

## **SEASON PROTOCOLS**

### **Parents and Students**

All parents and students will have access to the Lake George Education Based Athletic Handbook which includes an explanation of the district's Concussion Management Policy and Return to Play (RTP)/Return to School Protocols (RTS). A parent/guardian must sign a permission slip prior to participation in athletics acknowledging receipt and understanding of the document. The Lake George Education Based Athletic Handbook can be found at [www.lakegeorgeathletics.com](http://www.lakegeorgeathletics.com) (downloadable forms and files) or the athletic director can be contacted in order to obtain a hardcopy.

### **Coaches, Physical Education Teachers, School Nurses**

The Board of Education of the Lake George Central School District recognizes that concussions and head injuries are commonly reported injuries in children and adolescents who participate in sports and recreational activity and can have serious consequences if not managed carefully. Therefore, the District adopts the following policy to support the proper evaluation and management of head injuries.

A concussion is an injury to the brain. A concussion occurs when normal brain functioning is disrupted by a blow or jolt to the head. Recovery from a concussion will vary. Avoiding re-injury and over-exertion until fully recovered are the cornerstones of proper concussion management.

While District staff will exercise reasonable care to protect students, head injuries may still occur. Physical education teachers, coaches, nurses and other appropriate staff receive training to recognize the signs, symptoms and behaviors consistent with a concussion. Any student exhibiting those signs, symptoms or behaviors while participating in a school sponsored class, extracurricular activity, or interscholastic athletic activity, shall be removed from the game, activity, or class and be evaluated as soon as possible by an appropriate health care professional. The coach/physical education teacher or staff members in charge will notify the student's parents or guardians and recommend he or she sees a physician.

If a student sustains a concussion at a time other than when engaged in a school-sponsored activity, the district expects the parent/legal guardian to report the condition to the school nurse so that the district can support the appropriate management of the condition.

If a student is suspected of having a concussion, the student shall not participate in physical activities until authorized to do so by an appropriate health care professional. Any student who continues to have signs or symptoms upon return to activity must be removed from play and be reevaluated by their general physician. The district appointed medical director will make the final decision on return to activity in all unresolved or inconclusive matters that are not resolved by the student's general physician.

Adopted: May 8, 2012

Amended: August 9, 2016

## **AFTER SCHOOL CONCUSSION MANAGEMENT: SPORTS/ACTIVITIES**

All coaches/physical education teachers, school nurses, and appropriate staff members receive appropriate training per New York State guidelines. All suspected concussions will be reported by the coach/physical education teacher or staff member to the nurse, so he/she may follow up with the family and private health care providers as indicated. If a student with a known head injury in the season prior resulted in the student missing the remainder of that season he or she should have medical clearance to participate in the current season and it may be determined that he or she follow the RTP protocol.

### **Athletic Director**

The athletic director will ensure that all coaches/physical education teachers are trained, understand concussions, and familiar with the RTP protocol. The athletic director will make certain all coaches are using the concussion checklist.

### **Staff Roles**

#### **Coach/Physical Education Teacher or Appropriate Staff Member:**

If a trained medical person is not available, the coach/physical education teacher or appropriate staff member will evaluate whether the student has sustained a head injury, by observation, concussion checklist, and collaborative eyewitness accounts from teammates. If the student describes ANY symptoms or demonstrates any signs of a concussion per the concussion checklist:

- The student will be immediately removed from play and will not be allowed to return to play in the current game or practice.
- The student will not be left alone; the coach/physical education teacher or staff member will do his or her best to contact a parent. Close monitoring should be done following injury by the coach or the parent. At any sign of deterioration, medical help must be immediately sought by calling 911 and parents must be notified.

- A player must be medically evaluated by a private physician following a suspected concussion, even if symptoms have resolved or are fleeting.
- A student who receives an injury that results in the appearance of any concussive symptoms may not return to play. The coach will not be making a medical determination for RTP.
- 911 must be called if a student loses consciousness.
- The school nurse will follow-up with the student medically throughout the five-day RTP protocol. If the student exhibits any symptoms of a concussion, the student will not be able to resume the return to play protocol and the nurse will notify the parent and request the student return to his or her physician.

### **School Nurse**

The school nurse will contact the student and parents following a head injury to discuss the severity of the injury. The school nurse will also document whether the parent sought medical care and/or notified a private physician of the injury. If the parent did not seek proper care, the nurse will advise the parent to have the student evaluated as soon as possible. \* The nurse shall receive copies of all physician notes. The school nurse will consult with the coach/physical education teacher or appropriate staff member and fill out an accident report. The school nurse will notify all appropriate staff/faculty about the student's injury to ensure proper management of the injury. The school nurse will notify guidance counselors when a note from a physician states accommodations for learning is recommended. The school nurse will advise the parent to contact the student's counselor if learning problems appear to develop during the healing phase.

When the private physician releases the student for RTP, the school staff shall interpret that as the child's having had 24 hours free from all symptoms and, therefore, has been cleared to begin the five-day graduated stepwise program. The private physician's clearance "without restriction" is not a determination for the student to return to regular play. It is only a clearance for the student to begin the RTP procedures. In order for the student to return to normal activity or competition immediately, **a note from the physician must specify the student never suffered from a concussion.** The nurse will work in conjunction with Athletic Director to inform his or her coach/physical education teacher of the injury. The nurse will follow-up with the student throughout the five -day RTP protocol. If any symptoms reoccur, the student will not be able to continue the RTP protocol and the nurse will contact the parent and advise further follow-up with their physician. The district physician will ultimately be responsible for permitting a student to return to play.

\*Any outside physician visit is subject to parental expense unless district policy suggests differently.

### **BORDERLINE/UNRESOLVED CALLS**

Staff is asked to adhere to the simple philosophy of, "WHEN IN DOUBT, SIT THEM OUT!" If there is any doubt whether a student has sustained a concussion, it will be treated as a concussion. The student will be referred to his or her physician and if the physician notes he or

she never suffered a concussion, the student may return to regular play or competition. Unresolved cases where no outside physician was sought or if evidence of symptoms are still present (e.g. learning difficulties) will be referred to the district appointed medical director and he or she will make the final determination on whether RTP should be followed. The district appointed medical director may request an evaluation of the student and/or ask to evaluate the student to assist in making the final determination.

## **Concussion Management**

### **Return to Play (RTP) Protocol**

There are many risks to premature return to play including: a greater risk for a second concussion because of a lower concussion threshold, second impact syndrome (abnormal brain blood flow that can result in death), exacerbation of any current symptoms, and possibly increased risk for additional injury due to alteration in balance. If the student is having difficulty performing “normal” activities that may affect academics, parents should contact his or her child’s guidance counselor and/or teachers. Return to play following a concussion involves a day-by-day progression once the student is symptom free for a minimum of 24 hours. No student should return to play while symptomatic. Students are prohibited from returning to play the day the suspected concussion is sustained. If there is any doubt as to whether a student has sustained a concussion, it should be treated as a concussion. Once the student is symptom free for 24 hours and has a signed release by the treating physician, he/she may begin the return to play progression below (provided there are no other mitigating circumstances). The Lake George School District will follow guidelines based on the National Federation of State High School Associations NFHS model listed below:

***Step 1:*** Light aerobic exercise- e.g. 5 to 10 minutes on an exercise bike or light jog; no weight lifting, resistance training, or any other exercises

***Step 2:*** Moderate aerobic exercise- e.g. 15 to 20 minutes of running at moderate intensity in the gym or on the field without a helmet or other equipment

***Step 3:*** Non-contact training drills in full uniform. May begin weight lifting, resistance training and other exercises

***Step 4:*** Full contact practice or training

***Step 5:*** Full game play

Once asymptomatic, each step will take place per 24 hour period. If any post concussion symptoms occur while in the program, then the student must be reevaluated by the student’s physician and will return to day one of the program after the student has been medically cleared and asymptomatic for 24 hours.

## **Return to School**

Following a concussion, a student may have difficulty in school. This may include but are not limited to the following symptoms difficulty concentrating, sensitivity to bright lights, and difficulty with tasks that require sustained concentration. It is important that parents, students and the school to work together to develop accommodations to help with the healing process.

### **Return to School (RTS) Protocol**

#### **Responsibilities of the School Nurse after notification of student's concussion:**

1. The athlete will be instructed to report to the school nurse upon his or her return to school.

At that point, the school nurse will:

a) Check-in with the student.

b) Provide individualized health care plan based on the athlete's current condition, recommendations from the athlete's physician and the athlete's medical and educational needs as identified by his/her physician.

2. Notify the student's guidance counselor of the educational needs as identified by his/her physician.

3. Notify the student's PE teacher of any restrictions as identified by the physician or the parents.

4. **Check in with** the athlete at least once per school day during the RTP process. Ask Student to check in during free periods or lunch or if they are experiencing any issues during the day.

#### **Responsibilities of the student's guidance counselor:**

1. Once notified by the school nurse, monitor the student closely and recommend appropriate academic accommodations when he or she exhibits symptoms of post-concussion syndrome.

2. Communicate with the school health office on a regular basis, to provide the most effective care for the student.

3. Communicate with student, student's parent(s), and teachers

#### **Responsibilities of the student's teachers:**

1. When notified by guidance counselor, monitor the student closely and work with the guidance counselor to recommend appropriate academic accommodations when he or she exhibits symptoms of post-concussion syndrome.

2. Communicate with the school health office on a regular basis, to provide the most effective care for the student.

All teachers interacting with the student (including the physical education teacher): Teachers can often help observe changes in a student, including symptoms that may be worsening. Teachers are also in a position to interact regularly with the student's parents, thereby providing a channel to obtain and share information with them about the student's progress and challenges.

### **Responsibilities of the student's parents:**

- 1 . Notify school nurse of concussion (if sustained other than when engaged in school activity) Understand what a concussion is and follow physician's orders.
2. Limit their child's activities that require concentration or mental stimulation, providing cognitive rest. Exposure to loud noises, bright lights, computers, video games, television and phones (including texting) all may worsen the symptoms of concussion. As the symptoms lessen, increased use of computers, phone, video games, etc., may be allowed, as well as a gradual progression back to full academic work.
3. Communicate with their child's teachers, guidance counselor, and nurse if learning difficulties occur.
4. Encourage their child to get plenty of sleep and rest.

### **Responsibilities of the student:**

The student: The affected student should be "in the loop," and encouraged to share his/ her thoughts about how things are going, and symptoms he or she is experiencing. The student should receive feedback from the rest of the team that is appropriate to his/her age, level of understanding, and emotional status.

Resources:

National Federation of State High School Associations - NFHS

<https://www.nfhs.org/sports-resource-content/suggested-guidelines-for-management-of-concussion-in-sports/>

U.S. Department of Health Center for Disease Control and Prevention [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion)

New York State Public High School Athletic Association <http://www.nysphsaa.org/>

Dr. Martin Breen, MD, Glens Falls, NY, Pediatrics, Medical Director, Lake George Central School

Dr. Cynthia Devore, Medical Director, Monroe #1 BOCES

**CONCUSSION CHECKLIST**  
**New York State Public High School Athletic Association**

The NYSPHSAA has endorsed this Concussion Checklist as a valuable tool and recommends use of this checklist, or a similar checklist, by all NYSPHSAA school districts.

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Sport: \_\_\_\_\_

Date of Injury: \_\_\_\_\_ Time of Injury: \_\_\_\_\_

**On Site Evaluation**

Description of Injury: \_\_\_\_\_

\_\_\_\_\_

Was there a loss of consciousness?                      Yes              No              Unclear

Does he/she remember the injury?                      Yes              No              Unclear

Does he/she have confusion after the injury?              Yes              No              Unclear

**Symptoms observed at time of injury:**

Dizziness              Yes              No              Headache              Yes              No

Ringling in Ears              Yes              No              Nausea/Vomiting              Yes              No

Drowsy/Sleepy              Yes              No              Fatigue/Low Energy              Yes              No

“Don’t Feel Right”              Yes              No              Feeling “Dazed”              Yes              No

Seizure              Yes              No              Poor Balance/Coord.              Yes              No

Memory Problems              Yes              No              Loss of Orientation              Yes              No

Blurred Vision              Yes              No              Sensitivity to Light              Yes              No

Vacant Stare/  
Glassy Eyed              Yes              No

\* Please circle yes or no for each symptom listed above.

Other Findings/Comments: \_\_\_\_\_

\_\_\_\_\_

Final Action Taken: Parents Notified \_\_\_\_\_ Sent to Hospital \_\_\_\_\_

Evaluator’s Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ Date: \_\_\_\_\_ Phone No.: \_\_\_\_\_

# CONCUSSION FACT SHEET

Provided by the Center of Disease Control and Prevention

## What is a concussion?

A concussion is a brain injury. Concussions are caused by a bump, blow, or jolt to the head or body. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious.

## What are the signs and symptoms?

You can't see a concussion. Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days after the injury. If your teen reports **one or more** symptoms of concussion listed below, or if you notice the symptoms yourself, keep your teen out of play and seek medical attention right away.

## Symptoms Reported by Athlete

|   |   |
|---|---|
| <ul style="list-style-type: none"><li>• Appears dazed or stunned</li><li>• Is confused about assignment or position</li><li>• Is confused about assignment or position</li><li>• Forgets an instruction</li><li>• Is unsure of game, score, or opponent</li><li>• Moves clumsily</li><li>• Answers questions slowly</li><li>• Loses consciousness<br/>(<i>even briefly</i>)</li><li>• Shows mood, behavior, or personality changes</li><li>• Can't recall events <i>prior</i> to hit or fall</li><li>• Can't recall events <i>after</i> hit or fall</li></ul> | <ul style="list-style-type: none"><li>• Headache or “pressure” in head</li><li>• Nausea or vomiting</li><li>• Balance problems or dizziness</li><li>• Double or blurry vision</li><li>• Sensitivity to light or noise</li><li>• Feeling sluggish, hazy, foggy, or groggy</li><li>• Concentration or memory problems</li><li>• Confusion</li><li>• Just not “feeling right” or is “feeling down”</li></ul> |
|---|---|

## How can you help your teen prevent a concussion?

Every sport is different, but there are steps your teens can take to protect themselves from concussion and other injuries.

- Make sure they wear the right protective equipment for their activity. It should fit properly, be well maintained, and be worn consistently and correctly.
- Ensure that they follow their coaches' rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.

## What should you do if you think your teen has a concussion?

**1. Keep your teen out of play.** If your teen has a concussion, her/his brain needs time to heal. Don't let your teen return to play the day of the injury and until a health care professional, experienced in evaluating for concussion, says your teen is symptom-free and it's OK to return to play. A repeat concussion that occurs before the brain recovers from the first—usually within a short period of time (hours, days, or weeks)—can slow recovery or increase the likelihood of having long-term problems. In rare cases, repeat concussions can result in edema (brain swelling), permanent brain damage, and even death.

**2. Seek medical attention right away.** A health care professional experienced in evaluating for concussion will be able to decide how serious the concussion is and when it is safe for your teen to return to sports.

**3. Teach your teen that it's not smart to play with a concussion.**

Rest is key after a concussion. Sometimes athletes wrongly believe that it shows strength and courage to



play injured. Discourage others from pressuring injured athletes to play. Don't let your teen convince you that s/he's "just fine."

**4. Tell all of your teen's coaches and the student's school nurse about ANY concussion.** Coaches, school nurses, and other school staff should know if your teen has ever had a concussion. Your teen may need to limit activities while s/he is recovering from a concussion. Things such as studying, driving, working on a computer, playing video games, or exercising may cause concussion symptoms to reappear or get worse. Talk to your health care professional, as well as your teen's coaches, school nurse, and teachers. If needed, they can help adjust your teen's school activities during her/his recovery.

**If you think your teen has a concussion:**

Don't assess it yourself. Take him/her out of play. Seek the advice of a health care professional.

**It's better to miss one game than the whole season.**

For more information and to order additional materials *free-of-charge*, visit: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES** CENTERS FOR DISEASE CONTROL AND PREVENTION

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