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PREVENTION AND TREATMENT OF INJURIES TO THE HEAD

The Douglas County School District (DCSD) is committed to the safety and well-being of all students, including the prevention and proper treatment of head injuries. This policy aims to comply with the requirements set forth by the Nevada Legislature and SB80 of the 2023 session regarding head injuries sustained during school activities and the management of head injuries sustained outside of school activities.

There are several possible injuries to the head, but one of the most common is a concussion. A concussion is a type of traumatic brain injury (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 rapidly back and forth. This sudden movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging brain cells (Centers for Disease Control and Prevention {CDC}, 2019).

Injuries to the head and/or a concussion may occur while a student participates in interscholastic activities (sports) or other activities in the DCSD. The CDC Heads Up resources provide valuable information about the prevention of head injuries and/or concussions. The DCSD strongly recommends that parents/guardians and students educate themselves using these resources.

Notice and Warning

Participating in activities or events where a pupil may sustain an injury to the head and/or concussion carries various risks, including:

- 1. **Head Trauma:** Activities such as contact sports, physical education classes, and recreational activities can expose pupils to the risk of head trauma due to collisions, falls, or impacts with equipment or other objects.
- 2. Concussion: The most common type of head injury in these activities is a concussion, which is a mild traumatic brain injury caused by a blow to the head or body that results in the brain moving rapidly within the skull. Concussions can lead to a range of symptoms including headache, dizziness, nausea, sensitivity to light and noise, difficulty concentrating, and mood changes.
- 3. **Facial Injuries:** Activities involving projectiles, sticks, or balls increase the risk of facial injuries such as fractures, cuts, and contusions, which can also impact the head.



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- 4. **Neck and Spinal Injuries:** Severe head impacts or falls can also potentially cause neck or spinal injuries, which may have serious consequences for neurological function and long-term health.
- 5. **Second Impact Syndrome:** If a pupil returns to activity too soon after a concussion or another head injury and sustains a second head injury, they may be at risk for second impact syndrome. This condition involves rapid and often catastrophic swelling of the brain and can be life-threatening.
- 6. **Long-term Effects:** Repeated head injuries, even mild concussions, may contribute to long-term cognitive deficits, increased risk of future concussions, and potentially neurodegenerative diseases such as Chronic Traumatic Encephalopathy (CTE) in some cases.
- 7. **Psychosocial Impact:** Head injuries can impact a pupil's emotional well-being, self-confidence, and social interactions, especially if they are unable to participate in activities they enjoy or experience prolonged symptoms.

Given these risks, the DCSD and its associated schools prioritize injury prevention strategies, implement effective safety measures, educate participants and staff about head injury recognition and management, and ensure prompt and appropriate medical care when injuries occur to minimize the impact on pupil health and well-being.

Further, continuing to participate in an event or activity after sustaining an injury to the head and/or concussion can pose several inherent risks, including but not limited to:

- 1. **Increased Severity of Injury:** Continuing physical activity after a head injury can exacerbate the initial injury. This can lead to more severe symptoms, prolonged recovery times, and potential long-term health consequences.
- 2. **Delayed Recovery:** Not allowing adequate time for the brain to heal after a head injury can prolong the recovery process. This may result in persistent symptoms such as headaches, dizziness, difficulty concentrating, and sensitivity to light or noise.
- 3. **Risk of Second Impact Syndrome:** If a second head injury occurs before the brain has fully recovered from the first injury, it can lead to a rare but potentially catastrophic condition known as second impact syndrome. This condition can cause rapid and severe swelling of the brain, which can be fatal or lead to serious neurological damage.
- 4. **Impaired Cognitive Function:** Even mild head injuries can temporarily impair cognitive function, including memory, attention, and decision-making abilities. Continuing to participate in activities that require



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concentration and quick reactions can increase the risk of accidents and further injury.

- 5. **Masking Symptoms:** Adrenaline and the desire to continue participating may mask symptoms of a head injury, making it difficult for the injured person and others to recognize the seriousness of the injury and the need for immediate medical attention.
- Long-Term Health Effects: Research suggests that repeated head injuries, especially without adequate recovery time between injuries, may increase the risk of long-term cognitive decline, neurodegenerative diseases (such as Chronic Traumatic Encephalopathy, or CTE), and mental health issues.

In summary, the risks associated with continuing to participate in an event or activity after sustaining a head injury underscore the importance of promptly recognizing, assessing, and properly managing head injuries to prioritize the health and safety of individuals involved.

School/District Responsibilities

Each employee of a DCSD school who supports the academics or health, including, without limitation, mental or physical health, of a pupil who has sustained or is suspected of having sustained an injury to the head must annually complete training regarding the prevention and treatment of injuries to the head, which must include, without limitation, a review of the educational information compiled pursuant to subsection 3 of NRS 385B.080. Each DCSD school shall maintain a record of the training, which is completed by each employee, including their signature acknowledging attendance. These records will be maintained by school administration indefinitely. The DCSD Chief Nurse will oversee and approve the training provided to employees.

Before a student is allowed to participate in competitive sports offered by the DCSD, the student and the parent/guardian must be provided with a copy of DCSD Policy #549 and sign a statement acknowledging that they understand the inherent risks of head injuries and/or concussions associated with participation.

Upon notification that a student has, sustained, or is suspected to have sustained, a head injury and/or concussion, the DCSD school administrator shall ensure that the student and his/her parent/guardian are provided with a printed or electronic copy of this policy.



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If a student has, sustains, or is suspected of having or sustaining an injury to the head and/or concussion, the student must be immediately removed from the event or activity and is NOT allowed to return until the parent/guardian provides a signed statement from a provider of health care acting within his/her scope of practice indicating that the student is medically cleared for participation in the event or activity, including the date upon which the student is medically cleared to return. Any questions or disputes about the validity of the medical clearance will be determined by the DCSD Chief Nurse as applicable.

Return-to-Learn: The effects of concussion on a student's return to school experience are unique to each student. In most cases, a concussion will not significantly limit a student's participation in school. In some cases, a concussion can affect multiple aspects of a student's ability to participate, learn, and perform well in school. The experience of learning and engaging in academic activities that require concentration can cause a student's concussion symptoms to reappear or worsen. Given this connection and the way concussion effects can vary across students, academic adjustments should be tailored to each student's specific circumstances.

Returning to the classroom or schoolwork should be directed by a provider of health care acting within his/her scope of practice and with experience in the evaluation and management of concussions. Educators will provide appropriate modifications and accommodations for schoolwork per the medical documentation.

Return-to-Play: A student cannot return-to-play until the parent/guardian provides a signed statement from a provider of health care acting within his/her scope of practice indicating that the student is medically cleared for participation in the event or activity, including the date upon which the student is medically cleared to return. Any questions or disputes about the validity of the medical clearance will be determined by the DCSD Chief Nurse as applicable.

Student and Parent/Guardian Responsibilities

The CDC has provided a parent/guardian fact sheet for the purpose of educating parents/guardians about the prevention, signs, and symptoms of a possible concussion. The DCSD endorses this resource and requires all parents/guardians with a student participating in sports and/or activities to



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read and understand this document prior to participation. Students who wish to participate in sports and/or activities must read and understand the CDC handout about head injuries before participating.

Any student participating in sports and/or activities within the DCSD, and the parent/guardian of the student has an obligation to adhere to this policy and all the associated rules and regulations of the sport and/or activity.

Acknowledgement and Signatures	
Parent/Guardian Acknowledgement: Ihave read the DCSD Board Policy #549: Prevention and Treatment of Injuries to the Head and the CDC's parent/guardian fact sheet. I understand all the aspects of the policy including, but not limited to the notice, warning, school responsibilities, and my responsibilities. I agree to comply with the policy.	
Parent/Guardian Signature	Date
Student Acknowledgement: I	
Student Signature	Date
Reference:	
Date Adopted: 4/10/2012 Date Revised: 10/8/2024	