

## **Concussion -- General Information and Protocol**

It is now a requirement of all schools in the state of Illinois to be in compliance with Public Act 99-245. This new law mandates that all schools adopt a policy regarding student athlete concussions and head injuries. All diocesan schools must also be in compliance with this law. Each school must complete these concussion requirements:

- Provide instructional training to all coaches and others working with our student athletes.
- Form a Concussion Oversight Team who will develop and evaluate procedures and decisions made involving concussions.
- Create school board policy on concussions and head injuries.
- Provide parents and athletes with information about concussions which includes symptoms, signs, and emergency procedures.

Please review the steps that St. Mary School will implement following a head or neck injury.

### **Day of Injury**

Play is stopped if a player receives a blow, bump, or jolt to the head or neck. The player's coach, the official, and/or the home court/field supervisor will determine if the player will be allowed to continue. (When in doubt, take them out!!!)

Once a player is removed from the game, he/she may not reenter the contest that night unless the player receives clearance from a medical doctor.

A player may receive medical clearance from a hospital or other medical facility. They must provide a written authorization saying the player can play again.

### **Return to Practice/Game**

If a player has been removed from a game or practice because of a bump, blow, or head/neck injury, he/she must receive clearance from a medical doctor. A written authorization from the physician is necessary along with written permission from the parent.

A player may be able to return to limited action prior to being fully released. The physician will identify the status of the athlete after the evaluation. The "Return to Play" protocol will be followed, and the coach will be given this form so proper steps are followed to ease the athlete back into action.

### **Return to Learn**

Sometimes when an athlete receives a concussion, there are some limitations that must be followed regarding school work. There will be a "Return to Learn" form submitted to the school principal so that any necessary accommodations can be made to make the school day more manageable for the student.

## **Injuries Earlier in the Day**

An athlete may receive a head or neck injury earlier in the day at PE or recess. Parents will be called for any head injury. If this happens, athletes may not play that day/night until an authorized clearance from a physician has been received. All coaches will be notified if a player has received an earlier head/neck injury.

Please take time to read the additional information in this handbook outlining symptoms of concussions. Sometimes concussion symptoms do not arise until later.

The safety and well-being of our students are paramount at St. Mary's School.

## **Concussion Oversight Team**

*Athletic Director:* Mr. Ryan Colle

*Principal:* Mr. Tim Bain

*Coaches:* Mr. Ryan Colle  
Mr. Jason Grubb  
Mrs. Lindsey Bowlin

*Teacher:* Mrs. Stacy Spotanski

*School Secretary:* Mrs. Lindy Hudson

## **Concussion Information Sheet**

A concussion is a type of brain injury resulting from a bump, blow, or jolt to the head that causes the head and brain to move rapidly back and forth. A direct blow to the head is not required to cause a concussion. Concussions affect people differently. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly. In other words, even a "ding" or a bump on the head can be serious. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

Symptoms may include one or more of the following:

- Headache
- Pressure in head
- Nausea **or** vomiting
- Neck pain
- Balance problems or dizziness
- Blurred, double, or fuzzy vision
- Sensitivity to light or noise
- Feeling sluggish or slowed down
- Feeling foggy **or** groggy
- Drowsiness
- Change in sleep patterns
- Amnesia
- "Don't feel right"
- Fatigue or low energy
- Sadness
- Nervousness or anxiety
- Irritability
- More emotional
- Confusion
- Concentration or memory problems
- Repeating same question/comment

Signs observed by teammates, parents, and coaches may include:

- Appears dazed
- Vacant facial expression
- Confused about assignment
- Forgets plays
- Is unsure of game, score, or opponent
- Moves clumsily or displays lack of coordination
- Answers questions slowly
- Slurred speech
- Shows behavior or personality changes
- Can't recall events prior to hit
- Can't recall events after hit
- Seizures or convulsions
- Any change in typical behavior or personality
- Loses consciousness

## **Concussion Information Sheet**

### What can happen if my child keeps on playing with a concussion or returns too soon?

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athletes will often fail to report symptoms of injuries. Concussions are no different. As a result, education of administrators, coaches, parents, and students is the key to student-athlete safety.

### If you think your child has suffered a concussion

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. The Return to Play Policy of the IESA and IHSA requires athletes to provide their school with written clearance from either a physician licensed to practice medicine in all its branches or a certified athletic trainer working in conjunction with a physician licensed to practice medicine in all its branches prior to returning to play or practice following a concussion or after being removed from an interscholastic contest due to possible head injury or concussion and not cleared to return to that same contest. In accordance with state law, all schools are required to follow this policy.

You should also inform your child's coach if you think that your child may have a concussion. Remember it's better to miss one game than miss the whole season. When in doubt, the athlete sits out.

For current and up-to-date information on concussions you can go to:

[http://www.cdc.gov/Concussion In Youth Sports/](http://www.cdc.gov/Concussion%20In%20Youth%20Sports/)

# St. Mary Catholic School Concussion Parent – Student Consent and Acknowledgements

By signing this form, we acknowledge we have been provided information regarding concussions.

## **Student**

\_\_\_\_\_  
Student Name (Print)

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

## **Parent or Legal Guardian**

Name: (Print) \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Student: \_\_\_\_\_

Date: \_\_\_\_\_

**ST. MARY CATHOLIC SCHOOL****Step Progression for Return to Learn Following Traumatic Brain Injury (TBI)/Concussion**

Steps	Progression	Description
1	HOME-total rest	<ul style="list-style-type: none"> <li>No mental exertion: computer, testing, video games, or homework.</li> <li>Total rest until no symptoms at rest</li> </ul>
2	HOME-light mental activity	<ul style="list-style-type: none"> <li>Up to 30 minutes mental exertion without triggering symptoms</li> <li>No prolonged concentration</li> </ul>
Progress to next level when able to handle up to 30-40 minutes mental exertion without worsening/triggering symptoms.		
3	SCHOOL-Part time. Maximum accommodations. Shortened Day/Schedule Built in breaks and breaks if symptoms reoccur.	<ul style="list-style-type: none"> <li>Provide quiet place for scheduled mental rest.</li> <li>No significant classroom or standardized testing</li> <li>Modify rather than postpone academics</li> <li>Provide extra time, extra help, and Modified assignments.</li> </ul>
Progress to next level when able to handle up to 60 minutes mental exertion without worsening/triggering symptoms.		
4	SCHOOL-Fulltime. Moderate accommodations. Rest if symptoms triggered.	<ul style="list-style-type: none"> <li>No standardized testing.</li> <li>Modified classroom testing</li> <li>Moderate decrease of extra time, extra help, and modification of assignments.</li> </ul>
Progress to next level when able to handle mental exertion for most of the school day without worsening/triggering symptoms.		
5	SCHOOL-Fulltime. Minimal accommodations. Rest if symptoms triggered.	<ul style="list-style-type: none"> <li>No standardized testing. Routine test OK.</li> <li>Continue decrease of extra time, extra help, and modification of assignments.</li> <li>May require more supports in academically challenging subjects.</li> </ul>
Progress to next level when able to handle all class periods in succession and all homework without worsening of symptoms.		
6	SCHOOL-Fulltime. Full academics. No accommodations.	<ul style="list-style-type: none"> <li>Attends all classes. Full homework.</li> <li>Parent/guardian obtained signature for clearance For academics from licensed health care provider.</li> </ul>
When symptoms continue beyond 3-4 weeks, prolonged in-school supports may be required.		
<p style="text-align: center;"><b>REMEMBER</b></p> <ul style="list-style-type: none"> <li>Progression is individual; all concussions are different.</li> <li>Student may start at any step as symptoms dictate and remain at the step as long as needed.</li> <li>Return to previous step if symptoms worsen.</li> <li>Student to stop and rest with supervision if any activity triggers symptoms.</li> <li>Student is not to push through symptoms.</li> <li>Progression to return to play is according to Athletic Department protocol.</li> </ul>		

If student awakens with symptoms, he/she is to rest at home and not come to school. Parent or guardian must notify athletic director if this is the situation.

## ST. MARY CATHOLIC SCHOOL

### Step Progression for Return to Play Following Traumatic Brain Injury (TBI)/Concussion

<b>1. NO ACTIVITY</b> <b>(RECOVERY)</b> Complete Physical and Cognitive Rest until Medical Clearance	Symptom Free for 24 Hours?  YES: Begin Step 2 No: Continue Resting	Date Attained:
<b>2. LIGHT AEROBIC EXERCISE</b> <b>(INCREASE HEART RATE)</b> Walking, stationary cycling, light jogging Heart Rate <70% - 15 min	Symptom Free for 24 Hours?  YES: Move to Step 3 No: Rest Further until Symptom Free	Date Attained:
<b>3. MODERATE ACTIVITY</b> <b>(ADD MOVEMENT)</b> Drills, Running Drills, Non-contact drills Heart Rate <80% - 45 min	Symptom Free for 24 Hours?  YES: Move to Step 4 No: Return to Step 2 until Symptom Free	Date Attained:
<b>4. NON-CONTACT TRAINING DRILLS</b> <b>(INCREASED EXERCISE, COORDINATION, ATTENTION)</b> Progress to complex training drills: Passing Drills, May start resistance training Heart Rate <90% - 60 min	Symptom Free for 24 Hours?  YES: Move to Step 5 No: Return to Step 3 until Symptom Free	Date Attained:
<b>5. FULL CONTACT PRACTICE</b> <b>(RESTORE CONFIDENCE &amp; ASSESS FUNCTIONAL SKILLS)</b> If Symptom Free, Return to Normal Training Activities	Symptom Free for 24 Hours?  YES: Return to Play No: Return to Step 4 until Symptom Free	Date Attained:
<b>6. RETURN TO PLAY</b> Regular Game Competition	Symptom Free	Date Attained:

#### REMEMBER

- Progression is individual; all concussions are different.
- Student may start at any step as symptoms dictate and remain at the step as long as needed.
- Return to previous step if symptoms worsen.
- Student to stop and rest with supervision if any activity triggers symptoms.
- Student is not to push through symptoms.
- Progression to return to play is according to Athletic Department protocol.



Post-concussion Consent Form  
(RTP/RTL)



Date \_\_\_\_\_

Student's Name \_\_\_\_\_ Year in School \_\_\_\_\_

By signing below, I acknowledge the following:

1. I have been informed concerning and consent to my student's participating in returning to play in accordance with the return-to-play and return-to-learn protocols established by Illinois State law;
2. I understand the risks associated with my student returning to play and returning to learn and will comply with any ongoing requirements in the return-to-play and return-to-learn protocols established by Illinois State law;
3. And I consent to the disclosure to appropriate persons, consistent with the federal Health Insurance Portability and Accountability Act of 1996 (Public Law 104-191), of the treating physician's or athletic trainer's written statement, and if any, the return-to-play and return-to-learn recommendations of the treating physician or the athletic trainer, as the case may be.

Student's Signature \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_

Parent/Guardian's Signature \_\_\_\_\_

**For School Use Only**

☐

Written statement is included with this consent from treating physician or athletic trainer working under the supervision of a physician that indicates, in the individual's professional judgement, it is safe for the student to return-to-play and return-to-learn.

**Cleared for RTL**

Date \_\_\_\_\_

**Cleared for RTP**

Date \_\_\_\_\_