

CONCUSSION MANAGEMENT GUIDELINES

PARENT RESPONSIBILITIES FOR ASSISTING IN MANAGING STUDENT CONCUSSIONS



SIGNS AND SYMPTOMS OF CONCUSSIONS: WHAT PARENTS NEED TO KNOW

Concussions are brain injuries and can be very serious. In the first few days following concussion, cognitive and physical rest are needed for the brain to heal. Cognitive rest means not taxing the brain with physical or cognitive demands. This is not like the flu, where students can complete schoolwork while at home. Students who experience a concussion will require rest.

Every concussion is different. Students heal at different rates. It will be necessary for both parents and educators to monitor the student and report any worsening symptoms to the student's counselor.

| | SIGNS (Observed by Others) | | | |
|----------|--|--|--|--|
| Physical | | | | |
| • | Moves clumsily (altered coordination) | | | |
| • | Exhibits balance problems | | | |
| • | Loses consciousness (even briefly) | | | |
| • | Presents as tired and lethargic | | | |
| 0:4 | E | | | |
| Cognit | | | | |
| • | Appears dazed or stunned Seems confused | | | |
| • | | | | |
| | Forgets plays or instructions | | | |
| • | Is unsure about game, score, opponent Responds slowly to questions | | | |
| • | Forgets events prior to hit or fall | | | |
| • | Forgets events after the hit or fall | | | |
| | Forgets events after the filt of fail | | | |
| Emotic | nal | | | |
| • | Shows changes in mood, behavior, or personality | | | |
| | | | | |
| | SYMPTOMS (Reported by Student) | | | |
| Physic | al | | | |
| • | Headache or pressure in head | | | |
| • | Nausea or vomiting | | | |
| • | Double vision, blurry vision | | | |
| • | Sensitivity to light or noise | | | |
| • | Feeling sluggish, fatigued, or groggy | | | |
| • | Strong desire to sleep | | | |
| • | Balance problems or dizziness | | | |
| • | Numbness or tingling | | | |
| • | Temperature Disregulation | | | |
| Cognit | <u>ive</u> | | | |
| • | Problems concentrating | | | |
| • | Problems remembering | | | |
| • | Foggy or hazy feeling | | | |
| Emotic | | | | |
| • | Just not feeling right or feeling down | | | |
| Sleep p | problems | | | |
| • | Difficulty falling or staying asleep | | | |
| • | Sleeping less or more than usual | | | |

RETURN TO SCHOOL FOLLOWING A CONCUSSION

IMPORTANT NOTICE:

Parents are responsible for following through with a medical evaluation following a concussion. The District requests that the treating MD or DO, who is trained in the evaluation and management of concussions complete the **Post Concussion Return to Physical Activity/PE/Academics form**. Forms completed by Physical Therapists, Occupational Therapists and Psychologists are not acceptable. Parents are responsible for submitting the **Post Concussion form** to your child's counselor in a timely manner to assure that required accommodations are put in place immediately following student's return to school.

In the days following an injury, the brain needs both cognitive and physical rest to heal. The District staff will implement recommendations made by the treating physician when appropriate for the classroom environment. If accommodations are needed, the student's counselor will complete and disseminate an *Individual Student Care Plan* to the student's teachers.

Every concussion is different. Some students will be ready to return to school immediately. Most students, however, will need two to three days of rest before returning to school. For some, a longer period of modified cognitive and physical activity is required for symptoms to improve.

Concussed students with persistent symptoms, particularly symptoms worsened by auditory and/or visual stimuli, may be kept from returning to school or have a modified school schedule for several days after a concussion. The importance of cognitive rest must be stressed to the student, parent/guardian, and teachers. A Student Study Team meeting may be held as determined appropriate by site staff.

INDIVIDUAL STUDENT CARE PLAN

An *Individual Student Care Plan* will be implemented when the treating physician determines the need for accommodations. The plan will be followed by classroom teachers per the physician's recommendations. No student will be able to return to play until the school nurse has received medical clearance. A successful *Gradual Return to Activity Plan* has two parts:

- 1. **Return to Academics** a gradual return to school and academic requirements implemented by the teaching staff.
- 2. **Return to Play** a gradual return to sports implemented by the PE Coach and/or athletic staff, and in accordance with National Athletic Trainers Association (NATA) Best Practices.

The Care Plan is designed based on treating MD/DO recommendations.

RESPONSIBILITIES OF THE COUNSELOR

The student's counselor will distribute the *Individual Student Care Plan* to all appropriate school personnel including student's teachers and PE coaches. The counselor in collaboration with the district nurse will monitor and track progress until the player is symptom-free and has medical clearance or, if needed, a Student Study Team meeting will be initiated.

RESPONSIBILITIES OF THE STUDENT'S TEACHERS AND P.E. /SPORTS COACHES

Teachers and PE coaches will follow the *Individual Student Care Plan*. They will implement adjustments, monitor the student's symptoms, and communicate regularly with the student's counselor.

RETURN TO ACADEMICS PROGRESSION

Students should return to academics with support and guidance. The student's teaching team has the responsibility to implement the student's *Individual Student Care Plan*. Teachers are requested to report any concerns to the student's counselor. Symptoms of concussion will often create learning difficulties for students. The *Individual Student Care Plan* for learning adjustments should be initiated immediately after diagnosis with a gradual, monitored return to full academics as symptoms clear. Although most symptoms clear within three to four weeks, in some cases, symptoms may not clear for months. In rare cases, disability may be permanent. For students with prolonged symptoms, a Student Study team meeting will be scheduled to determine the need to initiate a Section 504 or Special Education Assessment.

| Steps | Progression | Recommended Accommodations |
|-------|------------------------------|--|
| 1. | HOME - Total Rest | Stay at home • No driving No mental exertion- computer, texting, video games, homework |
| 2. | HOME - Light Mental Activity | Stay at home Postpone all academics No Driving Up to 30 minutes mental exertion No prolonged concentration |

Progress to Step 3 when student handles up to 30 minutes of sustained mental exertion without worsening of symptoms

| 3. | School – Part Time Maximum accommodations Shortened day/schedule Built-in breaks | Provide quiet place for scheduled mental rest Lunch in quiet environment No significant classroom or standardized testing Modify workload & exempt non-essential class or homework. Base grades on adjusted work Provide extended time |
|----|---|--|
| | Sant in Stoako | |
| | | Allow passing time before or after crowds |

Progress to Step 4 when student handles up to 30 - 40 minutes of sustained mental exertion without worsening of symptoms

| 4. School – Part Time or Full Moderate accommodations Shortened day/schedule | No standardized testing Modified classroom testing Continue to modify workload & continue to provide extra time & help on student requested assignments |
|---|---|
|---|---|

Progress to Step 5 when student handles up to 60 minutes of sustained mental exertion without worsening of symptoms

| 5 School – Full Time Moderate accommodations Shortened day/schedule | No standardized testing; routine tests are OK Decrease use of extra time, help & modification of assignments Student/Teacher determine time limit on assignments. Support in academically challenging subjects (i.e. reduced workload) |
|--|---|
|--|---|

Progress to Step 6 when student handles all class periods in succession without worsening of symptoms AND received medical clearance for full return to academics and athletics.

| 6. | School -Full Time | Attends all classesFull homework and testing |
|----|-------------------|---|
| | Full Academics | Tull homework and testing |
| | No accommodation | |

RETURN TO PLAY PROGRESSION - PARENT/GUARDIAN

No student will return to play without full academic and medical clearance from a MD or DO trained in Concussions. At the elementary and middle school levels following medical clearance, students will be allowed to resume their PE class participation. At the High School level, the athletic trainer will follow an established protocol for a *Gradual Return to Play (RTP)*, which includes district post concussion testing. High school students must be attending school full time and cleared of academic accommodations to begin *RTP* Protocol. All students will gradually increase activity in a step-by-step process. They will advance to the next step as long as no symptoms are present. If symptoms are present, the student will stop activity and report symptoms to his/her coach. Coach will collaborate with the athletic trainer. Student will be immediately removed from activity, and parent/guardian will be contacted for reassessment to determine next steps. Coach and/or athletic trainer must report to the district nurse.

RETURN-TO-PLAY PROTOCOL

- Once evaluated by PCP & 48 hours asymptomatic and post-injury test has been completed, the athlete may begin RTP progressions.
- RTP progressions is a multi-stage progression protocol that allows for the safe transition back into full sport participation
- Each stage must be completed at a minimum of one day at a time.
 - o Stage 0: 48 hours no symptoms, evaluated by PCP
 - o Stage 1: Light aerobic activity
 - o Stage 2: Moderate aerobic activity/functional activity
 - o Stage 3: Strenuous aerobic activity
 - Stage 4: Sport specific drills (no contact)
 - o Stage 5: Limited contact practice
 - o Stage 6: Full contact practice
 - o Stage 7: Return to play
- Stages 5 and 6 modified for non-contact sports (i.e., volleyball, baseball, cross country, etc.)
- Clearance from PCP before returning to competition
- One full practice must be completed before the athlete can return to competition

TRACK INJURIES AND MONITOR PROGRESS

A tracking system will be used to record incidents, follow-up, return progress, and medical clearance documentation for all concussions to protect every student. This tracking system will be coordinated collaboratively by the athletic director, athletic trainer and district nurse, and will be HIPAA compliant.

PROCEDURES FOR MANAGING CONCUSSION REPORTS

Non District Sponsored Activity Parent Report of Concussion

- Parent report of concussion to district staff. District staff receiving report must report immediately to Health Office. District staff receiving report must provide parents with packet titled, "Parent Responsibilities for Assisting in Managing Concussions" along with the Post Concussion Return to PE/Athletics/Academics Recommendations form
- 2. Health Office to:
 - A. Log concussion into Google document titled Health Office Head Injury Log.
 - B. Inform student's assigned counselor.
 - C. Call and confirm with parent receipt of packet titled "Parent Responsibilities for Assisting in Managing Concussions".
- 3. Counselor to notify:
 - A. Athletic trainer (if appropriate), and PE teachers that student must be removed from participation in PE and/or school athletic activities until appropriate clearance is in place.
 - B. All appropriate teaching staff of reported injury requesting student monitoring including request for information regarding student performance.
 Teachers should be notified that an *Individual Student Care Plan* will be developed as appropriate following receipt of the completed *Post Concussion Recommendations* from the MD/DO.
- 4. Parent Submits:

Post Concussion Return to PE/Athletics/Academics Recommendations form to the school Health Office

- 5. Health office staff checks for completion and forwards to student's counselor only after document has all required components to develop an *Individual Student Care Plan* based on MD/DO recommendations and informs staff/coaches as appropriate.
- Counselor monitors student status, schedules and facilitates follow up meetings to include appropriate personnel. District nurse in collaboration with counselor/athletic trainer (HS) are responsible for maintaining connection with treating specialist.

District Sponsored Activity Coach Report of Injury

- District staff/coach immediately reports injury to Health Office, Athletics Office and parent, and completes **District Incident Report** form. Report is submitted to site administrator with copy to district nurse. District staff notifying parent must provide parent with packet titled, "Parent Responsibilities for Assisting in Managing Concussions."
- 2. Health Office to:
 - A. Log Concussion into Google document titled Health Office Head Injury Log.
 - B. Inform student's assigned counselor.
 - C. Call and confirm with parent receipt of packet titled "Parent Responsibilities for Assisting in Managing Concussions".
- 3. Counselor to notify:
 - A. Athletic trainer (if appropriate), and PE teachers that student must be removed from participation in PE and/or school athletic activities until appropriate clearance is in place.
 - B. All appropriate teaching staff of reported injury requesting student monitoring including request for information regarding student performance. Teachers should be notified that an *Individual Student Care Plan* will be developed as appropriate following receipt of the completed *Post Concussion Recommendations* from the MD/DO
- 4. Parent Submits:

Post Concussion Return to PE/Athletics/Academics Recommendations form to the school Health Office.

- 5. Health Office checks for completion and forwards to student's counselor only after document has all required components to develop an *Individual Student Care Plan* based on MD/DO recommendations and informs staff/coaches as appropriate.
- 6. Follow up IMPACT test (HS students only) will be administered via athletic trainer and results provided to parents, student, counselor and district nurse.
- 7. Counselor monitors student status, schedules and facilitates follow up meetings to include appropriate personnel. District nurse in collaboration with athletic trainer (HS only) are responsible for maintaining connection with treating specialist.

A Section 504 Plan may be considered for the student <u>only after sufficient time has passed</u> to allow for healing. Students that have had one or more previous concussions may take longer to recover.

Concussion Forms and Information

The following forms are available from your school site health office:

- o Post Concussion Return to Physical Activity/PE/ Academic Recommendations
- o Individual Student Care Plan: Academic Adjustments Following a Concussion

The following links are very informative with regard to concussion management:

- o Concussion Information from CDC
- o A Fact Sheet for Parent (English)
- o A Fact Sheet for Parents (Spanish)

