

*Aurora BayCare
Sports Medicine*

Concussion Management Plan

Freedom Area School District

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FASD Sports Concussion Management Plan

1. Overview

- 1.1. In response to the growing concern over concussion in athletics there is a need for high schools to develop and utilize a "Concussion Management Plan". While regional limitations in the availability of specifically trained school and medical personnel are acknowledged, the following document serves as a standard for concussion management.
- 1.2. The following components will be outlined as part of a comprehensive concussion management plan:
 - 1.2.1. Concussion Overview (section 2)
 - 1.2.2. Concussion Education for Student-Athletes and Parent(s)/Guardian(s) (section 3)
 - 1.2.3. Concussion education for Coaches (section 4)
 - 1.2.4. Pre-season concussion assessment (section 5)
 - 1.2.5. Concussion action plan (section 6)
 - 1.2.6. Appendix A: Statement Acknowledging Receipt of Concussion Education for Participant
 - 1.2.7. Appendix B: Statement Acknowledging Receipt of Concussion Education for Coaches
 - 1.2.8. Appendix C: Post-Concussion Instructions
 - 1.2.9. Appendix D: Return to School Recommendations
 - 1.2.10. Appendix E: Return to Play Protocol
 - 1.2.11. Appendix F: Memo—Implementation of NFHS Playing Rules Changes Related to Concussion and Concussed Athletes

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2. What is a Concussion?

2.1. Concussion, or mild traumatic brain injury (mTBI), in accordance with the 4th International Conference on Concussion in Sport held in Zurich in November 2012, is defined as a complex pathophysiological process affecting the brain, induced by traumatic biomechanical forces. Common elements include, but are not limited to:

- Confusion
- Feeling 'in a fog' or 'zoned out'
- Disorientation
- Dizziness
- Headache
- Loss of consciousness (LOC)
- Visual disturbances including light sensitivity, blurry vision, or double vision
- Disequilibrium
- Retrograde Amnesia (RGA)
- Emotional Lability
- Inability to Focus
- Excessive Drowsiness
- Post-Traumatic Amnesia (PTA)
- Vacant Stare (Glassy-eyed)
- Delayed Verbal and Motor Responses
- Slurred/Incoherent Speech
- Nausea/Vomiting

3. Concussion Education for Student Athletes and Parent(s)/Guardian(s)

3.1. At the beginning of individual sport seasons, student-athletes shall be presented with a discussion about concussions and given a copy of the CDC's "Heads Up: Concussion in High School Sports-A Fact Sheet for Athletes".

3.1.1. This information will be presented by the school's Athletic Department staff in cooperation and consultation with the Licensed Athletic Trainer and the Licensed Athletic Trainer's supervising physician. Additional local medical resources may also participate as-needed.

3.2. At the beginning of individual sport seasons, parent/guardian(s) shall be presented with a copy of the CDC's "Heads up: Concussion in High School Sports-A Fact Sheet for Parents".

3.3. These materials are available free of charge from the CDC. To order or download, go to the CDC concussion webpage or use the following link: <http://www.cdc.gov/concussion>.

3.4. All student-athletes and their parents/guardians will sign a statement in which the student-athlete accepts the responsibility for reporting their injuries and illnesses to the coaching/athletic training staff, parents, or other health care personnel; including signs and symptoms of concussion. This statement will also acknowledge having received the above-mentioned educational handouts. **See Appendix A.**

3.5. All student-athletes shall be required to participate in the above education prior to their participation in any sport at Freedom High School.

4. Concussion Education for Coaches

4.1. It is required each year that the school's administrative staff, coaches, Licensed Athletic Trainers, and school nurse shall review the concussion management plan and a copy of the CDC's "Heads Up: Concussion in High School Sports-A Guide for Coaches" <http://www.cdc.gov/concussion>.

4.2. All coaches, Licensed Athletic Trainers, other medical staff, administrative personnel, and school nurses shall complete a course dealing with concussion, its signs, symptoms and management. This course shall be completed prior to August 1. After August 1, the course shall be completed prior to working with student-athletes. The CDC, in partnership with the National Federation of State High School Associations, has developed a free web-based course, "Concussion in Sports: What You Need to Know", to be used for this purpose.

4.2.1. As determined by FASD Administration, repetition of the course is required once a year.

4.2.2. The "Concussion in Sports: What You Need to Know" on-line course is available free of charge after registering at <http://www.nfhslearn.com>.

4.2.3. All coaches will sign a statement acknowledging they have taken a concussion course and have received the above-mentioned educational handout. **See Appendix B.**

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5. Pre-Season Concussion Assessment
 - 5.1. Optimally a concussion history should be included as part of all of a student-athletes' pre-participation physical health examination with their healthcare professional.
 - 5.2. It is recommended that every two years, student-athletes complete a baseline assessment prior to the beginning of the school year or their individual sport seasons, as appropriate.
 - 5.2.1. Neurocognitive Testing: Pre-season neurocognitive testing of all athletes is required and will be accomplished through a computerized system. FASD has chosen to partner with ImPACT® Applications for this purpose.
 - 5.2.2. Neurocognitive testing may be administered by the school's Licensed Athletic Trainer or other designated school personnel trained in test administration in a controlled computer lab environment.
6. Concussion Action Plan
 - 6.1. When a student-athlete shows any signs, symptoms, or behaviors consistent with a concussion, the athlete shall be removed immediately from practice or competition and evaluated by school personnel, the Licensed Athletic Trainer, or other healthcare professional with specific training in the evaluation and management of concussion.
 - 6.1.1. School personnel, including coaches, are encouraged to utilize a pocket guide on the field to assist them in recognizing a possible concussion. An example of a pocket guide is available as part of the CDC toolkit "Heads Up: Concussion in High School Sports", available at <http://www.cdc.gov/concussion>.
 - 6.2. Where possible, the athlete shall be evaluated on the sideline by the Licensed Athletic Trainer or other appropriate healthcare professional. The sideline evaluation will include using the SAC (Sideline Assessment of Concussion tool) or the SCAT 3 (Sports Concussion Assessment Tool, version 3).
 - 6.2.1. The SCAT 3 is comprised of a symptom checklist, standard and sport-specific orientation questions, the Standardized Assessment of Concussion (SAC), and an abbreviated form of the Balance Error Scoring Scale (BESS).
 - 6.3. A student-athlete displaying any signs or symptoms consistent with a concussion shall be withheld from the competition or practice and shall not return to activity until receiving clearance from a licensed physician (MD or DO) or treating Licensed Athletic Trainer or treating Physical Therapist, under the direction of a licensed physician (MD or DO). The student-athlete's parent/guardian(s) shall be immediately notified of the situation.
 - 6.4. The student-athlete will receive serial monitoring for deterioration. Student-athletes and their parent/guardian shall be provided with written instructions upon dismissal from practice/game. **See Appendix C for a copy of the instructions.**
 - 6.5. In accordance with FASD emergency action plans, immediate referral to Emergency Medical Services should be provided for any of the following "Red Flag Signs or Symptoms".
 - 6.5.1. Loss of Consciousness
 - 6.5.2. Seizure-like activity
 - 6.5.3. Slurring of speech
 - 6.5.4. Paralysis of limb(s)
 - 6.5.5. Unequal pupils or dilated and non-reactive pupils
 - 6.5.6. At any point where the severity of the injury exceeds the comfort level of the on-site medical personnel
 - 6.6. Consultation with a team of healthcare professionals experienced in concussion management shall occur for all student-athletes sustaining a suspected concussion. This consultation may occur by telephone between the local healthcare professional and a provider experienced in concussion management.
 - 6.7. For the purposes of this document, a healthcare profession is defined as one who is trained in management of concussion and who is:
 - 6.7.1. A licensed physician (MD or DO)
 - 6.7.2. Advanced nurse practitioner
 - 6.7.3. Neuropsychologist
 - 6.7.4. Physician Assistant (PA) working under the direction of a physician (MD or DO)
 - 6.7.5. Licensed Athletic Trainer working under the direction of a physician (MD or DO)

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- 6.7.6. Licensed Physical Therapist working under the direction of a physician (MD or DO)
- 6.8. Subsequent management of the student-athlete's concussion shall be at the discretion of the treating healthcare professional, and may include the following:
 - 6.8.1. When possible, repeat neurocognitive testing with comparison to baseline test results.
 - 6.8.2. Medication management of symptoms, where appropriate.
 - 6.8.3. Provision of recommendations for adjustment of academic coursework, including the possible need to be withheld from coursework obligations while still symptomatic. **See Appendix D for a list of possible academic accommodations required.**
 - 6.8.4. Direction of return to play protocol, to be coordinated with the assistance of the Licensed Athletic Trainer. **See Appendix E for Return to Play Protocol.**
 - 6.8.5. Final authority for Return to Play shall reside with the attending healthcare professional (see 6.7), or their designee. Prior to returning to competition, the concussed student-athlete must have a Return to Play clearance form signed by an approved healthcare professional, as indicated by Wisconsin State Law.
 - 6.8.6. The incident, evaluation, continued management, and clearance of the student-athlete with a concussion shall be documented.

Appendix A: Statement Acknowledging Receipt of Education and Responsibility to report signs or symptoms of concussion to be included as part of the "Participant and Parental Disclosure and Consent Document".

I, _____ (student-athlete name), of FASD acknowledge that I have to be an active participant in my own healthcare. As such, I have direct responsibility for reporting all of my injuries and illnesses to the sports medicine staff of FASD (e.g. team physician, athletic training staff). I recognize that my true physical condition is dependent upon an accurate medical history and full disclosure of any symptoms, complaints, prior injuries, and/or disabilities experienced. I hereby affirm that I have fully disclosed in writing any prior medical conditions and will also disclose any future conditions to the sports medicine staff at FASD.

I further understand that there is a possibility that participation in my sport may result in a head injury and/or concussion. I hereby acknowledge having received education about the signs, symptoms, and risks of sport-related concussion. I also acknowledge my responsibility to report to my coaches, parent(s)/guardian(s) any signs or symptoms of a concussion.

Signature and Printed Name of Student-Athlete

Date

I, _____ (parent/guardian name), the parent/guardian of the student-athlete named above, hereby acknowledge having received education about the signs, symptoms, and risks of sport-related concussion.

Signature and Printed Name of Parent/Guardian

Date