

VENUS ISD CONCUSSION POLICY

Introduction

The Centers for Disease Control (CDC) estimates that there are approximately 300,000 cases of mild traumatic brain injury (MTBI) or concussions annually in the United States as the result of participation in sports. The Sports Concussion Institute estimates that 10 percent of athletes in contact sports suffer a concussion during a season. A 2006 report estimated that there were 92,000 cases of concussions in American high School sports annually, and that these rates seem to be increasing. Also of concern is the risk of repeated concussions and second impact syndrome to our young athletes. These two problems can have long lasting, and even terminal effects, on the individual. In order to have a standard method of managing concussions to VISD athletes, the following guidelines are intended to serve as a written protocol for concussion management.

The Venus ISD Concussion Policy has been developed to implement the following concussion management guidelines for the student athletes in Venus ISD. This comprehensive guideline is consistent with current standards of care and appropriate medical practices for the student athlete who suffers a concussion in sports. The following guidelines are designed to facilitate proper management of all head injuries and establish a return to play protocol based on peer reviewed scientific evidence under the direction of a medical doctor. These guidelines are intended to serve as a written protocol. The Concussion Oversight Team (COT) is committed to utilizing current standards and methods in its approach to concussion management to include: ImPACT Testing and a progressive return to play protocol.

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Definitions

Concussion or Mild Traumatic Brain Injury (MTBI): While multiple sources of medical literature has a different definition of concussion, the features that are universally expressed in differing definitions is that a concussion 1) is the result of a physical, traumatic force to the head and 2) that force is sufficient to produce altered brain function which may last for a variable duration of time.

In this policy, the definition presented in Chapter 38, Sub Chapter D of the Texas Education Code will be considered appropriate:

“Concussion” means a complex pathophysiological process affecting the brain caused by a traumatic physical force or impact to the head or body, which may:

- A. Include temporary or prolonged altered brain function resulting in physical, cognitive, or emotional symptoms or altered sleep patterns; and
- B. involve loss of consciousness.

Second Impact Syndrome (SIS): Second impact syndrome refers to catastrophic events which may occur when a second concussion occurs while the athlete is still symptomatic and healing from a previous concussion. The second injury may occur within days or weeks following the first injury. Loss of consciousness is not required. The second impact is more likely to cause brain swelling with other widespread damage to the brain. This can be fatal. Most often SIS occurs when an athlete returns to activity without being symptom free from the previous concussion.

What if my child keeps playing with a concussion?

Student athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young student athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the student athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even SIS with devastating and even fatal consequences. It is well known that adolescent or teenage student athletes will often under report symptoms of injuries and concussions are no different. As a result, education of administrators, coaches, parent(s)/guardian(s), and student athletes is the key for the student athlete's safety.

Signs and Symptoms of a possible concussion:

- Severe or increased headache
- Nausea and/or vomiting
- Balance problem or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy or groggy
- Concentration or memory problems
- Confusion
- Does not 'feel right'
- Appears dazed/stunned
- Is confused about assignment or position
- Forgets sports play
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness
- Can't recall events prior to incident
- Can't recall events after the incident
- Shows behavior/personality change

How VISD is working to help prevent concussions:

Venus ISD is working to prevent concussions by making sure that all headgear is National Operating Committee on Standards for Athletic Equipment (NOCSAE) certified and properly fitted for each athlete. If the headgear has certain pieces, such as an air bladder, those pieces are all checked to make sure they are working properly. All helmets worn by athletes will be secured properly while being worn and mouth guards should be worn at all times also. Mouth guards will be checked during season to make sure they can still function properly. Every athlete will also perform a baseline imPACT test before being permitted to participate in athletics. Venus ISD also enforces no hits to the head or any other type of dangerous play.

ImPACT Baseline Testing:

Beginning in the 2016-17 school year, Venus ISD will require all athletes to participate in the imPACT Testing before they can be allowed to participate in a sport. The imPACT baseline testing is good for 2 years. ImPACT Testing measures multiple aspects of cognitive functioning in athletics, including:

- Attention span
- Working memory
- Sustained and selective attention time
- Response variability
- Non-verbal problem solving
- Reaction time

Information on imPACT Testing can be found at the following website, <https://www.impacttest.com>. Available on the website is a video that is recommended to be viewed by the athlete and their parent/guardian on the importance of the imPACT Test. <https://www.impacttest.com/audience/?parents-3>

Evaluation/Response to Suspected Concussion

According to Natasha's Law, TEC Section 38.156, a student 'shall be removed from an interscholastic athletics practice or competition immediately if one of the following persons believes the student might have sustained a concussion during the practice or competition:

1. A coach;
2. A physician;
3. A licensed health care professional; or
4. The student's parent or guardian or another person with legal authority to make medical decisions for the student.'

If the athlete is showing signs of a possible concussion, one of the following assessment tests will be performed:

- Sports Concussion Assessment Tool (SCAT)
- Graded Symptom Checklist (GSC)
- Sideline Functional & Visual Assessments
- On-field Cognitive Testing

The athlete will be observed for 15-20 minutes, with someone by their side the entire time. The athlete will then be re-evaluated using the same assessment as earlier.

If a concussion is suspected, the athlete will be held from competition/practice, and the parent/guardian will be notified. The athlete will be referred to a doctor for evaluation. A form will be given to the parent to take to the doctor for the doctor to fill out, which will be required to be turned in to the staff athletic trainer. The parent/guardian will be given a form for home instructions which will provide more information on how to care for a possibly concussed athlete. Once the athlete has seen a doctor, all paperwork must be turned into staff athletic trainer.

The following steps will be followed before the athlete can begin the required Return to Play protocol.

- 24-48 hours after the concussion, the athlete will be required to take a post-injury ImPACT Test. The results will be sent to the treating physician if they are an ImPACT physician.
- If the athlete did not see an ImPACT physician, the athletic trainer will complete the following:
 - Receive documentation
 - Initiate contact with treating physician to review VISD Concussion Protocols and document results of visit.
- If ImPACT physician deems it necessary to prescribe academic modifications, a meeting needs to be held which includes the following people:
 - Assistant Principal
 - Counselor
 - Parent
 - Athlete

The Assistant Principal will be responsible for communicating modifications with teachers.

- The ImPACT physician will then direct the athletic trainer to administer ImPACT Post Injury Test #2 (usually when athlete reports 2 consecutive days symptom free)
- The athlete will begin the VISD Return to Play Protocol when directed by ImPACT physician. All steps will be documented.
- Once all stages of VISD Return to Play Protocol have been completed symptom free, the athletic trainer will need a written release from attending physician and parent guardian return to play letter
- Athlete will be released to participate when all of the above requirements have been satisfied and documented.

VISD Return to Play Protocol

The following is the VISD Return to Play Protocol for a Concussion. The athlete will begin the RTP Protocol when the athlete has been cleared by the doctor to begin said protocol.

Step 1: Light aerobic exercise - no more than 30 minutes on an exercise bike or walking for no more than 1 continuous mile

Step 2: Moderate aerobic exercise – no more than 30 minutes on an elliptical or no more than 2 miles light running. Non-impact activities are permitted.

Step 3: Running of no more than 3 miles and non-impact, sport-specific activities with equipment if applicable. Individual drills ok, non-contact practice.

Step 4: May begin contact activities and full practice

Step 5: Full Game

If at any time an athlete begins to have any symptoms of a concussion, the student must be asymptomatic for 24 hours before beginning the RTP Protocol from Step 1.

Subsequent Concussions

Any subsequent concussion requires further medical evaluation, which may include a physical examination prior to return to participation. Written clearance from a physician is required as outlined in TEC Section 38.157 before any participation in UIL practices, games, or matches.

**Venus Independent School District
Concussion Release Form**

Part I:

I have evaluated _____, for symptoms of a concussion. He/she is cleared to begin the Venus ISD to play progression on _____.
(Date)

<p>Physician's Name: _____</p> <p>Address: _____</p> <p>Phone Number: _____</p> <p>Physician's Signature: _____</p> <p>Date: _____</p>

Venus ISD Return to Play Progression

- Step 1** – ride stationary bike for no more than 30 minutes or walk for no more than 1 continuous mile.
- Step 2** – light running no more than 2 miles and non-impact activities
- Step 3** – running of no more than 4 miles and non-impact, sport-specific activities with equipment if applicable.
- Step 4** – may begin contact activities, and full practice
- Step 5** – Game

Part II:

Upon completion of the Venus ISD Return to Play Protocol symptom free _____, is cleared to return to full participation without restriction

Physician's Name: _____
Address: _____
Phone Number: _____
Physician's Signature: _____
Date: _____

STUDENT NAME: _____

D.O.I. – _____

Saw Dr. _____ **on** _____

Step 1 – ride stationary bike for no more than 30 minutes or walk for no more than 1 continuous mile.

Date: _____ **Trainer:** _____ **Symptoms: Yes No** **Student:** _____

Step 2 – light running no more than 2 miles and non-impact activities

Date: _____ **Trainer:** _____ **Symptoms: Yes No** **Student:** _____

Step 3 – running of no more than 4 miles and non-impact, sport-specific activities, and wear sport specific equipment.

Date: _____ **Trainer:** _____ **Symptoms: Yes No** **Student:** _____

Step 4 – may begin contact activities, including full practice.

Date: _____ **Trainer:** _____ **Symptoms: Yes No** **Student:** _____

Step 5 – Unrestricted activity / Game

Date: _____ **Trainer:** _____ **Symptoms: Yes No** **Student:** _____

Venus ISD Post Concussion Management Guide for Parent(s)/Guardian(s)

HOME INSTRUCTIONS

_____ has sustained a concussion during _____ on _____ . **DO NOT BE ALONE for the next 24 hours.** To make sure he/she recovers please follow the following important recommendations.

1. Please review the following symptoms. If any of these problems develop, please go to the nearest hospital emergency room or call your family physician.
 - a. Headache that increases in intensity
 - b. Vomiting
 - c. Change in alertness
 - d. Visual disturbances (double, blurred, or fuzzy)
 - e. Bloody or water fluid from ears or nose
 - f. Unequal or dilated pupils
 - g. Slurred or garbled speech
 - h. Hard to awaken or slow to respond
 - i. Convulsions or seizures
 - j. Weakness of facial muscles, arms, or legs
 - k. Persistent ringing of the ears
2. Things that are OK to do:
 - a. Take acetaminophen (Tylenol) if needed
 - b. Use ice packs on head or neck as needed for comfort
 - c. Eat a light diet
 - d. Go to sleep (rest is very important)
 - e. No strenuous activity or sports
 - f. Return to school
3. Things that should not be allowed:
 - a. Eat spicy foods
 - b. Watch TV or play video games of any type (PSP, hand held games, etc.)
 - c. Listen to iPod, talk on telephone, text messaging and playing games on cell phones
 - d. Read
 - e. Use a computer
 - f. Bright lights

- g. Loud noise
- h. Drink alcohol
- 4. Things there is no need to do:
 - a. Check eyes with a flashlight
 - b. Wake up every hour
 - c. Test reflexes