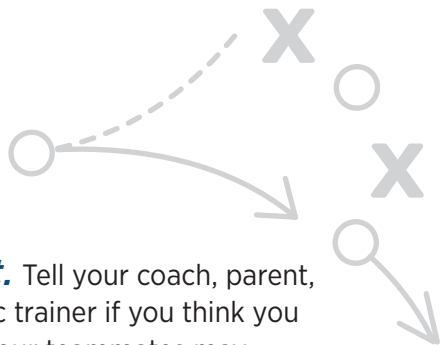
WHAT IS A CONCUSSION?

A concussion is a brain injury that affects how your brain works. It can happen when your brain gets bounced around in your skull after a fall or hit to the head.

What Should I Do If I Think I Have a Concussion?



Report It. Tell your coach, parent, and athletic trainer if you think you or one of your teammates may have a concussion. It's up to you to report your symptoms. Your coach and team are relying on you. Plus, you won't play your best if you are not feeling well.



Get Checked Out. If you think you have a concussion, do not return to play on the day of the injury. Only a healthcare provider can tell whether you have a concussion and when it is OK to return to school and play. The sooner you get checked out, the sooner you may be able to safely return to play.



Give Your Brain Time to Heal.

A concussion can make everyday activities, such as going to school, harder. You may need extra help getting back to your normal activities. Be sure to update your parents and doctor about how you are feeling.

Why Should I Tell My Coach and Parent About My Symptoms?



- Playing or practicing with a concussion is dangerous and can lead to a longer recovery.
- While your brain is still healing, you are much more likely to have another concussion. This can put you at risk for a more serious injury to your brain and can even be fatal.

GOOD TEAMMATES KNOW:
IT'S BETTER TO MISS ONE GAME THAN THE WHOLE SEASON.



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How Can I Tell If I Have a Concussion?

You may have a concussion if you have any of these symptoms after a bump, blow, or jolt to the head or body:

-  **Get a headache**
-  **Feel dizzy, sluggish, or foggy**
-  **Are bothered by light or noise**
-  **Have double or blurry vision**
-  **Vomit or feel sick to your stomach**
-  **Have trouble focusing or problems remembering**
-  **Feel more emotional or “down”**
-  **Feel confused**
-  **Have problems with sleep**

Concussion symptoms usually show up right away, but you might not notice that something “isn’t right” for hours or days. A concussion feels different to each person, so it is important to tell your parents and doctor how you are feeling.

How Can I Help My Team?



Protect Your Brain.

Avoid hits to the head and follow the rules for safe and fair play to lower your chances of getting a concussion. Ask your coaches for more tips.



Be a Team Player.

You play an important role as part of a team. Encourage your teammates to report their symptoms and help them feel comfortable taking the time they need to get better.

The information provided in this document or through linkages to other sites is not a substitute for medical or professional care. Questions about diagnosis and treatment for concussion should be directed to a physician or other healthcare provider.

Revised January 2019

To learn more,
go to cdc.gov/HEADSUP



A FACT SHEET FOR High School Parents



This sheet has information to help protect your teens from concussion or other serious brain injury.

What Is a Concussion?

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.

How Can I Help Keep My Teens Safe?

Sports are a great way for teens to stay healthy and can help them do well in school. To help lower your teens' chances of getting a concussion or other serious brain injury, you should:

- Help create a culture of safety for the team.
 - Work with their coach to teach ways to lower the chances of getting a concussion.
 - Emphasize the importance of reporting concussions and taking time to recover from one.
 - Ensure that they follow their coach's rules for safety and the rules of the sport.
 - Tell your teens that you expect them to practice good sportsmanship at all times.
- When appropriate for the sport or activity, teach your teens that they must wear a helmet to lower the chances of the most serious types of brain or head injury. There is no "concussion-proof" helmet. Even with a helmet, it is important for teens to avoid hits to the head.

Talk with your teens about concussion. Tell them to report their concussion symptoms to you and their coach right away. Some teens think concussions aren't serious or worry that if they report a concussion they will lose their position on the team or look weak. Remind them that *it's better to miss one game than the whole season.*

How Can I Spot a Possible Concussion?

Teens who show or report one or more of the signs and symptoms listed below—or simply say they just "don't feel right" after a bump, blow, or jolt to the head or body—may have a concussion or other serious brain injury.

Signs Observed by Parents

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

Symptoms Reported by Teens

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness, or double or blurry vision
- Bothered by light or noise
- Feeling sluggish, hazy, foggy, or groggy
- Confusion, or concentration or memory problems
- Just not "feeling right," or "feeling down"

**GOOD TEAMMATES KNOW:
IT'S BETTER TO MISS ONE GAME THAN THE WHOLE SEASON.**



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CONCUSSIONS AFFECT EACH TEEN DIFFERENTLY.

While most teens with a concussion feel better within a couple of weeks, some will have symptoms for months or longer. Talk with your teens' healthcare provider if their concussion symptoms do not go away or if they get worse after they return to their regular activities.



Plan ahead. What do you want your teen to know about concussion?

What Are Some More Serious Danger Signs to Look Out For?

In rare cases, a dangerous collection of blood (hematoma) may form on the brain after a bump, blow, or jolt to the head or body and can squeeze the brain against the skull. Call 9-1-1, or take your teen to the emergency department right away if, after a bump, blow, or jolt to the head or body, he or she has one or more of these danger signs:

- One pupil larger than the other
- Drowsiness or inability to wake up
- A headache that gets worse and does not go away
- Slurred speech, weakness, numbness, or decreased coordination
- Repeated vomiting or nausea, convulsions or seizures (shaking or twitching)
- Unusual behavior, increased confusion, restlessness, or agitation
- Loss of consciousness (passed out/knocked out). Even a brief loss of consciousness should be taken seriously

Teens who continue to play while having concussion symptoms or who return to play too soon—while the brain is still healing—have a greater chance of getting another concussion. A repeat concussion that occurs while the brain is still healing from the first injury can be very serious, and can affect a teen for a lifetime. It can even be fatal.



What Should I Do If My Teen Has a Possible Concussion?

As a parent, if you think your teen may have a concussion, you should:

1. Remove your teen from play.
2. Keep your teen out of play the day of the injury. Your teen should be seen by a healthcare provider and only return to play with permission from a healthcare provider who is experienced in evaluating for concussion.
3. Ask your teen's healthcare provider for written instructions on helping your teen return to school. You can give the instructions to your teen's school nurse and teacher(s) and return-to-play instructions to the coach and/or athletic trainer.

Do not try to judge the severity of the injury yourself. Only a healthcare provider should assess a teen for a possible concussion. You may not know how serious the concussion is at first, and some symptoms may not show up for hours or days. A teen's return to school and sports should be a gradual process that is carefully managed and monitored by a healthcare provider.

Revised January 2019

To learn more,
go to [cdc.gov/HEADSUP](https://www.cdc.gov/HEADSUP)





PITTSYLVANIA COUNTY SCHOOLS

STUDENT-ATHLETE CONCUSSION MATERIALS

Name of Student-Athlete _____

School _____

ACKNOWLEDGEMENT

My signature below acknowledges that I have received and reviewed the concussion training materials developed by the Concussion Management Team (CMT) of Pittsylvania County Schools. I further understand that this acknowledgement is valid for one (1) calendar year and will satisfy the concussion training requirements for all of a student-athlete's extracurricular physical activities for a calendar year.

Signature of Student-Athlete

Date

Signature of Parent/Guardian

Date

Please return completed form to the school principal.