

**GREATER LOWELL TECHNICAL
HIGH SCHOOL**



**POLICIES ON HEAD INJURIES AND
CONCUSSIONS IN
EXTRACURRICULAR ATHLETICS**

2026-2027



Approved by the
Greater Lowell Technical School Committee
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FOREWORD

A survey of middle and high school students has shown that 18% report having symptoms associated with a concussion after a blow to the head during extracurricular athletics, annually¹. Given that there are approximately 200,000 Massachusetts students involved in athletics (MIAA), there is an estimated 36,000 student athletes a year experiencing a possible concussion. A growing body of scientific literature demonstrates the short and long-term risks of concussions. Returning a student athlete to play after a known or suspected concussion places the student at risk for long term health consequences, including serious injury or even death. The risk of substantial injury is particularly high if the athlete suffers a subsequent concussion before completely recovering from the prior one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences.

In 2010, the Massachusetts Department of Public Health's (MDPH) issued the new regulation 105 CMR 201.000 *Head Injuries and Concussions in Extracurricular Athletic Activities*, mandated by *Chapter 166 of the Acts of 2010, An Act Relative to Safety Regulations for School Athletes*. This regulation requires all public middle and high schools (serving grades 6 through high school graduation) and those non-public schools that are members of the Massachusetts Interscholastic Athletic Association (MIAA) to have policies and procedures governing the prevention and management of sport-related head injuries. The section in the regulations on School Policies (105 CMR 201.006) states that these policies will be developed by January 1, 2012² and will be reviewed and revised "as needed but at least every two years." Furthermore, the regulation outlines the 17 topic areas that school policies, at a minimum, should address. This document is organized in 17 sections to provide guidance for each of the areas identified in the regulations. Each section cites the relevant subsection of the regulation, provides clarifying comments and includes sample policies. MDPH sought to build in flexibility wherever possible to allow schools to incorporate the required head injury policies into existing policies and approaches to make implementation simpler. We have attempted to highlight these areas of flexibility throughout the document by including multiple approaches that will satisfy the requirement.

These regulations and the resulting school policies are meant to prevent concussions and minimize the health consequences should a concussion occur. The regulations also emphasize a team approach, bringing together all those in the school community responsible for student athletes' safety to understand the risks of concussions so they can respond appropriately. Schools and school districts are encouraged to use this document and the model policies that have been shared by many schools across the Commonwealth as a starting point as they develop their own school policies that fit local circumstances and reflect the district's unique characteristics. Each school district or private school is responsible for developing policies that are consistent with the regulations and include all required information. MDPH looks forward to working with schools, school districts and other key partners to implement these regulations in order to promote the health and safety of our student athletes.

¹ Youth Health Survey, 2009, Massachusetts Department of Public Health.

² In a Frequently Asked Questions document posted on the DPH website, DPH has indicated that schools should confirm that they have interim policies in place as of January 1, 2012 and then may finalize their policies by March 1, 2012 and confirm to the Department that they have done so.

INTRODUCTIONS TO SCHOOL POLICES ON HEAD INJURIES AND CONCUSSIONS IN EXTRACURRICULAR ATHLETIC ACTIVITIES

Greater Lowell Technical High School seeks to prevent concussions and provide a safe return to activity for all students after injury, particularly after a head injury. In order to effectively and consistently manage these injuries, the Athletic Department abides by the following procedures that have been developed to aid in ensuring that concussed athletes are identified, treated and referred appropriately, receive appropriate follow-up medical care during the school day, including academic assistance, and are fully recovered prior to returning to athletic activity.

SECTION 1: PERSONS RESPONSIBLE FOR IMPLEMENTATION OF SCHOOL POLICY AND PROCEDURES

Regulation:

105 CMR 201.006 (A)(1): Designation, by the superintendent or head master, principal or school leader, of the person responsible for the implementation of these policies and protocols, either the Athletic Director or other school personnel with administrative authority;

Person Responsible Policy

The Greater Lowell Regional Vocational Technical School District has designated its Athletic Director to oversee the implementation of policies and protocols governing the prevention and management of sports-related head injuries. In addition, the AD will be responsible for:

- (1) Supporting and enforcing the protocols, documentation, required training and reporting.
- (2) Assuring that all documentation is in place.
- (3) Reviewing, updating and implementing policy every two years and including updates in annual training and the student handbook.

SECTION 2: ANNUAL TRAINING REQUIREMENT

Regulation:

105 CMR 201.006(A)(2): Annual training of persons specified in 105 CMR 201.007 in the prevention and recognition of sports-related head injury, and associated health risks including second impact syndrome, utilizing Department-approved training materials or program, and documentation of each person's completion of such training.

Training Requirement Policy

- ❖ The Commonwealth of Massachusetts requires annual safety training on sports related concussion, including second impact syndrome, for coaches, certified athletic trainers, trainers, volunteers, school nurses, school and team physicians and athletic directors, whether employed by a school or school district or serving as a volunteer, parent or legal guardian of a child who participates in an extracurricular athletic activity and student who participates in an extracurricular athletic activity. At Greater Lowell Technical High School, school personnel are required to complete free, on-line training (either the National Federation of High Schools or the CDC's Heads Up Concussion training). Student athletes and their parents—must complete one of the approved on-line trainings and submit a completion/consent notice via the online registration platform to meet this participation requirement. Alternatively, parents may review DPH-approved written materials (provided by the athletic department) and sign a verification form that they have read and understood these materials.

SECTION 3: DOCUMENTATION OF PHYSICAL EXAM

Regulations:

105 CMR 201.006(A)(3): Documentation of physical examination prior to a student's participation in extracurricular athletic activities on an annual basis, consistent with 105 CMR 200.100(B)(3) and information for students participating in multiple sports seasons that documentation of one physical examination each year is sufficient;

Physical Examination Policy

- ❖ Each student athlete must have a physical examination on an annual basis, i.e. within 13 months of the student's last physical examination (to allow for insurance coverage of the examination). Any student athlete who does not have a current physical on file with the nurse, prior to the first day of try-outs/practice, is not eligible until a new/updated physical is turned in. If the student's physical examination expires during the sports season, they must have an updated physical examination to continue to participate in the sports season. All physicals are to be turned in to the nurse or athletic trainer, not the coach.

SECTION 4: PRE-PARTICIPATION HEAD INJURY REPORTING FORMS, SUBMISSION AND REVIEW

Regulations:

105 CMR 201.006(A)(4): Procedure for the school to obtain and ensure review, prior to each sports season, of current information regarding an athlete's history of head injuries and concussion using either the Department Pre-participation Health Injury/Concussion Reporting Form For Extracurricular Activities, or school based equivalent.

Concussion History Form Submission and Review Policy

❖ The Massachusetts concussion law requires an athlete and his or her parents to inform their coaches about prior head injuries at the beginning of each sports season. This reporting is done via the **Pre-Participation Head Injury/Concussion Reporting** form (see Appendix I) and should be completed by the student's parent(s) or legal guardian(s) and the student. It must be submitted to the Greater Lowell Technical High School's Athletic Director, **prior to the start of each season a student plans to participate in an extracurricular athletic activity**. This form provides a comprehensive history with up-to-date information relative to concussion history. This form is designed to ensure that particular attention is paid to identifying athletes with a history of brain or spinal injuries. For example, it asks such questions as:

- ❖ Has student ever experienced a traumatic head injury (a blow to the head)? (If yes, when?)
- ❖ Has student ever received medical attention for a head injury? (If yes, when?)
- ❖ Was student diagnosed with a concussion? (If yes, when?)
- ❖ Durations of symptoms for most recent concussion.

Until the pre-participation form is completed and signed by the parent/ guardian and student and returned to the school prior to the start of every sports season, the student cannot participate in the extracurricular sports activity.

❖ *History of Multiple Concussions on Pre-participation Form:* The decision to allow a player who reported a history of multiple concussions on her/his pre-participation form should be made only after consultation with the student's physician or primary care provider; the sports medicine or concussion specialist, if involved; the neuropsychologist, if involved, and the appropriate school athletic staff and the parent. Current evidence indicates that youth who have suffered one or more concussions are more likely to suffer a subsequent one. Options may include switching positions, limiting contact in practices, or changing sports altogether to minimize the risk of re-injury. The focus of Greater Lowell Technical High School will always be on protecting the health and safety of the student and avoiding long-term consequences that can occur from repeated concussions.

- ❖ *Collection/Distribution of Pre-participation Forms:* Greater Lowell Technical High School has the pre-participation forms available electronically at the School's website under Athletics at www.gltech.org. Hard copies of these forms are also available at the Athletic Department and School Nurse's office.

- ❖ The parent/student can fax, mail, or hand deliver the completed and signed pre-participation form to the Greater Lowell Technical High School's athletic department which will forward a copy to the school nurse. In addition, during the months of July and August, coordination between the athletic and school nursing departments is particularly important when the school nurse is not available. The pre-participation forms should be submitted to the Athletic Director who will then follow-up with the school nurse at the beginning of the school year.

SECTION 5: MEDICAL/NURSING REVIEW OF PRE-PARTICIPATION FORMS

Regulation:

105 CMR 201.006 (A)(5): Procedure for medical or nursing review of all Pre-participation Forms indicating a history of head injury

Medical Review of Pre-Participation Form Policy

At the start of each sports season, the Athletic Director will review all pre-participation forms and forward to the school nurse those forms indicating a history of head injury. The school nurse will be responsible for:

- reviewing or having the school physician review completed pre-participation forms.
- addressing any questions raised by the Athletic Director.
- communicating with the coach and athletic trainer regarding the student's concussion history and discussing concerns.
- following up with parents and students as needed prior to the student's participation in extracurricular athletic activities.

SECTION 6: MEDICAL/NURSING REVIEW OF REPORTS OF HEAD INJURY DURING THE SEASON

Regulation:

105CMR 201.006(A)(6): Procedure for the school to obtain and ensure timely medical or nursing review of a Department Report of a head Injury During Sports Season Form, or school-based equivalent, in the event of a head injury or suspected concussion that takes place during the extracurricular activity season.

Medical/Nursing Review Policy

- ❖ The following procedures will be followed when an athlete receives a head injury:
 - Athlete is removed from the contest or practice.
 - The certified athletic trainer conducts a *Standardized Assessment of Concussion* and completes the **“Report of Head Injury During Sports Season Form”** (See Appendix II).
 - If certified athletic trainer is not available, coach completes the **“Report of Head Injury During Sports Season Form”**
- ❖ The certified athletic trainer/coach will give **“Report of Head Injury During Sports Season Form”** to Director of Athletics.
- ❖ Director of Athletics will notify school nurse and/or school physician (if appropriate) who will review the Report of Head Injury form.
- ❖ School nurse will contact athlete’s teachers and school counselor.

SECTION 7: PROCEDURE FOR REPORTING HEAD INJURIES TO SCHOOL NURSE AND/OR CERTIFIED ATHLETIC TRAINER

Regulation:

105 CMR 201.006(A)(7): Procedure for reporting head injuries or suspected concussions sustained during extracurricular athletic activities to the school nurse and certified athletic trainer, if on staff.

Reporting Head Injury Policy

Coaches will report all head injuries to the Certified Athletic Trainer as soon as possible for medical assessment and management and coordination of home instructions and follow-up care. The athletic trainer will notify the school nurse of the student's injury, prior to the next school day, so that the school nurse can initiate appropriate follow-up in school immediately upon the athlete's return to school.

SECTION 8: REMOVING ATHLETES FROM PLAY AND MEDICAL EVALUATION

Regulation:

105 CMR 201.006(A)(8): Procedure for identifying a head injury or suspected concussion, removing an athlete from practice or competition and referring for medical evaluation.

Identifying Head Injury or Suspected Head Injury and Removing from Play Policy

- ❖ If a student athlete receives a blow to the head and any signs or symptoms are present - or if the student is suspected of having a head injury - the coach or athletic trainer must remove the student from play/practice and the student will not return to play/practice that day. The student will be referred to the school nurse, athletic trainer, or coach who will:
 - a) Contact parent, guardian or emergency contact,
 - b) Refer student immediately to their primary care physician or if unavailable, emergency room,
 - c) Send copy of the symptom checklist with the student for review by medical personnel,
 - d) Students must follow their primary care physician's written orders concerning return to school and physical activity (which includes physical activity in Physical Education class, sports practice and/or games).

SECTION 9: MEDICAL CLEARANCE FOR RETURN TO PLAY

Regulation:

105 CMR 201.006(A)(9) The protocol for medical clearance for return to play after a concussion that at a minimum complies with 105 CMR.201.011.

105 CMR 201.011: Each student who is removed from practice or competition for a head injury or suspected concussion, or loses consciousness, even briefly, or exhibits signs and symptoms of a concussion, shall obtain and present to the Athletic Director, unless another person is specified in school policy or procedure, a Department Post Sports-Related Head Injury Medical Clearance and Authorization Form (Medical Clearance and Authorization Form), or school-based equivalent, prior to resuming the extracurricular athletic activity. This form must be completed by a physician or one of the individuals as authorized by 105 CMR 201.011(A). The ultimate return to play decision is a medical decision that may involve a multidisciplinary approach, including consultation with parents, the school nurse and teachers as appropriate.

(A) Only the following individuals may authorize a student to return to play:

- (1) A duly licensed physician;
- (2) A duly licensed certified athletic trainer in consultation with a licensed physician;
- (3) A duly licensed nurse practitioner in consultation with a licensed physician; or
- (4) A duly licensed neuropsychologist in coordination with the physician managing the student's recovery.

Return to Play Policy

All students at Greater Lowell Technical High School must be cleared to return to play/practice by a licensed medical professional (physician, nurse practitioner in consultation with a physician, certified athletic trainer in consultation with a physician or neuropsychologist in coordination with the physician managing the student's recovery) after the graduated return to play has been completed. (See details about graduated return to play practices below under Section 10). It is recommended that this medical professional have familiarity with concussion diagnosis and management in order to determine how serious the concussion is and when it is safe for the student to return to normal activities including physical activity and school (concentration and learning activities). Sports activities include physical education class as well as sports practices and games:

- The student should be completely symptom free at rest and with physical (sprints, non-contact aerobic activity) and cognitive exertion (school work).
 - Return to play should occur gradually (see below).
 - Students should be monitored for symptoms and cognitive function during each stage of exertion.
 - Students should only progress to the next level of exertion if they are asymptomatic at the current level.
- ❖ Medical clearance will be provided using the Post Sports-Related Head Injury Medical Clearance and Authorization Form (see Appendix III) also available on the Greater Lowell Technical High School website. It is recommended that the student take this form to the medical professional at the time of exam as other forms will not be accepted. These forms must be provided to the coach or athletic trainer and will be

shared with the school nurse for review with a copy kept in the student's medical record.

- ❖ In a situation in which a student has been medically cleared but school staff have observed continuing symptoms, the school will make the final decision regarding a student's return to play. If this situation arises, the Greater Lowell Technical High School staff should communicate with the physician or health care provider who provided the clearance regarding the symptoms school staff have observed to allow for reevaluation by the health care provider. It is possible that the health care provider was not aware of the student's symptoms when the provider gave the clearance. If the athlete still has symptoms, the athlete should NOT return to play.

Return to Play Schedule:

When a student athlete is completely symptom free at rest and has the approval of a medical professional, she/he may begin a graduated return to play protocol. The return to play schedule for the student should proceed as follows and should be monitored by the athletic trainer.

Step 1: Light exercise, including walking or riding an exercise bike. No weight-lifting.

Step 2: Aerobic exercise such as running in the gym or on the field. No helmet or other equipment.

Step 3: Non-contact training drills in full equipment. Weight-training can begin.

Step 4: Full contact controlled training followed by practice or training.

Step 5: Full contact game play.

SECTION 10: DEVELOPMENT AND IMPLEMENTATION OF POST CONCUSSION GRADUATED REENTRY PLANS

Regulation:

105 CMR 201.006: Procedure for the development and implementation of post-concussion graduated reentry plans to school and academic activities, if indicated, by persons specified in CMR 201.010(E)(1).

105 CMR 201.010(E) Each student who is removed from practice or competition and subsequently diagnosed with a concussion shall have a written graduated reentry plan for return to full academic and extracurricular athletic activities.

- (1) The plan shall be developed by the student's teachers, the student's school counselor, school nurse, certified athletic trainer if on staff, neuropsychologist if available or involved, parent, members of the building-based student support and assistance team or individualized education program team as appropriate and in consultation with the student's primary care provider or the physician who made the diagnosis or who is managing the student's recovery.
- (2) The written plan shall include instructions for students, parents and school personnel, addressing but not be limited to: (a) Physical and cognitive rest as appropriate; (b) Graduated return to extracurricular athletic activities and classroom studies as appropriate, including accommodations or modifications as needed; (c) Estimated time intervals for resumption of activities; (d) Frequency of assessments, as appropriate, by the school nurse, school physician, team physician, certified athletic trainer if on staff, or neuropsychologist if available until full return to classroom activities and extracurricular athletic activities are authorized; and (e) A plan for communication and coordination between and among school personnel and between the school, the parent, and the student's primary care provider or the physician who made the diagnosis or who is managing the student's recovery.
- (3) The student must be completely symptom free and medically cleared as defined in 105 CMR 201.011 in order to begin graduated reentry to extracurricular athletic activities.

Graduated Reentry Planning

Greater Lowell Technical High School requires that all students returning to school and athletics after a concussion have a written plan for reentry. School staff, such as teachers, school nurses, counselors, administrators, coaches and others should work together to develop and implement this plan in coordination with the student, their parent/guardian and the primary care provider.

Graduated return to academic plans are based on the stages of recovery framework that takes a student from rest, to gradual return to full participation in academic activities.

The written reentry plans will be signed by the student, their parent/guardian, the school nurse, the lead teacher/school counselor, athletic trainer and coach so that all parties are in agreement as to the plan for reentry. Frequent or periodic assessments by school staff including the nurse, athletic trainer, school physician or team physician as appropriate may be necessary until full return to classroom activities and extracurricular athletic activities are authorized by medical staff. A copy of the plan will be kept in the student's medical record.

Stages of Recovery:

The stages of recovery are a framework designed through a collaborative effort by local health care professionals. The purpose of this framework is to create common language that will help guide students, families, school personnel and health professionals through the recuperation process. Placement in stages is based on assessment of the student's medical condition by a licensed medical professional and accompanied by written orders.

Red Stage (Usually 2 – 4 days, but could last weeks)

- 1) Rest
- 2) Students typically do not attend school

Orange Stage

- 1) Rest
- 2) Attend school half to full days
- 3) Avoid school bus and heavy backpacks
- 4) Work with designated educational personnel regarding school accommodations
- 5) No tests in school
- 6) No sports, chorus or physical education

Yellow Stage

- 1) Attend school full-time if possible
- 2) Students and families work with teachers regarding homework deadlines (complete as much as possible)
- 3) See school nurse for pain management and/or rest if needed
- 4) Limit one quiz/test per day (untimed testing is recommended)
- 5) Work in 15 minute blocks
- 6) No sports
- 7) Licensed medical professional will make decisions regarding chorus and physical education based on medical assessment

Green Stage

- 1) Attend school full time
- 2) Resume normal activities
- 3) Resume sports once school work is back on track, student is symptom-free, and has been cleared by a licensed medical professional

Graduated return to athletic plans will begin only after a student has returned to full participation in academics and is completely symptom free at rest.

SECTION 11: PROVIDING INFORMATION, FORMS AND MATERIALS TO PARENTS AND ATHLETES

11a) Annual Training Requirement

Annual Training Policy

- ❖ Parents/guardians and students who plan to participate in any athletic program at Greater Lowell Technical High School must also take a free on-line course. Two free on-line courses are available and contain all the information required by the law. The first is available through the National Federation of High School Coaches. You will need to click the “order here” button and complete a brief information form to register. The entire course, including registration, can be completed in less than 30 minutes.

<http://www.nfhslearn.com/electiveDetail.aspx?courseID=15000>

The second on-line course is available through the Centers for Disease Control at: www.cdc.gov/Concussion

11b) Procedure for the School to Notify Parents when an Athlete has been Removed from Play for a Head Injury or Suspected Concussion

Parent Notification Policy

The athletic trainer, coach or school nurse should promptly inform the athlete’s parents or guardians about the possible concussion during the day of the injury via telephone. Inform the parents that the student will have to be medically cleared by a medical professional before returning to play and the Post-Sports-Related Head Injury Medical Clearance and Authorization Form will need to be completed and returned to the school before the student can resume play.

11c) Protocol for Parents/Students to Obtain Medical Clearance for Return to Play and Academics after a Diagnosed Concussion (See also #8 above)

Obtaining Medical Clearance Policy

At Greater Lowell Technical High School parents and students are oriented about the protocol on obtaining medical clearance for return to play after a diagnosed concussion. The website for the school at www.gltech.org under the Athletics tab has the sports concussion policy that also details these protocols. Finally, parents and students can always call the athletic department office or the school nurse office to get further clarification or ask questions. No student will be allowed to return to play athletic activities until the medical clearance form is signed by authorized medical professional, submitted and reviewed by the school nurse.

11d) Parent's Responsibility for Completion of the Pre-Participation Form or School-Based Equivalent

Pre-Participation Policy

- ❖ At Greater Lowell Technical High School, parents and students are oriented about the requirement to submit the pre-participation form, signed by both student and parent, which provides a comprehensive history with up-to-date information relative to concussion history. It is the parent's responsibility to tell all the student's coaches and school nurse if the student has ever had a concussion via this form. The website for the school at www.gltech.org under the Athletics tab has the sports concussion policy that also details these protocols. Finally, parents and students can always call the athletic department office or the school nurse office to get further clarification or ask questions. These forms should be submitted to the athletic department office which copies and reviews them and then forwards them to the school nurse office for review. At the beginning of every sports season, no student will be allowed to participate in athletic activities until the pre-participation form is signed, submitted by parent and student and reviewed by designated staff annually.

11e) Parent's Responsibility for Completion of the Report of a Head Injury Form, or School-Based Equivalent

Head Injury Forms Policy

- ❖ At Greater Lowell Technical High School, parents and students are oriented about the requirement to submit all forms including the Report of Head Injury Form signed by parent if their child has a head injury related to athletic activities. The website for the school at www.gltech.org under the Athletics tab has the sports concussion policy that also details these protocols. Finally, parents and students can always call the athletic department office or the school nurse office to get further clarification or ask questions. These forms should be submitted to the athletic department office which copies and reviews them and then forwards them to the School Nurse Office for review. At the beginning of every sports season, no student will be allowed to participate in athletic activities until all required forms including the report of head injury form has been signed, submitted by parent and reviewed by school nursing and athletic department staff.

SECTION 12: INCLUSION OF SPORTS-RELATED HEAD INJURY POLICY IN THE STUDENT AND PARENT HANDBOOK

Regulation:

105 CMR 201.006(A)(12): Inclusion in the student and parent handbooks of information regarding the sports-related head injury policy and how to obtain the policy

Handbook Policy

- ❖ **State Concussion Law Requirements:** The Commonwealth of Massachusetts Executive Office of Health and Human Services requires that all high schools subject to the Massachusetts Interscholastic Athletic Association (MIAA) rules adhere to the following law:

Student athletes and their parents, coaches, athletic directors, school nurses, and physicians must learn about the consequences of head injuries and concussions through training programs and written materials. The law requires that athletes and their parents inform their coaches about prior head injuries at the beginning of the season. If a student athlete becomes unconscious, or is suspected of having a concussion, during a game or practice, the law now mandates taking the student out of play or practice, and requires written certification from a licensed medical professional for “return to play.”

Parents and student-athletes who plan to participate in any sports program at Greater Lowell Technical High School must also take one free online course about concussions per school year. Two free online courses have been made available and contain all the information required by the law.

The first online course option is offered through the National Federation of High School Coaches. You will need to click the “order here” button and complete a brief information form to register. At the end of the course, you will receive a completion receipt. The entire course, including registration, can be completed in less than 30 minutes:

<http://www.nfhslearn.com/electiveDetail.aspx?courseID=15000>

The second online course option is offered through the Centers for Disease Control and Prevention at:

http://www.cdc.gov/concussion/HeadsUp/online_training.html

SECTION 13: COMMUNICATING WITH PARENTS WITH LIMITED ENGLISH PROFICIENCY

Regulation:

105 CMR 201.006(A)(13): Procedure for communicating with parents with limited English proficiency

Communicating with Parents Policy

- ❖ Because of limited English skills, some parents may be unable to communicate with school personnel and may feel isolated from the school community. Greater Lowell Technical High School makes every attempt to communicate effectively with parents with limited English proficiency. Greater Lowell Technical High School has translated these school policies on head injuries and concussions in athletic activities and the mandated forms into Spanish, Portuguese and Khmer. These documents are listed on the school's website at www.gltech.org in all of these languages. Greater Lowell Technical High School will translate other materials as requested. In the event a student receives a concussion or is suspected of having a concussion Greater Lowell Technical High School Athletic Director's office should notify the parent in the appropriate language. Interpreters are available by contacting the School Counseling Department.

SECTION 14: OUTREACH TO PARENTS FOR FORM AND TRAINING COMPLETION

Regulation:

105 CMR 201.006(A)(14): Procedure for outreach to parents who do not return completed forms required for students to participate in extracurricular sports and for how to handle situations where a student verifies completion of the annual training requirement but a parent has not

Outreach to Parents Policy

- ❖ Student athletes at Greater Lowell Technical High School will not be permitted to participate in extracurricular sports until both the parent and student have completed Pre-Participation Head Injury/Concussion Reporting Form for Extracurricular Activities *before the start of every sports season*. In the event the school has not received the Pre-Participation Head Injury/Concussion Reporting Form, or other required forms, including documentation of an annual physical examination and documentation that both the student athlete and their parent/guardian have completed the required annual training, the student athlete will not be allowed to play or practice until the appropriate required signed and completed forms are returned to the Athletic Department.

SECTION 15: SHARING CONCUSSION-RELATED HEALTH INFORMATION

Regulation:

105 CMR 201.006(A)(15): Procedure for sharing information concerning an athlete's history of head injury and concussion, recuperation, reentry plan, and authorization to return to play and academic activities on a need to know basis consistent with requirements of 105 CMR 201.000 and applicable federal and state law including but not limited to the Massachusetts Student Records Regulations, 603 CMR 23.00, and the Federal Family Educational Rights and Privacy Act Regulations, 34 CFR Part 99

Sharing Information Policy

Informal collaboration occurs on a temporary, as-needed basis for information exchange, as when the school nurse informs (while adhering to protocols for confidentiality) the physical education teacher that a particular student may not participate in athletic activities because of a recent injury. There may be circumstances in which there is a need to share information in the student health record with authorized school personnel — either to enhance the educational progress of the student or protect his/her safety or well-being. For example, staff may need to be alerted to signs or symptoms of a medical problem on a need to know basis and offered a course of action. This type of disclosure should be made only to those authorized school personnel who work *directly with* the student in an instructive (academic or athletic), administrative, or diagnostic capacity. Finally, authorized school personnel should be instructed not to re-disclose the information.

If there is any question about the sensitivity of the information, the school nurse should seek the permission of the parent/guardian and student, if appropriate, prior to disclosure to authorized school personnel. Ultimately, however, federal regulations permit information in the student health record to be seen by authorized school personnel on a need to know basis, and the basis for such sharing seems even more compelling when necessary to protect the well-being or safety of the student.

There may be times when a school nurse has the legal obligation to disclose health or related information to protect a student's health or safety. Public policy requires the protection of a patient's right to privacy by medical professionals, unless there is an immediate threat of serious harm to the student or others.

SECTION 16 A & B: REQUIREMENTS THAT COACHES, ATHLETIC TRAINERS, TRAINERS AND VOLUNTEERS A) TEACH STRATEGIES THAT MINIMIZE SPORTS-RELATED HEAD INJURY AND B) PROHIBIT DANGEROUS PLAY

Regulation:

105 CMR 201.006(A)(16) Instructions to coaches, certified athletic trainers, trainers and volunteers a) to teach form, techniques, and skills and promote protective equipment use to minimize sports-related head injury; and b) to prohibit athletes from engaging in any unreasonably dangerous athletic technique

105 CMR 201.012(C)(6): The Athletic Director shall be responsible for “Ensuring that athletes are prohibited from engaging in any unreasonably dangerous athletic technique that endangers the health or safety of an athlete, including using a helmet or any other sports equipment as a weapon...”

105 CMR 201.013(A)(6) & (7): Coaches shall be responsible for (6) Teaching techniques aimed at minimizing sports-related head injury; (7) Discouraging and prohibiting athletes from engaging in any unreasonably dangerous athletic technique that endangers the health or safety of an athlete, including using a helmet or any other sports equipment as a weapon...”

Teaching Form & Techniques Policy

Coaches of Greater Lowell Technical High School are expected to be current with best practices in their sport that reduce the likelihood of head injury. In addition, coaches are prohibited from teaching or promoting dangerous practices such as using a helmet as a weapon. It is expected that all coaches and athletic department staff teach techniques that minimize sports injury and/or concussion such as proper fitting, certified (especially helmets) equipment and protective equipment.

SECTION 17: PENALTIES

Regulation:

105 CMR 201.006(A)(17): Penalties, including but not limited to personnel sanctions and forfeiture of games, for failure to comply with provisions of the school district's or school's policy

Penalties Sample Policy

Greater Lowell Technical High School takes the safety of student athletes seriously. All members of the school staff are expected to follow these policies and protocols to support the health and safety of student athletes. The underlying philosophy of these policies is "when in doubt, sit them out". Failure to comply with the letter or spirit of these policies could result in progressive discipline for staff and/or forfeiture of games. If students or parents have concerns that the policies are being violated, they should contact the Superintendent or Principal and also place their complaint in writing with a request for resolution.

Appendix I

PRE-PARTICIPATION HEAD INJURY/CONCUSSION REPORTING FORM FOR EXTRACURRICULAR ACTIVITIES



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
250 Washington Street, Boston, MA 02108-4619

MAURA T. HEALEY
Governor
KIMBERLEY DRISCOLL
Lieutenant Governor

KATHLEEN E. WALSH
Secretary
ROBERT GOLDSTEIN, MD, PhD
Commissioner
Tel: 617-624-6000
www.mass.gov/dph

Pre-Participation Head Injury/Concussion Reporting Form for Extracurricular Athletic Activities

This form should be completed by the student's parent(s) or legal guardian(s). Please submit this form to the Athletic Director, or official designated by the school, prior to the start of each season a student plans to participate in an extracurricular athletic activity.

Student Information

Student's name	Sex	Date of birth	Grade
School name	Sport(s)		
Home address	Phone number		

<p>Has student ever experienced a traumatic head injury (a blow to the head)? Yes _____ No _____ If yes, when? Dates (month/year):</p>
<p>Has student ever received medical attention for a head injury? Yes _____ No _____ If yes, when? Dates (month/year):</p> <p>If yes, please describe the circumstances:</p>
<p>Was student diagnosed with a concussion? Yes _____ No _____ If yes, when? Dates (month/year):</p>
<p>How long did symptoms last for the most recent concussion? (i.e., headache, difficulty concentrating, fatigue)</p>

Appendix II

REPORT FOR HEAD INJURY DURING SPORTS SEASON



The Commonwealth of Massachusetts
 Executive Office of Health and Human Services
 Department of Public Health
 250 Washington Street, Boston, MA 02108-4619

MAURA T. HEALEY
 Governor

KIMBERLEY DRISCOLL
 Lieutenant Governor

KATHLEEN E. WALSH
 Secretary

ROBERT GOLDSTEIN, MD, PhD
 Commissioner

Tel: 617-624-6000
 www.mass.gov/dph

Report of Head Injury During Sports Season Form

This form is to report head injuries (other than minor cuts or bruises) that occur during a sports season. It should be returned to the athletic director or staff member designated by the school and reviewed by the school nurse.

For Coaches: Please complete this form immediately after the game or practice for head injuries that result in the student being removed from play due to a possible concussion.

For Parents/Guardians: Please complete this form if your child has a head injury outside of school related extracurricular athletic activities.

Student Information

Student's name	Sex	Date of birth	Grade
School name	Sport(s)		
Home address	Phone number		

Date of injury:	Did the incident take place during an extracurricular athletic activity? Yes _____ No _____
If so, where did the incident take place?	
Please describe nature and extent of injuries to student:	

For Parents/Guardians:

Did the student receive medical attention? Yes _____ No _____	Did the student receive medical attention? Yes _____ No _____
--	--

I hereby state that to the best of my knowledge, my answers to the above questions are complete and correct.

Please circle one: Coach or Marching Band Director Parent/Guardian

Name of person completing form (please print): _____

Signature: _____ Date: _____

June 2023

Appendix III

POST SPORTS-RELATED HEAD INJURY MEDICAL



The Commonwealth of Massachusetts
 Executive Office of Health and Human Services
 Department of Public Health
 250 Washington Street, Boston, MA 02108-4619

MAURA T. HEALEY
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Post Sports-Related Head Injury Medical Clearance and Authorization Form

For students: Please have your medical care provider complete this form and return it to your Athletic Director, Athletic Trainer, or School Nurse.

Student Information

Student's name		Date of birth	Grade
Date of injury:	Other relevant diagnosis:		
Asymptomatic: Yes _____ No _____	Prior concussions (i.e., Number of concussions, approximate dates):		

Medical Provider Information

Practitioner's name:		Phone number:
Associated Hospital/Organization:		License number:
Type of Practitioner ¹ : <input type="checkbox"/> Physician <input type="checkbox"/> Licensed Athletic Trainer <input type="checkbox"/> Physician Assistant <input type="checkbox"/> Nurse Practitioner <input type="checkbox"/> Neuropsychologist		
<input type="checkbox"/> I attest that I have received clinical training in post-traumatic head injury assessment and management that is approved by the Department of Public Health ² or have received equivalent training as part of my licensure or continuing education.		
Type of Training completed ³ : <input type="checkbox"/> CDC online clinician training <input type="checkbox"/> MDPH approved Clinical Training <input type="checkbox"/> Other (Please describe):		
Select one of the following: <input type="checkbox"/> I certify that the above named student is cleared to begin a gradual return to play protocol. ⁴ <input type="checkbox"/> I certify that the above named student has completed the necessary stages of a gradual return to play protocol ⁴ and is cleared for full activity without restriction.		

Practitioner's Signature: _____ Date: _____

Name of the physician providing consultation/coordination/supervision (if not the same as signatory):

June 2023

Appendix IV



SPORTS-RELATED HEAD INJURY REGULATIONS: FREQUENTLY ASKED QUESTIONS

The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health

SPORTS-RELATED HEAD INJURY REGULATIONS: FREQUENTLY ASKED QUESTIONS

Revised December 13, 2011 (see questions #27, 28, 29 and 30 for new material)

About the regulations

What are the sports concussion regulations?

Passed in July 2010, the Massachusetts Department of Public Health's regulations ([Presentation on Massachusetts Department of Public Health Regulations 105 CMR 201.000: Head Injuries and Concussions In Extracurricular Athletic Activities \(PPT\) | \(DOC\)](#)) were created with the aim of reducing the risk of sports-related concussions and head injuries among student athletes participating in extracurricular school sports. The regulations outline the responsibilities that schools/school districts, coaches, school nurses, and others in the school community share in the prevention, training, and management of sports concussions.

With these regulations, schools will be able to develop effective policies and protocols for identifying a student athlete with a potential concussion, removing them from play, and ensuring that the student diagnosed with a concussion receives the appropriate care and treatment to return to learn and play.

Which schools are subject to the sports concussion regulations?

The regulations apply to all public middle and high schools and charter schools serving grades six through high school graduation, as well as all other schools subject to the official rules of the Massachusetts Interscholastic Athletic Association (MIAA). However, even if your school is not an MIAA member, you may still decide that you wish to adopt the approach promoted by the regulations for the safety and well-being of your student athlete

Who is responsible for implementing the school's sports concussion policies?

The superintendent or head master, principal, or school leader, should designate the person responsible for the implementation of the school's policies which could be either the athletic director or other school personnel with administrative authority

What sports and activities are covered under these regulations?

All interscholastic athletics are deemed extracurricular athletic activities. These include but are not limited to:

Alpine and Nordic skiing and snowboarding, baseball, basketball, cheerleading, cross country track, fencing, field hockey, football, golf, gymnastics, horseback riding, ice hockey, lacrosse, marching band, rifle, rugby, skating, soccer, softball, squash, swimming and diving, tennis, track (indoor and outdoor), ultimate frisbee, water polo, and wrestling.

What is meant by “extracurricular activities”?

Extracurricular activities are any organized school sponsored athletic activities which generally occur outside of school instructional hours under the direction of a coach, athletic director, or marching band leader. Bands that are not considered a marching band are not covered under the regulations.

Annual Training requirements for school staff, parents, and students

What is the annual training?

The purpose of the annual training is to ensure that those in the school community involved in extracurricular athletic activities know the signs and symptoms of a concussion and how to respond when a student athlete endures a concussion. The Department requires that school personnel, student athletes, and parents complete the annual training every year to understand their roles in creating a safe and healthy environment for student athletes.

Who is required to complete the annual training?

The following people are required to take the annual training:

- Coaches
- *Certified athletic trainers
- Trainers
- School and team physicians
- School nurses
- Athletic directors
- Game officials, including referees and umpires
- Directors responsible for a school marching band
- Volunteers
- Students who participate in an extracurricular athletic activity; and
- Parents of a student who participates in an extracurricular athletic activity;

Other school personnel, such as classroom teachers, physical education teachers and guidance counselors, are not required to complete the annual training. They are only required to complete the annual training if they are involved in extracurricular athletic activities. However, if a school or school district chooses to offer the annual training to classroom teachers, physical education teachers, guidance counselors, or other school personnel, the school district or school at minimum should offer one of the annual trainings approved by the Department as specified on the Department's website.

*Certified athletic trainers are also required to take the clinical training. Please see the “Clinical Training” section for more information.

How can school staff, volunteers, parents, and students complete the annual training?

Online, print, and in-person annual trainings can be found on the DPH [Concussion Trainings](#) webpage under “DPH approved annual training for school staff.” Schools can choose to provide the annual training in a pre-season meeting for parents and students.

Schools may use the agenda and attendance roster as a record of verification for participants who are trained in this type of group setting. Alternatively, schools may use DPH-approved written training materials to meet the annual training requirement. The versions for parents and students are available in English and Spanish. If schools distribute these training materials to parents and students at a pre-season meeting, all parents and students should be asked to sign an acknowledgement verifying that they have reviewed the written materials.

What should we do if a student turns in a concussion training form, but their parent does not? Can we let the student play?

The regulations require concussion training for parents and students. The policies that schools or school districts develop should address this situation, including procedures for outreach to parents who do not return completed forms required for students to participate in extracurricular sports.

Are parents who volunteer as coaches, game officials, or referees required to take the annual training?

Yes, all volunteers participating in school extracurricular athletic activities are also required to complete the annual training approved by the Department found on the Department’s website every year. These volunteers must provide independent verification of completion of the training requirement to the school or school districts.

Clinical Training requirements for clinicians and certified athletic trainers

What is the clinical training?

The purpose of the clinical training is to equip clinicians and certified athletic trainers with the strategies to assess, diagnose, and provide medical clearance to a student athlete with a concussion. The Department requires that those who provide medical clearance for student athletes must complete a Department-approved clinical training in concussion assessment and management or have received an equivalent training as part of their licensure or continuing education. By completing the clinical training, clinicians and certified athletic trainers will be able to provide the necessary guidance and safety recommendations for student athletes to return to play after recovering from a concussion.

Who is required to complete the clinical training?

The following individuals must take the clinical training in order to authorize a student to return to play:

- Licensed physician;
- Licensed athletic trainer in consultation with a licensed physician;
- Licensed nurse practitioner in consultation with licensed physician;
- Licensed physician assistant under the supervision of a licensed physician; or
- Licensed neuropsychologist in coordination with the physician managing the student’s recovery

How can clinicians complete the clinical training to provide medical clearance?

Online and in-person clinical trainings are available on the DPH [Concussion Trainings](#) webpage under “DPH approved clinical training for clinicians providing medical clearance.”

Is the clinical training required for emergency room physicians, urgent care providers, and primary care providers?

Yes. A physician who diagnoses a symptomatic athlete with a concussion in an emergency department or urgent care setting is not able to provide medical clearance unless they examine the athlete again when they have completed the graduated re-entry plan and is symptom-free. In most cases, ER physicians should refer the student with a concussion to their primary care physician or to a concussion specialist for follow-up treatment and medical clearance.

School-based Sports Concussion Policy

When and how often are schools expected to update their policies on sports concussion?

The school or school district shall provide the Department of Public Health with an affirmation, also known as a Letter of Affirmation, on school or school district letterhead that it has reviewed and updated its policies in accordance with the regulations by September 30th, every two years on the odd numbered year for review or revision of its policies.

How can I find the Department of Public Health’s policies on sport concussion care and management?

Our policies called [Head Strong: Guidance for Implementing the Massachusetts Regulations on Head Injuries and Concussions in School Athletics \(PDF\) | \(DOC\)](#) can be found at [Head injury and concussion information for schools, school staff, coaches, athletic trainers, and volunteers](#) under “Additional materials: guidance for schools.” This document lists the components that should be included in school sports concussion policies and provides examples from other schools’ policies.

What are the penalties if the school or school district fails to enforce its sports concussion policy? What are the penalties if a school’s coach, certified athletic trainer, school physician, athletic director, or school nurse fails to enforce the school’s policy on sports concussion?

The regulations 105 CMR 201.006(A)(17) state, “Penalties, including but not limited to personnel sanctions and forfeiture of games, for failure to comply with provisions of the school district’s or school’s policy.” Each school district should delineate what penalties they will have in place for failure to comply with the school or school district’s policy. This should include penalties such as forfeiture of the game (i.e., players do not have current physical examinations, failure of a coach to remove a player with a suspected concussion from the game, coaches’ unwillingness to comply with any aspect of the regulations) and when other penalties will be invoked. The school or school district’s policies and procedures shall be made available to the Department of Public Health and Department of Elementary and Secondary Education upon request.

Reporting and record keeping

What kind of reports are schools required to submit to Department of Public Health per the regulations?

All schools subject to the regulations must provide the following two reports to the Department of Public Health:

Year end reporting form

Every year by August 31st, schools must report the following information to the Department of Public Health:

- Total Number of Report of Head Injury Forms received in the School Year
- Whether or not Report of Head Injury Forms are required of student athletes only or all students
- The number of Report of Head Injury Forms for injuries that occurred during school sports

Learn more about the Year End Reporting Form at [Head injury and concussion information for schools, school staff, coaches, athletic trainers, and volunteers](#) under “Year End Reporting Form.” These forms are updated annually and include other questions that can inform programming and policy to reduce concussions, which are not required by the regulations.

Letter of affirmation

The school or school district shall provide the Department of Public Health with an affirmation on school or school district letterhead that it has reviewed and updated its policies in accordance with the regulations by September 30th, every two years on the odd numbered year for review or revision of its policies.

Learn more about the Letter of Affirmation at [Head injury and concussion information for schools, school staff, coaches, athletic trainers, and volunteers](#) under “Letter of Affirmation.”

What kind of records related to extracurricular sports concussions must schools maintain? How long should schools maintain these records?

In accordance with the regulations (105 CMR 201.016), schools shall maintain the following records for three years or at a minimum until the student graduates:

- Verifications of completion of annual training and receipt of materials;
- Department Pre-participation Forms, or school-based equivalents;
- Department Report of Head Injury Forms, or school-based equivalents;
- Department Medical Clearance and Authorization Forms, or school-based equivalents; and
- Graduated re-entry plans for return to full academic and extracurricular athletic activities.

Schools are not required to submit these records to the Department of Public Health. However, the regulations (105 CMR 201.016) state that the school shall make these records available to the Department of Public Health and Department of Elementary and Secondary Education, upon request or in connection with any inspection or program review.

Who is responsible for keeping these records related to extracurricular sports concussions at the school? Who is responsible for the follow-up on the concussion forms and process?

The regulations (105 CMR 201.015) state that the school nurse is responsible for maintaining the following in the student’s health record:

- Pre-participation Forms, or school-based equivalents, and
- Report of Head Injury Forms, or school-based equivalents

The athletic director is responsible for ensuring that all students are meeting the physical examination requirements consistent with 105 CMR 200.000: Physical Examination of School Children prior to participation in any extracurricular activity.

How should schools maintain these records? Is it part of the student record or is it part of the health record?

It is a matter of school policy to determine if the concussion records are kept in the student record or health record.

With whom can information concerning an athlete’s history of head injury and concussions, graduated re-entry plan, and authorization to return to play be shared?

Informal collaboration occurs on a temporary, as-needed basis for information exchange, as when the school nurse or athletic trainer informs (while adhering to protocols for confidentiality) the physical education teacher that a particular student may not participate in athletic activities because of a recent injury.¹ There may be circumstances in which there is a need to share information in the student health record with authorized school personnel who are providing services to the student — either to enhance the student’s educational progress or protect their safety or well-being. For example, staff may need to be alerted of a student’s signs or symptoms of a medical problem on a need to know basis and offered a course of action. Information should be shared with the athletic trainer, if on staff, to facilitate and coordinate care of a student athlete. Type of disclosure should be made only to authorized school personnel who work directly with the student in an instructive (academic or athletic), administrative, or diagnostic capacity. Authorized school personnel should be instructed not to re-disclose the information. Individual student cases should not under any circumstances be discussed in public areas such as hallways, restrooms, cafeterias, etc. If there is any question about the sensitivity of the information, the school nurse or athletic trainer should seek the permission of the parent/guardian and student, if appropriate, prior to disclosure to authorized school personnel. Ultimately, however, federal regulations permit information in the student health record to be seen by authorized school personnel on a need to know basis, and the basis for such sharing seems even more compelling when necessary to protect the well-being or safety of the student.² (See Chapter 2 of the [Comprehensive School Health Manual](#) for further discussion of this issue). There may be times when a school nurse has the legal obligation to disclose health or related information to protect a student’s health or safety. Public policy requires the protection of a patient’s right to privacy by medical professionals, unless there is an immediate threat or serious harm to the student or others.³

1 Massachusetts Department of Public Health Comprehensive School Health Manual, 2007, p. 2-7

2 Massachusetts Department of Public Health Comprehensive School Health Manual, 2007, p. 2-36

3 Massachusetts Department of Public Health Comprehensive School Health Manual, 2007, p. 2-38.

School staff responsibilities by title

What are the responsibilities of the school Athletic Directors regarding implementing these regulations?

Per the regulations (105 CMR 201.012), the Athletic Director shall:

- Participate in the development and biannual review of the policies and procedures for the prevention and management of sports-related head injuries within the school district or school;
- Complete the annual training;
- Be responsible for (unless school policies and procedures provide otherwise) ensuring that the training requirements for staff, parents, volunteers, coaches, and students are met, recorded, and records are maintained;
- Ensure that all students meet the physical examination requirements consistent with 105 CMR 200.000: Physical Examination of School Children prior to participation in any extracurricular athletic activity;
- Ensure that all students participating in extracurricular athletic activities have completed and submitted Pre-participation Forms, or school-based equivalents, prior to participation each season;
- Ensure that student Pre-participation Forms, or school-based equivalents, are reviewed by coaches so as to identify students who are at greater risk of repeated head injuries;
- Ensure that Report of Head Injury Forms, or school-based equivalents, are completed by the parent or coach and reviewed by the coach, school nurse, certified athletic trainer, and school physician;
- Ensure that athletes are prohibited from engaging in any unreasonably dangerous athletic technique that endangers the health or safety of an athlete, and
- Report annual statistics to the Department of Public Health.

What are the responsibilities of the School Nurses regarding implementing these regulations?

Per the regulations (105 CMR 201.015), the School Nurse shall:

- Participate in the development and biannual review of the policies and procedures for the prevention and management of sports-related head injuries within the school district or school;
- Complete the annual training;
- Review or arrange for the school physician to review completed Pre-participation Forms, or school-based equivalents, that indicate a history of head injury and follow up with parents as needed prior to the student's participation in extracurricular athletic activities;
- Review, or arrange for the school physician to review, Report of Head Injury Forms, or school-based equivalents, and follow up with the coach and parent as needed
- Maintain Pre-participation Forms and Report of Head Injury Forms, or school-based equivalents, in the student's health record;
- Participate in the graduated re-entry planning for students who have been diagnosed with a concussion to discuss any necessary accommodations or modifications;

- Monitor recuperating students with head injuries during the school day on a regular basis and collaborate with teachers to ensure that the graduated re-entry plan for return to full academic and extracurricular athletic activities required by 105 CMR 201.010(E) is being followed; and
- Provide ongoing educational materials on concussion prevention and management to teachers, staff, and students.

What are the responsibilities of the Coaches regarding implementation of the regulations?

Per the regulations (105 CMR 201.013), the coach shall:

- Complete the annual training;
- Review Pre-participation Forms, or school-based equivalents, so as to identify those athletes who are at greater risk for repeated head injuries;
- Complete a Report of Head Injury Form, or school-based equivalent, upon identification of a student with a head injury or suspected concussion;
- Receive and review forms that are completed by a parent which report a head injury during the sports season, but outside of an extracurricular athletic activity, so as to identify those athletes who are at greater risk for repeated head injuries;
- Transmit promptly required Department of Public Health forms to the school nurse or athletic trainer for review and maintenance in the student's health record, unless otherwise specified in school policies and procedures;
- Teach techniques aimed at minimizing sports-related head injury;
- Discourage and prohibit athletes from engaging in any unreasonably dangerous athletic technique that endangers the health or safety of an athlete;
- Identify athletes with head injuries or suspected concussions that occur in play or practice and remove them from play, and
- Communicate promptly with the parent of any student removed from practice or competition and with the athletic director and school nurse.

What are the responsibilities of the Athletic Trainer regarding implementation of the regulations?

Per the regulations (105 CMR 201.014), the Licensed Athletic Trainer shall:

- Participate in the development and biannual review of the policies and procedures for the prevention and management of sports-related head injuries within the school district or school;
- Complete the annual and clinical training;
- Review information from Pre-participation Forms, or school-based equivalents, which indicate a history of head injury and from Report of Head Injury Forms, or school-based equivalents, to identify students who are at greater risk for repeated head injuries;
- Identify athletes with head injuries or suspected concussions that occur in practice or competition and removing them from play; and
- Participate, if available, in the graduated re-entry planning and implementation for students who have been diagnosed with a concussion.

Parent and student responsibilities

What should we do if a student does not turn in their pre-participation permission form seeking information about their past head injuries as required by the law?

You should not permit the student to participate in practice or competition until they submit the form. The head injury policies that schools or school districts develop should consider how to respond to this situation as they would to other situations when students or parents have not submitted required forms or permission slips.

Our school already has a pre-participation permission form that students and parents have to sign. Can we add the pre-participation information required by DPH to our form so we only have to collect one?

Yes. Schools and school districts have the flexibility to use their own forms as “school-based equivalents,” as long as they include all of the information required on the Department forms. Schools or school districts are encouraged to make use of this opportunity to streamline information collection and to avoid unnecessary duplication of effort.

If a student turns in a pre-participation form for fall sports, do they have to turn in another one before the winter or spring season?

Yes. The law and the regulations require that before the start of every sports season, students and parents must complete the pre-participation form or school-based equivalent.

One of my athletes reported a history of multiple concussions on their pre-participation form. Should I let them play this season?

Evidence indicates that youth who have suffered one or more concussions are more likely to suffer a subsequent one. The decision on whether a student who has had multiple concussions should play a sport where there is a risk of another concussion is a complicated one. It should be made only after consultation with the student’s primary care provider; the sports medicine or concussion specialist, if involved; the neuropsychologist, if involved; the appropriate school athletic staff, and the parent. Options may include switching positions, limiting contact in practices, or changing sports altogether to minimize the risk of another injury. The focus should be protecting the health and safety of the student and avoiding long-term consequences that can occur from repeated concussions.

What if a student suffers a head injury outside of school-sponsored extracurricular athletics – do the parent and student have to let the school know?

Yes. Parents must submit a Report of Head Injury Form, or school-based equivalent to the coach, school nurse, athletic trainer, or other school staff designated by school policy when their child suffers from a head injury outside of a school-sponsored extracurricular athletic activity. The school nurse and athletic staff always need to know if it safe for the student to participate in their extracurricular athletic activities.

Exclusion from play

Who should fill out the DPH Report of Head Injury Form?

If the injury occurred during extracurricular sports, the coach, athletic trainer, or their designee should fill out the [Report of Head Injury Form \(PDF\)](#) | [\(DOC\)](#). It should be returned to the athletic director or staff member designated by the school and reviewed by the school nurse or athletic trainer. However if a child sustains a head injury outside of school, the parent should fill out the

Report of Head Injury and submit it to the school athletic department and school nurse to ensure it is safe for the student to return to play. This form should be kept on file at the school and not returned to Department.

What happens if there is disagreement among the coach, certified athletic trainer, parent and the game official regarding whether a player should be removed from a game after a head injury?

In accordance with the regulations, coaches and certified athletic trainers have responsibilities for identifying players with head injuries or suspected concussions and removing them from play. In the event of a disagreement among a coach, certified athletic trainer, a parent, or with a game official, [MIAA Rules and Regulations Governing Athletics](#) state that the athletic trainer or other school medical staff has the final say on medical decisions. The governing rule should always be “when in doubt, sit them out,” and the focus should always be the health and safety of the player.

Graduated re-entry

What is a graduated re-entry plan?

A graduated re-entry plan supports the student’s return to academic activities, and eases the stress of making up past work while engaged in their present work. This plan is developed by the school staff, such as the student’s teachers, guidance counselor, school nurse, athletic trainer, neuropsychologist (if available), parents, and medical provider. The plan must include several components including step-by-step instructions and details for students, parents, and school personnel, time frames for physical and cognitive rest throughout the recovery, and guidance on graduated return to extracurricular athletic activities and classroom studies. An individualized and flexible graduated re-entry plan is strongly recommended because symptoms vary from student to student and often change in type and severity throughout recovery.

If a student has a concussion, does the student have to complete a graduated return to play plan before returning to full participation in their sport?

Yes. The regulations require that if a student is removed from play due to a head injury or suspected concussion, they must receive medical clearance to return to play. This medical clearance can only be provided after the student completes a graduated re-entry plan for return to full academic and athletic activity and is symptom-free at rest. This plan must be developed by the student’s teachers, guidance counselor, school nurse, certified athletic trainer (if available or involved), parent, and the primary care provider or the physician who is managing the student’s recovery.

Do you have any materials on developing graduated re-entry plans for students?

Yes, we have a booklet entitled “Returning to School After Concussion: Guidelines for Massachusetts Schools,” and it can be downloaded from: [Returning to School After Concussion: Guidelines for Massachusetts Schools](#). It includes school accommodations for post-concussion effects, how to establish a graduated re-entry plan to school, and tools and templates for schools to use.

Can a school shorten the time required for the student to complete their graduated return to play plan in order to get them back to extracurricular athletic activities more quickly?

No, the graduated return to play plan should not be shortened. The regulations under 105 CMR 201.010 (E) specifies the components that should be included in the graduated re-entry plan for return to full academic and extracurricular activities. We would never want students returned to

unsafe situations when their brains are still healing. We recommend the following six steps for graduated return to play plan:

Stage	Aim	Activity	Goal of Each Step
1	Symptom-limited activity	Daily activities that do not provoke symptoms.	Gradual reintroduction of work/school activities.
2	Light aerobic exercise	Walking or stationary cycling at slow to medium pace. No resistance training.	Increase heart rate.
3	Sport-specific exercise	Running or skating drills. No head impact activities.	Add movement.
4	Non-contact training drills	Harder training drills (for example, passing drills). May start progressive resistance training.	Exercise, coordination and increased thinking.
5	Full contact practice	Following medical clearance, participate in normal training activities.	Restore confidence and assess functional skills by coaching staff.
6	Return to sport	Normal game play.	

Stage	Aim	Activity	Goal of Each Step
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What if a student is returning to school on a modified schedule but still has concussion symptoms — can they start a graduated return to play plan?

No. Students who still have symptoms should not begin athletic activity. The graduated re-entry plan for return to play should begin only after a student is completely symptom-free at rest. If a student is still having symptoms related to their most recent head injury or concussion, they are not ready to begin a graduated re-entry plan.

In the past, we have had situations where a student’s doctor has cleared them to return to sports, but the school staff noted that the student still had symptoms. In such a situation, who has the final say regarding whether a student can return to play?

In this situation, the school has the final say. Whether a student may participate in a given extracurricular activity is a privilege that may be granted or withheld by a school based on individual circumstances. If these situations arise, the school staff should communicate that the student is not symptom-free to the healthcare provider who provided the medical clearance. It is possible that the physician was not aware of the student’s symptoms when they gave the clearance. If the athlete still has symptoms, the athlete should not return to play. Medical clearance is meant to be provided only after a student has completed their graduated re-entry plan, so we hope that these situations will be rare.

How do we handle students who have had a head injury that do not play extracurricular sports but do participate in physical education class and want to play?

Students with a diagnosed concussion should follow the return to play protocol for sports but modified to fit the activities of the physical education class at the time. If they are doing non-contact activities (i.e., no head trauma risk) they should be allowed to participate because such activities would fit into the first stages of the gradual return to play protocol. If they were playing a contact sport such as basketball, they would need to do modified activity until they reached stage six of the recommended graduated return to play plan.

Medical clearance

How will clinicians who provide medical clearance verify that they have received DPH approved clinical training?

The [Post Sports-Related Head Injury Medical Clearance and Authorization Form \(PDF\)](#) | [\(DOC\)](#) requires written confirmation that the clinician has completed a DPH-approved clinical training. This form is not complete without the medical provider’s verification of completing a clinical training.

What if the school has received a student’s medical clearance on the DPH Medical Clearance and Authorization Form, but the clinician did not verify that they had completed the required DPH-approved clinical training in management and assessment of head injuries and concussions?

Clinicians must affirm that they have completed one of the DPH-approved required trainings or received equivalent training. If no affirmation is received, the medical clearance is not valid.

What is meant by “return to cognitive activity” before medical clearance?

The regulations (105 CMR 201.010(E)(3)) state, “The student must be symptom-free at rest, during exertion, and with cognitive activity in order to complete the graduated re-entry plan and be medically cleared to play...” The DPH Clinical Concussion Expert Group provided the following clarification: “The student diagnosed with a concussion must be completely free of symptoms relating to the most recent injury (i.e., new) at rest in order to begin graduated re-entry to extracurricular activities. The student must then be free of related symptoms during exertion and routine academics in order to complete the graduated re-entry plan and be medically cleared to play.”

The term “symptom-free” refers to a condition where the student is free of all symptoms directly attributable to the most recent concussion. These symptoms may include blurry or double vision, headaches, confusion, balance problems, nausea, vomiting, difficulty with memory or concentration, dizziness, or feeling sluggish or foggy. The term “with cognitive activity” refers to a condition where the student has returned to routine academic activities with no concussion symptoms or new concussion-related academic accommodations.

Does DPH permit a student’s medical clearance from a medical provider to be written on a note or prescription pad?

No, medical clearance should be reported either on the DPH Medical Clearance and Authorization form or school-based equivalent. In order to provide school athletic and health staff with the information they need to monitor an athlete’s recovery, health care providers should use the [DPH Post Sports-Related Head Injury Medical Clearance and Authorization Form \(PDF\)](#) | [\(DOC\)](#) or a school-based equivalent that includes the same information.