



Brain Injury/Concussion Awareness Risk Management Program

Facts About Concussions:

- Concussion is a **brain injury** and **all** are serious.
- Most concussions occur **without** loss of consciousness.
- **Recognition** and **proper response** to concussions when they first occur can help prevent further injury or even death.

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 that can change the way your brain normally works. Concussions can also occur from a blow to the body that causes the head to move rapidly back and forth. Even a “ding,” “**getting your bell rung**,” or what seems to be mild bump or blow to the head can be serious.

Student Coaches and Team Managers

Basic Concussion Training Course (Free): All Student Coaches and Team Managers should complete the National Alliance for Youth Sports Concussion Training Video annually (effective 2018); the certificate of completion should be retained by the Treasurer of Jr. Raider Cheer, or another Board member as designated, each year: <http://www.nays.org/additional-training/preview/concussion-training.cfm>

Board Member / Student Coach / Team Manager / Cheerleader / Parent Concussion Awareness Information Sheet

The following CDC Parent / Athlete Concussion Information Sheet should be distributed annually to all Board members, cheerleaders, and parents, with the signed and dated sheet retained at by the Treasurer of Jr. Raider Cheer, or another Board member, each year: http://www.cdc.gov/headsup/pdfs/youthsports/parent_athlete_info_sheet-a.pdf

Identify Suspected Cases of Concussions

The highest medical authority at a practice or game is the person who is in the best position to diagnose a suspected concussion and to make the call. The presence of (or immediate access to) a medical doctor (MD), doctor of osteopathy (DO), or athletic trainer trained in concussion recognition is ideal. However, in cases where medical professionals are not

present or immediately available, a person should be present who is at least EMT certified or is currently certified in Red Cross Community First Aid or the equivalent.

Signs observed by parents, guardians, or sports staff: appears dazed or stunned; is confused about the assignment or position; forgets instructions; is unsure of game, score, or opponent; moves clumsily; answers questions slowly; loses consciousness (even briefly); shows behavior or personality changes; can't recall events prior to hit or fall; and can't recall events after hit or fall.

Symptoms reported by player: headache or pressure in the 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; or does not "feel right".

What to do: if cheerleaders report or exhibit one or more of the signs listed above or say they "just don't feel right" after a bump, blow, or jolt to the head or body, they may have a concussion.

Danger signs: one pupil larger than the other; drowsiness or inability to wake up; headache that gets worse and does not go away; weakness, numbness, or decreased coordination; repeated vomiting or nausea; slurred speech; convulsions or seizures; inability to recognize people or places; increasing confusion, restlessness, or agitation; unusual behavior, loss of consciousness (even brief). If one or more of these danger signs occur after a bump, blow, or jolt to the head or body: call 9-1-1 or transport the athlete immediately to the emergency room.

On-field Medical Status Evaluation:

Orientation Questions (**Ask the cheerleader**):

- What period/quarter/half are we in?
- What stadium/field is this?
- What city is this?
- Who is the opposing team?
- Who scored last?
- Do you remember the hit?
- What team did we play last?
- Repeat the following: girls, dog, green

Concentration (**Ask the cheerleader**):

- Repeat the days of the week backwards (starting with today)
- Repeat the months of the year backward (starting with December)

- Repeat these numbers backward 63, (36), 419 (914), 6294 (4926)

Exertional Maneuvers:

- Complete five (5) jumping jacks / Complete 5 sit ups.

Word List Memory (Ask the cheerleader):

- Repeat the three (3) words from earlier: girls, dog, green

If a Concussion is Suspected, the Following Actions Should Be Taken

- **Remove the cheerleader from play** – if any of the signs and symptoms are observed, remove the cheerleader from play. When in doubt, sit them out!
- **Make sure the cheerleader is evaluated by an MD or DO who is experienced in evaluating concussions.** Let the professionals judge the severity.
- **Inform the cheerleader’s parents / guardians and provide them with the CDC fact sheet** on “Concussions for parents” to help them monitor the cheerleader for signs and symptoms: http://www.cdc.gov/headsup/pdfs/custom/headsupconcussion_fact_sheet_for_parents.pdf
- **Keep the cheerleader out of play the day of the injury AND until an MD or DO experienced in evaluating concussion says it’s OK for the cheerleader to return.** The AYF/AYC Resume Participation Medical Clearance Form or similar form should be completed, signed by an MD or DO, and returned before a player suspected of having a concussion will be allowed to return to play.

Compliance with State Concussion Laws and NFHS Recommendations

The Jr. Raider Cheer program, through this policy and its procedures, will follow and comply with the Georgia Return to Play law ([O.C.G.A. § 20-2-324.1](#)), as well as the National Federation of High School Associations (NFHS) rules, regulations, or recommendations on brain injury, whichever is the most comprehensive.

Distribution / Acknowledgement / Documentation

A hard or electronic copy of this risk management program should be distributed to each Board Member, Student Coach and Team Manager, prior to the start of every season. Each should acknowledge in writing (wet or electronic signature) that they have received and carefully reviewed the entire program. The sports organization should maintain documentation on an annual basis of the risk management plan that was distributed as well as the corresponding acknowledgements.