



STUDENT ATHLETE INFORMATIONAL PACKET

For Parents and Students

- Concussion
- Sudden Cardiac Arrest
- Heat-Related Illnesses

**After reviewing the materials, please return the signed
required form to your school principal**



Dear Parent/Guardian and Student Athlete,

We all know there are benefits and risks to playing sports, and in order to keep our students as safe as possible, we need your help. Please review the materials in this packet about concussions, sudden cardiac arrest, and heat-related illnesses.

Following the recommended guidance for nutrition, sleep, and hydration will lead to a successful sports season.

How to be at peak physical performance for athletes ages 13-18:

Fuel your body:

- Carbohydrates are the primary fuel source for working muscles.
- Protein is necessary for maintaining and building muscle mass.
- Low-fat dairy products are a great source of both carbohydrates and protein, which makes them an excellent recovery nutrition product.
- Colorful fruits and vegetables contain antioxidants that help you fight the inflammation that occurs with your day-to-day training.

Proper sleep:

- Get 8 to 10 hours of sleep a night.
- Less than 6 hours can cause fatigue-related illnesses.

Stay hydrated:

- Consume 2 liters of water daily.
- Drink 16-20 ounces of water two hours before exercising.
- Drink 6-8 ounces for every 15-20 minutes of activity.
- It is equally important to rehydrate after these activities.

Serious effects of dehydration:

- The amount of blood pumped with each heartbeat decreases.
- Exercising muscles do not receive enough oxygen (fatigue, cramps).
- Exhaustion sets in earlier and the athlete's *performance suffers*.
- By-products of exercise are not flushed out of the body as regularly as they should be.
- Headaches

After you read the materials, you and your student must complete the acknowledgment on the last page of this packet and return it to your school principal for your student to be eligible to participate in sports in Pittsylvania County Schools.

Keep this packet handy to refer to as needed throughout the school year. May you have a very enjoyable and successful athletic season!



Book	Pittsylvania County Schools Policies and Regulations
Section	J - Students
Title	JJAC-R- Regulations for Student-Athlete Concussions During Extracurricular Activities
Code	JJAC-R
Status	Active
Adopted	July 12, 2011
Last Revised	May 12, 2020

File: JJAC-R
STUDENT-ATHLETE CONCUSSIONS

Regulations for Student-Athlete Concussions

Return to Play Protocol

A student-athlete suspected by that student-athlete's coach, athletic trainer, or team physician of sustaining a concussion or brain injury in a practice or game is removed from the activity at that time. A student-athlete who has been removed from play, evaluated, and suspected to have a concussion or brain injury does not return to play that day or until the student-athlete is

- evaluated by an appropriate licensed health care provider as determined by the Board of Education and
- in receipt of written clearance to return to play from such licensed health care provider.

The licensed health care provider evaluating student-athletes suspected of having a concussion or brain injury may be a volunteer.

Return to Learn Protocol

School personnel are alert to cognitive and academic issues that may be experienced by a student who has suffered a concussion or other head injury, including

- difficulty with concentration, organization, and long-term and short-term memory;
- sensitivity to bright lights and sounds; and
- short-term problems with speech and language, reasoning, planning, and problem solving.

School personnel accommodate the gradual return to full participation in academic activities of a student who has suffered a concussion or other head injury as appropriate, based on the recommendation of the student's licensed health care provider as to the appropriate amount of time that such student needs to be away from the classroom.

Procedures

The superintendent is responsible for developing, and biennially updating, procedures regarding the identification and handling of suspected concussions in student-athletes.

Athletic Activities Conducted by Non-School Organizations on School Property

The school division may provide this policy to organizations sponsoring athletic activity for student-athletes on school property. The school division does not enforce compliance with the policy by such organizations.

Adopted: July 12, 2011

REVISED:

August 12, 2014

July 14, 2015

July 12, 2016

June 11, 2019

May 12, 2020

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

Cross Refs.:

JJAC, Student-Athlete Concussions

KG Community Use of School Facilities

KGB Public Conduct on School Property

A FACT SHEET FOR High School Parents



CDC HEADS UP
SAFE BRAIN. STRONGER FUTURE.

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.**



cdc.gov/HEADSUP

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)





Book	Pittsylvania County Schools Policies and Regulations
Section	J - Students
Title	JJAF - Student-Athlete Sudden Cardiac Arrest
Code	JJAF
Status	Active
Adopted	April 12, 2022

File:: JJAF
STUDENT-ATHLETE SUDDEN CARDIAC ARREST

In order to participate in any extracurricular physical activity, each student-athlete and the student-athlete's parent or guardian must review, on an annual basis, information provided by the school division on symptoms that may lead to sudden cardiac arrest. After reviewing the materials, each student-athlete and the student-athlete's parent or guardian must sign a statement acknowledging receipt of such information, in a manner approved by the Virginia Board of Education.

A student-athlete who is experiencing symptoms that may lead to sudden cardiac arrest must be immediately removed from play. A student-athlete who is removed from play shall not return to play until he is evaluated by and receives written clearance to return to physical activity by an appropriate licensed health care provider as determined by the Virginia Board of Education. The licensed health care provider evaluating student-athletes may be a volunteer.

The superintendent is responsible for developing, biennially reviewing, and updating procedures to implement this policy.

ADOPTED:
April 12, 2022

REVISED:

Legal Ref.:
Code of Virginia, 1950, as amended, § 22.1-271.8.

Cross Refs.:

Sudden Cardiac Arrest (SCA) in Student-Athletes

What is Sudden Cardiac Arrest?

Sudden Cardiac Arrest (SCA) is not a heart attack. In young athletes it is usually caused by a structural or electrical abnormality of the heart, which can be from an undetected congenital or genetic heart condition.

Who is at Risk?

- Athletes who have:
 - Congenital– a physical abnormality of the heart present at birth
 - Undetected congenital heart defects (CHD) are rare, but some babies can grow into adolescence or early adulthood before noticing any symptoms. Congenital heart defects affect **nearly 1 out of every 100 babies born in the United States**, according to the Centers for Disease Control and Prevention. Jan 8, 2021
 - Genetic– a family member who has developed heart disease or died suddenly from heart disease, particularly before the age of 40.

What Do You Need to Do?

Know your family health history. Have a VHSL physical done yearly.

<https://www.vhsl.org/>

Possible Warning Signs:

- Fainting
- Chest pain
- Shortness of breath
- Racing or fluttering of heartbeat (palpitations)
- Dizziness or lightheadedness
- Extreme fatigue
- Unexplained seizures

Workouts can cause some of the above symptoms. However, when symptoms occur out of proportion to the level of exercise or the athlete's conditioning level that would warrant further evaluation by a health care provider.



U.S. high school athletes suffer an estimated 9,237 **time-loss heat illnesses every year that are serious enough to keep them out of sports for one or more days**, according to a report from the Centers for Disease and Control and Prevention.

A Key Prevention strategy is to stay hydrated!

- Consume 2 liters of water daily.
- Drink 16-20 ounces of water two hours before exercising.
- Drink 6-8 ounces for every 15-20 minutes of activity.
- It is equally important to rehydrate after these activities.
- <https://www.vdh.virginia.gov/news/extreme-heat-and-heat-related-illnesses/>

Staying hydrated is one of the easiest ways to help prevent heat-related illness. Coaches and parents need to make sure unlimited amounts of water are available for athletes during practices and games, but it is also important for them to stress that athletes need to drink water before and after an activity as well.

What are the symptoms of dehydration?

The following are the most common symptoms of dehydration. However, each individual may experience symptoms differently. Symptoms may include:

- Thirst
- Less-frequent urination
- Dry skin
- Fatigue
- Light-headedness
- Dizziness
- Confusion
- Dry mouth and mucous membranes
- Increased heart rate and breathing

The Athlete's Guide to Staying Hydrated at Practice

Drink 2 liters of water daily.

Before Practice

Top off with 16-20oz two hours before your practice.

During Practice

Drink 6-8oz of water for every 15-20 minutes of activity.

After Practice

Replenish each pound lost during activity with 20-24oz.

HEAT-RELATED ILLNESSES

WHAT TO LOOK FOR

WHAT TO DO

HEAT STROKE

- High body temperature (103°F or higher)
 - Hot, red, dry, or damp skin
 - Fast, strong pulse
 - Headache
 - Dizziness
 - Nausea
 - Confusion
 - Losing consciousness (passing out)
- Call 911 right away-heat stroke is a medical emergency
 - Move the person to a cooler place
 - Help lower the person's temperature with cool cloths or a cool bath
 - Do not give the person anything to drink

HEAT EXHAUSTION

- Heavy sweating
 - Cold, pale, and clammy skin
 - Fast, weak pulse
 - Nausea or vomiting
 - Muscle cramps
 - Tiredness or weakness
 - Dizziness
 - Headache
 - Fainting (passing out)
- Move to a cool place
 - Loosen your clothes
 - Put cool, wet cloths on your body or take a cool bath
 - Sip water
- Get medical help right away if:**
- You are throwing up
 - Your symptoms get worse
 - Your symptoms last longer than 1 hour

HEAT CRAMPS

- Heavy sweating during intense exercise
 - Muscle pain or spasms
- Stop physical activity and move to a cool place
 - Drink water or a sports drink
 - Wait for cramps to go away before you do any more physical activity
- Get medical help right away if:**
- Cramps last longer than 1 hour
 - You're on a low-sodium diet
 - You have heart problems

SUNBURN

- Painful, red, and warm skin
 - Blisters on the skin
- Stay out of the sun until your sunburn heals
 - Put cool cloths on sunburned areas or take a cool bath



Pittsylvania County Schools
Student Athlete Informational Materials

Acknowledgment

I understand that this acknowledgment is valid for the current school year and will satisfy the training requirements for all of a student athlete's extracurricular physical activities for this school year.

My initials and signature below further acknowledge that I have received and reviewed the specific training materials on the following areas:

- Concussion Materials

Student initials

Parent/Guardian initials

- Sudden Cardiac Arrest Materials

Student initials

Parent/Guardian initials

- Heat-Related Illnesses Materials

Student initials

Parent/Guardian initials

Signature of Student Athlete

Date

Signature of Parent/Guardian

Date

Please return the completed form to your school principal.