Grapevine Faith Concussion Protocol

What is a concussion?

A concussion is a complex pathophysiological process affecting normal brain function that is induced by traumatic biomechanical forces. A concussion can be caused by a sudden blow to the head or body that causes the brain to shake, damaging cells and creating chemical changes in the brain. This damage to the brain cells results in the rapid onset of short-lived impairment of neurological function that resolves on its own over time with rest. When an athlete experiences a concussion, there is no structural swelling or damage to the brain, therefore it is not necessary to rush to the Emergency Department or have a CT scan, but to be evaluated by an athletic trainer or a physician who is trained in concussion recognition and treatment.

Concussions can be difficult to diagnose and do not always have the same clinical presentation. Each concussion is different and should be treated based on the individual's level of severity.

Concussions can have serious long-term health effects. A major concern with any concussion is returning to play too soon. Having a second concussion before the first one has healed can slow recovery or increase the risk for long-term problems. In rare cases, a second concussion can result in what is called **Second Impact Syndrome (SIS)**, which is characterized by rapid swelling and bleeding of the brain and may lead to serious issues.

Baseline cognitive testing will be administered through ImPact to each athlete every two years of high school (freshman and junior year). The baseline test measures brain functions such as memory and reaction time. The results assist the physician and athletic trainer in appropriate return-to-play.

Cognitive Rest

The first step in recovering from a concussion is rest, both physical and cognitive. Rest is essential in allowing the brain to heal. Activities that may involve loud noises, bright lights, computers, video games, television and cell phones may worsen symptoms and delay recovery. As the symptoms resolve, use of these things may increase. Until cleared by a physician, any form of exercise including, but not limited to, athletic participation and recreational exercise are not allowed.

Reporting Concussions

Athletes must know that they should never "tough out" a concussion. Teammates, parents and coaches should never encourage an athlete to play through the symptoms of a concussion. In addition, there should never be an attribution of bravery to athletes who do play with concussion symptoms. The risks of such behavior should be emphasized to all team members, parents and coaches.

If an athlete suffers from a concussion, he/she should report to the athletic trainer or coach (if athletic trainer is not present at the time) immediately. The athletic trainer will evaluate the athlete and determine the appropriate actions.

If a concussion is diagnosed, the school protocol for return-to-play from a concussion will be enacted under the supervision of the athletic trainer. Under no circumstances shall the athlete be allowed to return to practice or play without the approval of a licensed medical provider trained in the treatment of concussions.

Once a concussion diagnosis is confirmed, it will be reported to TAPPS using tappster.com.

Signs & Symptoms

Signs and symptoms generally present soon after the injury, but in some cases may take hours or even days. Common signs and symptoms include:

(chart taken from impacttest.com)

Concussion Policy

If a head injury is suspected, the athlete will immediately be pulled from activity/competition and an evaluation will be performed by the athletic trainer and/or physician. The athlete will not be allowed to return to activity that day. The next day, the athlete will be re-evaluated by the athletic trainer. If at this point the athlete is asymptomatic, they may begin the return-to-play protocol. If the athlete is still experiencing or exhibiting symptoms, they must see a physician at the earliest possible time. Once the athlete receives medical clearance from the physician, they may begin the return-to-play protocol under the supervision of the athletic trainer.

Return-to-Play Protocol

This return-to-play protocol will follow a step-by-step progression. Before the athlete may begin this progression they MUST remain asymptomatic for 24 consecutive hours and receive medical clearance from a physician.

The athlete must remain asymptomatic for 24-hours during and following each level before they may progress to the next. If the athlete begins to exhibit or experience symptoms at any point during the progression, they will drop to

the previous asymptomatic level after a 24-hour period of rest has passed. If the athlete remains symptomatic for an extended period of time, they must return to the physician for re-evaluation.

5-Step Progression:

Level 1	Light aerobic exercise; 5-10 minutes on an exercise bike or light jog; no weight-lifting, no resistance training or other type of exercise
Level 2	Moderate aerobic exercise; 15-20 minutes of running at moderate intensity in the gym or on the field with no helmet or any other equipment
Level 3	Non-contact training drills in full uniform; may begin weight-lifting and resistance training
Level 4	Full contact practice or training
Level 5	Full game play

Continued post-concussive symptoms, prior concussion history, and any diagnostic testing results, along with neurocognitive testing and physical exam will be utilized by a physician and athletic trainer in establishing a timeline for an athlete's return-to-activity. It is important to note that this timeline could last over a period of days, weeks, months or potentially disqualify the student from athletics. **All cases will be handled on an individual basis.**

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