



**Policies and Programs on Concussions for
Public Schools and Youth Sport Programs
(Updated December 2012)**

Introduction

In accordance with SB 771 and HB858 which amended sections 7-432 and 14-501 of the Annotated Code of Maryland, the Maryland State Department of Education (MSDE) has developed policies and provided recommendations for the implementation of concussion awareness programs throughout the state of Maryland for student-athletes, their parents or guardians, and their coaches. The Department has also developed recommendations on the management and treatment of student-athletes suspected or diagnosed with having sustained a concussion. These recommendations, in addition to the accompanying recommended forms, provide guidance for both the student-athlete's exclusion from play as well as their return to the classroom. Finally, the Department addresses the concussion education and tracking requirements of non-school related athletic programs and provides guidance and suggestions for those programs.

The provisions of the policies and plan call for training of every public high school coach as well as providing awareness to all student-athletes and their parents or guardians on:

- The nature and risk of a concussion or head injury
- The criteria for removal from and return-to-play
- The risk of not reporting injury
- Appropriate academic accommodations

The provisions also mandate written verification of:

- The coach receiving concussion awareness training
- The student-athlete and parent or guardian acknowledging receipt of concussion awareness information

In addition, schools shall extend appropriate procedures for academic accommodations to student-athletes who have been diagnosed with a concussion.

Finally, non-school youth athletic activities conducted on school property must provide assurances that concussion information has been provided to all participants and their parents or guardians.

This document has been formulated in conjunction with the Maryland Department of Health and Mental Hygiene, Local County Departments of Education, Maryland Public Secondary Schools Athletic Association, Maryland Athletic-Trainers' Association, Brain Injury Association of Maryland and Health Care Providers who treat concussions.

Coach's Education

The Maryland State Department of Education will alert each local school system of its responsibility to assure that each coach is trained in concussion risk and management. At a minimum, the coach's training shall include:

- The nature of the risk of a brain injury
- The risk of not reporting a brain injury
- Criteria for removal and return to play

One of the following programs is recommended to be used for coach's concussion awareness training:

The National Federation of State High School Associations' (NFHS) online coach education course, *Concussion in Sports-What You Need to Know*. This Center for Disease Control's (CDC)-endorsed program provides a guide to understanding, recognizing and properly managing concussions in high school sports. It is available at www.nfhslearn.com.

The Center for Disease Control's (CDC) tools for youth and high school sports coaches, parents, athletes, and health care professionals provide important information on preventing, recognizing, and responding to a concussion, and are available at http://www.cdc.gov/concussion/HeadsUp/online_training.html. These include *Heads Up to Schools: Know Your Concussion ABCs*; *Heads Up: Concussion in Youth Sports*; and *Heads UP: Concussion in High School Sports*.

Funded by the National Institutes of Health, developed by leading researchers, and validated in a clinical trial, the Oregon Center for Applied Science (ORCAS) ACTIVE® course, provides an online training and certification program that gives sports coaches the tools and information to protect players from sports concussions. Information about the course is available at:

<http://www.orcasinc.com/wp-content/uploads/2011/03/concussion.pdf>.

If the above mentioned programs are not used, at a minimum, the concussion awareness training programs shall include the following components:

- Understanding Concussions
- Recognizing Concussions
- Signs & Symptoms
- Responses and Action Plan

Proof of Completion

Presentation of a certificate of completion from a coaches training course with biennial renewal as a condition of coaching employment provides a simple and clear mechanism for local school systems to assure compliance. (Figure 1)

Best Practices

The following are a list of resources that should be at every practice or competition where a student-athlete could possibly sustain a concussion.

- On field quick reference guide kept in team medical kit or other accessible area
- A CDC clipboard or CDC clipboard sticker (http://www.cdc.gov/concussion/pdf/Clipboard_Sticker~a.pdf) or a clipboard sticker containing the same information
- Copies of the “Medical Clearance for Suspected Head Injury” form

Concussion Awareness for Student-Athletes, Parents or Guardians and School Personnel

Each Maryland public school district shall develop policies that assure student-athletes, parents or guardians, and school personnel receive an informational sheet describing:

- The nature and risk of a concussion or head injury
- The criteria for removal from play and return to play
- The risks of not reporting injury and continuing to play
- Appropriate academic accommodations for diagnosed concussion victims

Informational materials used shall emanate from programs such as, but not limited to:

The Center for Disease Control’s (CDC) tools for youth and high school sports coaches, parents, athletes, and health care professionals provide important information on preventing, recognizing, and responding to a concussion, and are available at http://www.cdc.gov/concussion/HeadsUp/online_training.html. These include *Heads Up to Schools: Know Your Concussion ABCs*; *Heads Up: Concussion in Youth Sports*; and *Heads UP: Concussion in High School Sports*.

The Maryland Public Secondary Schools Athletic Association (MPSSAA) has posted parent and student-athlete information sheets as well as other CDC material on its website: www.mpssaa.org. (Figures 2 and 3)

Best Practices

Suggested opportunities to provide concussion information include but are not limited to:

- In-service training
- Team meetings or practice segment
- Team pre-participation documents
- Student-athlete/Parent orientation
- Coach/Parent preseason meeting
- Athletic trainer tips
- Formal/informal seminars

Required Acknowledgement

Every student-athlete and at least one parent or guardian must verify in writing that they have received information on concussion and sign a statement acknowledging receipt of the information. A recommended verification sheet follows. (Figure 4)

Furthermore, every student-athlete and at least one parent or guardian must verify in writing if the student athlete has a history of traumatic head injury/concussion. A recommended verification sheet follows. (Figure 5)

Removal and Return-to Play

After an appropriate medical assessment, any student-athlete suspected of sustaining a concussion shall immediately be removed from practice or play. The student-athlete shall not return until cleared by a licensed health care provider authorized to approve return to play. Additionally, local school systems shall ensure appropriate academic accommodations and restrictions are made available to student athletes during the recovery phase from a concussion.

To assist student-athletes, parents and school personnel the following sample forms and documents are provided on the MPSSAA website: www.mpssaa.org.

- Medical clearance for suspected head injury (Figure 6)
- Graduated return to play protocol (Figures 7)
- Appropriate Educational Accommodations (Figure 8)
- High School Student-Athlete Probable Head Injury Flow Chart (Figure 9)
- Case Management and Care Coordination – Roles and Responsibilities (Figure 10)
- 2011 Centers for Disease Control and Prevention *Heads Up to Schools: Know your Concussion ABCs*
<http://www.cdc.gov/concussion/HeadsUp/schools.html>

Note: As of this writing, there are no formally approved or licensed certifications of concussion management. As a result, and until such time as a certification exists, each medical professional authorizing return to play must determine whether they are aware of current medical guidelines on concussions evaluation and if concussion evaluation and management fall within their own scope of practice. Any medical professional's concussion education should include at least the following:

- 2010 AAP Sport Related Concussion in Children and Adolescents
<http://aappolicy.aappublications.org/cgi/reprint/pediatrics;126/3/597.pdf>
- 2008 Zurich Concussion in Sport Group Consensus
<http://sportconcussions.com/html/Zurich%20Statement.pdf>
- 2011 Centers for Disease Control and Prevention *Heads Up: Brain Injury in your Practice.*
http://www.cdc.gov/concussion/HeadsUp/physicians_tool_kit.html
- 2011 Centers for Disease Control and Prevention *Heads Up to Clinicians: Addressing Concussion in Sports Among Kids and Teens.*
<http://preventingconcussions.org/>

Youth Sports Programs use of School Property

Youth sports programs seeking to use school facilities must verify distribution of concussion information to parents or guardians and receive verifiable acknowledgement of receipt. In addition, each youth sports program will annually affirm to the local school system of their intention to comply with the concussion information procedures. Materials for use for youth sports are available on the CDC website: [http:// www.cdc.gov](http://www.cdc.gov). (Figure 11)

Figure 1

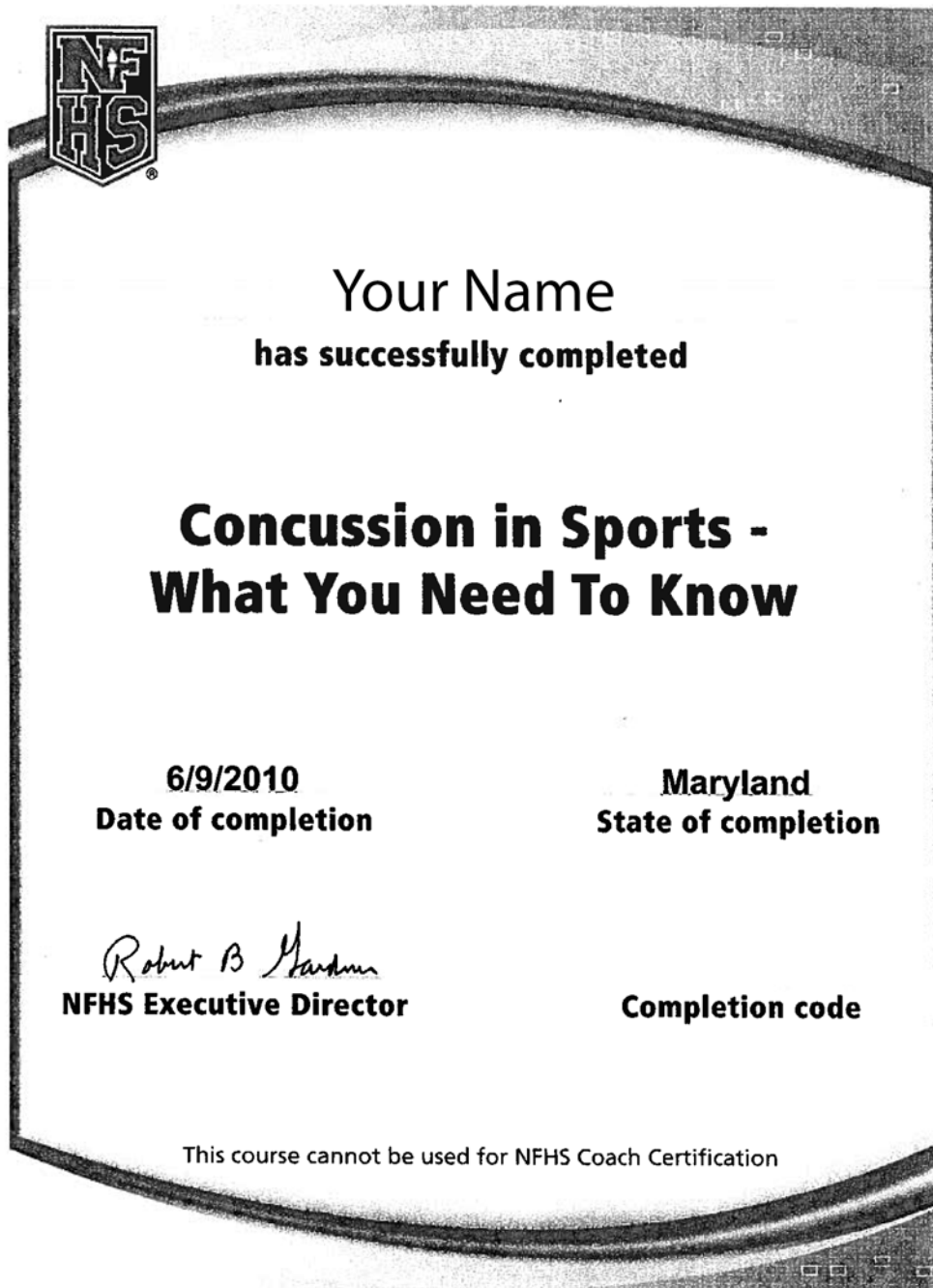


Figure 2

HEADS+UP

CONCUSSION IN HIGH SCHOOL SPORTS

A FACT SHEET FOR **ATHLETES**

What is a concussion?

A concussion is a brain injury that:

- Is caused by a bump, blow, or jolt to the head or body.
- Can change the way your brain normally works.
- Can occur during practices or games in any sport or recreational activity.
- Can happen even if you haven't been knocked out.
- Can be serious even if you've just been "dinged" or "had your bell rung."

All concussions are serious. A concussion can affect your ability to do schoolwork and other activities (such as playing video games, working on a computer, studying, driving, or exercising). Most people with a concussion get better, but it is important to give your brain time to heal.

What are the symptoms of a concussion?

You can't see a concussion, but you might notice **one or more** of the symptoms listed below or that you "don't feel right" soon after, a few days after, or even weeks after the injury.

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Bothered by light or noise
- Feeling sluggish, hazy, foggy, or groggy
- Difficulty paying attention
- Memory problems
- Confusion

What should I do if I think I have a concussion?

- **Tell your coaches and your parents.** Never ignore a bump or blow to the head even if you feel fine. Also, tell your coach right away if you think you have a concussion or if one of your teammates might have a concussion.
- **Get a medical check-up.** A doctor or other health care professional can tell if you have a concussion and when it is OK to return to play.
- **Give yourself time to get better.** If you have a concussion, your brain needs time to heal. While your brain is still healing, you are much more likely to have another concussion. Repeat concussions can increase the time it takes for you to recover and may cause more damage to your brain. It is important to rest and not return to play until you get the OK from your health care professional that you are symptom-free.

How can I prevent a concussion?

Every sport is different, but there are steps you can take to protect yourself.

- Use the proper sports equipment, including personal protective equipment. In order for equipment to protect you, it must be:
 - The right equipment for the game, position, or activity
 - Worn correctly and the correct size and fit
 - Used every time you play or practice
- Follow your coach's rules for safety and the rules of the sport.
- Practice good sportsmanship at all times.

If you think you have a concussion:
Don't hide it. Report it. Take time to recover.

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.

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CENTERS FOR DISEASE CONTROL AND PREVENTION



Figure 3

HEADS x UP CONCUSSION IN HIGH SCHOOL SPORTS

A FACT SHEET FOR **PARENTS**

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.

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

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.

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Figure 4



For official use only: Name of Athlete _____ Sport/season _____ Date Received _____

Concussion Awareness Parent/Student-Athlete Acknowledgement Statement

I _____, the parent/guardian of _____,
Parent/Guardian Name of Student-Athlete

acknowledge that I have received information on all of the following:

- The definition of a concussion
- The signs and symptoms of a concussion to observe for or that may be reported by my athlete
- How to help my athlete prevent a concussion
- What to do if I think my athlete has a concussion, specifically, to seek medical attention right away, keep my athlete out of play, tell the coach about a recent concussion, and report any concussion and/or symptoms to the school nurse.

Parent/Guardian _____ Parent/Guardian _____ Date _____
PRINT NAME SIGNATURE

Student Athlete _____ Student Athlete _____ Date _____
PRINT NAME SIGNATURE

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

For more information visit: www.cdc.gov/Concussion.

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

This form should be completed by the student's parent(s) or legal guardian(s). It must be submitted 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

Name:

Grade:

Sport(s):

Home Address:

Has student ever experienced a traumatic head injury (a blow to the head)? Yes _____ No _____

If yes, when? Dates (month/year): _____

Has student ever received medical attention for a head injury? Yes _____ No _____

If yes, when? Dates (month/year): _____

If yes, please describe the circumstances:

Was student diagnosed with a concussion? Yes _____ No _____

If yes, when? Dates (month/year): _____

Duration of Symptoms (such as headache, difficulty concentrating, fatigue) for most recent concussion:

Parent/Guardian: Name: _____ (Please print)

Signature/Date _____

Student Athlete: Signature/Date _____

Medical Clearance for Suspected Head Injury
To be completed by a Licensed Health Care Provider (LHCP)

Directions: Provide this form to the health care provider evaluating the student's injury. Return form to school nurse immediately. If the student is diagnosed with a concussion, the form will be copied by the school nurse and the original form returned to the parent to use at the follow-up visit that clears the student for participation in athletics.

Student Name: _____

Date of Injury: _____

Initial Evaluation

Date: _____	LHCP* Name: _____	
Signature: _____	Phone: _____	
Diagnosis: <input type="checkbox"/> No Concussion, may immediately resume all activities without restriction <input type="checkbox"/> Concussion *		
Date student may return to school: _____ Note: Student will be removed from all sports and physical education activities at school until medically cleared. School will implement standard academic accommodations unless specific accommodations are requested.		
* (LHCP is a Physician, Nurse Practitioner, Physician's Assistant, Neuropsychologist)		

***Follow-Up Evaluation (Required for Athletes with Concussions)**

All student athletes with concussions must be medically cleared before beginning supervised Gradual Return to Sports /Physical Education Participation (RTP) program. According to COMAR 13A.06.08.01, the following licensed health care providers are permitted to authorize a student athlete to return to play:

- (1) A licensed physician trained in the evaluation and management of concussions;
- (2) A licensed physician's-assistant trained in the evaluation and management of concussions in collaboration with the physician assistant's supervising physician or alternate supervising physician within the scope of the physician assistant's Delegation Agreement approved by the Board of Physicians;
- (3) A licensed nurse practitioner trained in the evaluation and management of concussions;
- (4) A licensed psychologist with training in neuropsychology and in the evaluation and management of concussions; or
- (5) A licensed athletic trainer trained in the evaluation and management of concussions, in collaboration with the athletic trainer's supervising physician or alternate supervising physician and within the scope of the Evaluation and Treatment protocol approved by the Board of Physicians.

I certify that I am aware of the current medical guidance on concussion evaluation and management; the above-named student-athlete has met all of the criteria for medical clearance for his/her recent concussion, and as of the date below is ready to return to a supervised Gradual Return to Sports/Physical Education Participation (RTP) program (lasting a minimum of 5 days.) Note: Students whose symptoms return during the RTP progression will be directed to stop the activity, rest until symptom free. The student will resume activity at the previous stage of the protocol that was completed without recurrence of symptoms. Students with persistent symptom return will be referred to their health care provider for evaluation.

Date: _____ **LHCP Name:** _____

Signature: _____ **Phone:** _____

¹ 2010 AAP Sport-Related Concussion in Children and Adolescents, 2008 Zurich Concussion in Sport Group Consensus.

Figure 7

Graduated Return to Play Protocol

Description of Stage	Date Completed	Supervised by
<p>STAGE 1: LIGHT AEROBIC ACTIVITY <u>Begin stage 1 when:</u> Student is cleared by health care provider and has no symptoms <u>Sample activities for stage 1:</u> 20-30 minutes jogging, stationary bike or treadmill</p>		
<p>STAGE 2: HEAVY AEROBIC AND STRENGTH ACTIVITY <u>Begin stage 2 when:</u> 24 hours have passed since student began stage 1 AND student has not experienced any return of symptoms in the previous 24 hours <u>Sample activities for stage 2:</u> Progressive resistance training workout consisting of all of the following:</p> <ul style="list-style-type: none"> • 4 laps around field or 10 minutes on stationary bike, and • Ten 60 yard sprints, and • 5 sets of 5 reps: Front squats/push-ups/shoulder press, and • 3-5 laps or walking lunges 		
<p>STAGE 3: FUNCTIONAL, INDIVIDUAL SPORT-SPECIFIC DRILLS WITHOUT RISK OF CONTACT <u>Begin stage 3 when:</u> 24 hours have passed since student began stage 2 AND student has not experienced any return of symptoms in the previous 24 hours <u>Sample activities for stage 3:</u> 30-45 minutes of functional/sport specific drills coordinated by coach or athletic trainer. NOTE: no heading of soccer ball or drills involving blocking sled.</p>		
<p>STAGE 4: NON-CONTACT PRACTICE <u>Begin stage 4 when:</u> 24 hours have passed since student began stage 3 AND student has not experienced any return of symptoms in the previous 24 hours <u>Sample activities for stage 4:</u> Full participation in team’s regular strength and conditioning program. NOTE: no heading of soccer ball or drills involving blocking sled permitted.</p>		
<p>STAGE 5: FULL-CONTACT PRACTICE AND FULL PARTICIPATION IN PHYSICAL EDUCATION <u>Begin stage 5 when:</u> 24 hours have passed since student began stage 4 AND student has not experienced any return of symptoms in the previous 24 hours <u>Sample activities for stage 5:</u> Unrestricted participation in practices and physical education</p>		
<p>STAGE 6: RETURN TO GAME <u>Begin stage 6 when:</u> 24 hours have passed since student began stage 5 AND student has not experienced any return of symptoms in the previous 24 hours</p>		

Figure 8

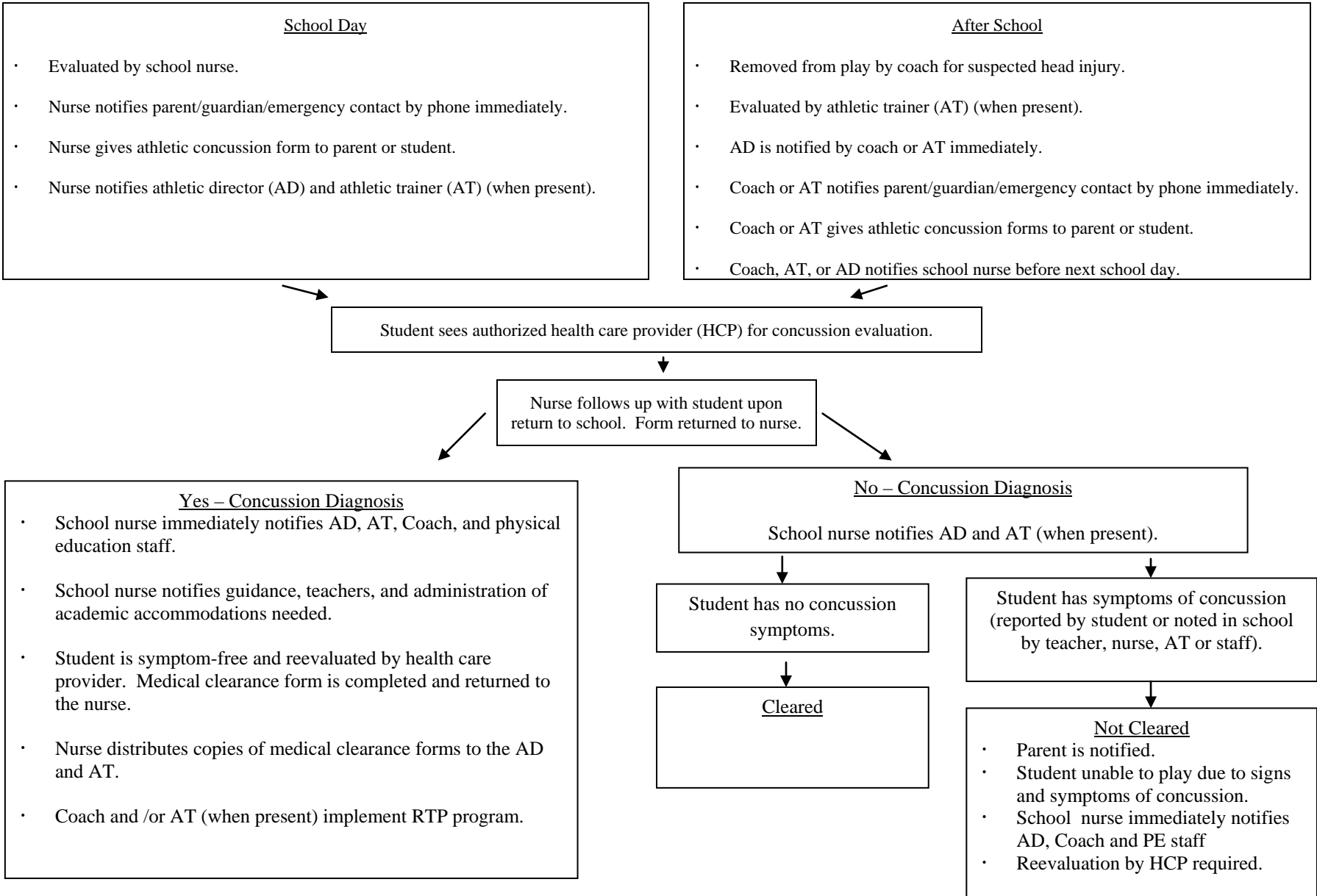
Appropriate Educational Accommodations

Post-Concussion Effect	Functional School Problem	Accommodation/ Management Strategy
Attention/ Concentration	Short focus on lecture, class work, homework	Shorter assignments, break down tasks, lighter work load
“Working” Memory	Holding instructions in mind, reading comprehension, math calculation, writing	Repetition, written instructions, use of calculator, short reading passages
Memory Consolidation/ Retrieval	Retaining new information, accessing learned info when needed	Smaller chunks to learn, recognition cues
Processing Speed	Keep pace with work demand, process verbal information effectively	Extended time, slow down verbal info, comprehension-checking
Fatigue	Decreased arousal/ activation to engage basic attention, working memory	Rest breaks during classes, homework, and exams
Headaches	Interferes with concentration	Rest breaks
Light/Noise Sensitivity	Symptoms worsen in bright or loud environments	Wear sunglasses, seating away from bright sunlight or other light. Avoid noisy/ crowded environments such as lunchroom, assemblies, hallways.
Dizziness/Balance Problems	Unsteadiness when walking	Elevator pass, class transition prior to bell
Sleep Disturbance	Decreased arousal, shifted sleep schedule	Later start time, shortened day
Anxiety	Can interfere with concentration; Student may push through symptoms to prevent falling behind	Reassurance from teachers and team about accommodations; Workload reduction, alternate forms of testing
Depression/Withdrawal	Withdrawal from school or friends due to stigma or activity restrictions	Time built in for socialization
Cognitive Symptoms	Concentrating, learning	See specific cognitive accommodations above
Symptom Sensitivity	Symptoms worsen with <i>over</i> -activity, resulting in any of the above problems	Reduce cognitive or physical demands below symptom threshold; provide rest breaks; complete work in small increments until symptom threshold increases

Source: Sady, M.D., Vaughan, C.G. & Gioia, G.A. (2011) School and the Concussed Youth: Recommendations for Concussion Education and Management. *Physical Medicine and Rehabilitation Clinics of North America*. 22, 701-719. (pp.714)

Figure 9

High School Student-Athlete Probable Head Injury Flow Chart



Case Management and Care Coordination -Roles and Responsibilities

A student with a suspected or diagnosed TBI/concussion may need a designated school case manager to coordinate his/her care. Providing appropriate support for a student returning to school after a TBI/concussion requires a coordinated and collaborative team approach. The Task Force recognizes the student, parent, and school staff as integral partners in the management of TBIs/concussions in the school setting. The roles and responsibilities of team members for the management of students with a suspected or diagnosed TBI/concussion may include, but are not limited to, the following:

Team Members	Role(s)	Responsibilities
Student/Athlete	Notify appropriate school staff and parents/guardians about any head injuries	<ul style="list-style-type: none"> • Increase education about and awareness of TBIs/concussions including an understanding of signs and symptoms. • Immediately inform school staff and parents/guardians in the event of injury and suspected TBI/concussion. • Participate in care planning, including accommodations for return to learn and return to play authorization.
Parent/Guardian	Integral part of the process of planning, and coordination of care for the health and safety of the student	<ul style="list-style-type: none"> • Increase education about and awareness of TBIs/concussions; • Complete and return all necessary pre-participation forms and sports physical forms for the student annually. • Provide the school with emergency contact information that is accurate and updated as needed. • Provide the school with complete and accurate medical information related to the student’s TBI/concussion including written health care provider documentation. • Communicate with the school nurse and school staff to develop the plan of care for the student.

Team Members	Role(s)	Responsibilities
School Administrator	Leader of the school team	<ul style="list-style-type: none"> • Oversee/ensure implementation of school policies and protocols; • Communicate the importance of concussion management to all necessary school staff. • Encourage communication between all team members; and • Assure effective implementation of Return to Play (RTP) accommodations for students with concussion.
Private Medical Provider	Provide guidance and directives for the student's treatment of TBI/concussion in the school setting	<ul style="list-style-type: none"> • Provide written signed orders regarding restrictions and monitoring for specific symptoms that the provider should be made aware of by family and/or school nurse/school staff. • Provide the local school system-specific graduated return to activity schedule to follow, or approve use of the district's graduated return to activity schedule if deemed appropriate. • Provide written clearance/authorization for return to full activities. (In order for a student to return to athletic activities after he or she has sustained a concussion during school athletic activities, an evaluation must be completed and signed by a licensed physician.)
School Nurse (Registered Nurse)	Leader of the school health nursing team; may serve as a liaison between health care professionals and school- based personnel.	<ul style="list-style-type: none"> • Provide education about concussion management to other team members as indicated. • Interpret written orders from the health care provider including the return to school order; seek clarification if needed. • Institute health-related accommodations as needed in school; • Monitor student's status and progress in school and report changes to parent/guardian and health care provider. • Communicate status and progress to the athletic department and other school staff on a need-to-know basis. • Participate in school support team meetings and 504 Plans. • Document nursing care and communication with all team members.

Team Members	Role(s)	Responsibilities
School Counselor	Provide support to the student and family and assist with academic accommodations as needed	<ul style="list-style-type: none"> • Communicate with school nurse about student and coordinate information for teaching staff about student's return/treatment. • Reinforce student's need for academic rest as ordered. • Convene team meetings as needed per student's status. • Suggest necessary accommodations required to ensure student's success based on information provided by school nurse and health care professional if needed. • Communicate with teachers and monitor effectiveness of classroom accommodations.
School Teachers (General Education and Special Education Teachers)	Ensure appropriate instruction and supports are provided for the student during the transition back to school	<ul style="list-style-type: none"> • Understand the signs and symptoms of TBI/concussion and the potential impact on academic performance. • Provide support for successful re-entry to school. • Participate as a member of the student services support team • Administer necessary testing, if special educator. • Assist in development and implementation of 504 Plan or IEP if applicable. • Assist in the development of short-term, appropriate accommodations in consultation with the school team. • Understand the range of accommodations needed for the student during the school day, including, but not limited to, shorter school day, rest periods, extended time for tests and assignments, copies of notes, alternative assignments, minimizing distractions, audio taping classes, or peer note taking. • Communicate student's progress to school team.
School Psychologist	Resource consultant for the school team	<ul style="list-style-type: none"> • Consult with school team members regarding student(s) with prolonged or complex recovery. • Provide educational and psychological assessments as determined by the school team. • Consult with school team regarding educational planning and accommodations for the student with TBI/concussion.

Team Members	Role(s)	Responsibilities
Speech-Language Pathologist	Supports transition of the student back to school (e.g., return to learn) when necessary	<ul style="list-style-type: none"> • Evaluate the student’s current status and needs, including medical information, and provide appropriate recommendations if necessary. • Assist in the development of a transition plan back to school, as needed. • Review any prior testing performed in the medical setting post-injury and administer additional testing as needed. • Assist in development of an Individualized Education Program (IEP) if applicable. • Suggest appropriate instructional accommodations and modifications for student if applicable. • Provide speech and/or language services if applicable and monitor student progress. • Assist in promoting awareness of TBI/concussion symptoms.
Athletic Director	Provides leadership and supervision of the interscholastic athletic program.	<ul style="list-style-type: none"> • Ensure concussion materials are provided to coaches, athletes, and parents. • Provide concussion materials to coaches, athletes, and parents. • Ensure athletes and parents have signed forms acknowledging receipt of concussion information. • Ensure all coaches have completed annually a recognized concussion training course. • Collect all Student Accident/Concussion forms from coaches. • Provide a copy of the Student Accident/Concussion form to the principal or designee. • Provide a copy of the Student Accident/Concussion form to the school nurse. • When athlete returns, collect the signed Return to Play clearance from the coach. • Provide a copy of the Return to Play clearance form to principal. • Provide a copy of the Return to Play clearance form to school nurse.

Team Members	Role(s)	Responsibilities
Certified Athletic Trainer	Under the supervision of a qualified physician can assist the medical director and coach by identifying a student with a potential concussion and evaluate the student diagnosed with TBI/concussion in progress of return to athletic activities based on private medical provider orders and/or district protocol.	<ul style="list-style-type: none"> • Educate students and staff in concussion management and prevention. • Oversee student athletes taking baseline validated standardized computerized tests if permitted by district policy. • Evaluate student-athletes for signs and symptoms of a concussion when present at athletic events. • Observe for late onset of signs and symptoms, and refer as appropriate. • Evaluate the student to determine if injury warrants emergency transport per district policy. • Refer parents/guardians of student athletes believed to have sustained a concussion to their medical provider. • Provide parents/guardians with oral and/or written instructions on observing the student for concussive complications that warrant immediate emergency care. • Assist in implementation of accommodations for the student-athlete. • Monitor the student's return to school activities and communicate with the supervising medical director, school nurse, parent/guardian, and appropriate school staff.
Physical Education Teacher	Provide appropriate instruction and supports for student's transition back to school and during physical education class activities	<ul style="list-style-type: none"> • Recognize signs and symptoms of TBI/concussion and remove student from activities immediately if student presents with signs and symptoms. • Contact the school nurse or certified athletic trainer (if available) for assistance with any student injury (<i>thus transferring responsibility of treatment and parent notification...</i>). • Communicate with school administrator and school nurse regarding suspected TBI/concussion and any head injuries occurring in physical education class and complete required school incident report form. • Verify written authorization for student to participate in physical education activities post-TBI/concussion. • Adhere to the school's gradual return to play protocol.

Team Members	Role(s)	Responsibilities
Coaches	Provides leadership and supervision of the interscholastic sport team to which he/she is assigned.	<ul style="list-style-type: none"> • Adhere to the local school system’s policies regarding concussion management and ensure coaching staff, assistant coaches, parents/guardians, and students are educated about concussions and local policies/procedures. • Provide students and parents/guardians with concussion information, prior to sports participation. • Review safety techniques, sportsmanship, and proper equipment with student athletes. • Understand the sport and create drills, practice sessions, and instruction to reinforce safety. • During practice and /or contests, remove an athlete if a TBI/concussion is suspected. • Contact parent/guardian to pick up student or call 911 if appropriate or parents cannot be located. • Provide parent and Emergency Medical Technician (EMT) with information about injury or suspected TBI/concussion including signs and symptoms observed. • Complete Student Accident/Injury Form or other school system form regarding TBI/concussion. • Provide a copy of the completed student accident/injury form to athletics director. • Follow up with parents/guardian regarding student athlete’s well-being. • Collect the signed Return-to-Play clearance and authorization form. • Provide a copy of the Return to Play clearance form to athletics director and communicate with school administrator and school nurse.

Heads Up: Concussion in Youth Sports


[Spanish version \(/concussion/HeadsUp/spanish/youth.html\)](/concussion/HeadsUp/spanish/youth.html)

It's Better to Miss One Game Than the Whole Season

To help ensure the health and safety of young athletes, CDC developed the *Heads Up: Concussion in Youth Sports* initiative to offer information about concussions to coaches, parents, and athletes involved in youth sports. The *Heads Up* initiative provides important information on preventing, recognizing, and responding to a concussion.







Heads Up Tool Kit for Youth Sports




- [Activity Report](#)  [PDF 2MG] (</concussion/pdf/Heads Up Activity Report Final-a.pdf>)
- See also [Heads Up: Concussion in High School Sports \(/concussion/headsup/high_school.html\)](#).

For additional resources (videos, promotional materials, etc.) and to order free materials, [click here \(/concussion/sports/resources.html\)](/concussion/sports/resources.html)




Information for Coaches

- [Online Training Course for Youth Sports \(/concussion/HeadsUp/online_training.html\)](/concussion/HeadsUp/online_training.html)
- [Fact Sheet](#)  [PDF 206KB] (/concussion/pdf/coaches_Engl.pdf)
- [Clipboard](#)  [PDF 202KB] (/concussion/pdf/clipboard_Eng.pdf)
- [Poster](#)  [PDF 328KB] (/concussion/pdf/poster_Eng.pdf)
- [Quiz](#)  [PDF 170KB] (/concussion/pdf/quiz_Eng.pdf)

Information for Athletes

- [Fact Sheet](#)  [PDF 201KB] (/concussion/pdf/athletes_Eng.pdf)
- [Poster](#)  [PDF 328KB] (/concussion/pdf/poster_Eng.pdf)
- [Quiz](#)  [PDF 170KB] (/concussion/pdf/quiz_Eng.pdf)

Information for Parents

- [Fact Sheet](#)  [PDF 250KB] (/concussion/pdf/parents_Eng.pdf)
- [Magnet](#)  [PDF 106KB] (/concussion/pdf/magnet_Eng.pdf)
- [Quiz](#)  [PDF 170KB] (/concussion/pdf/quiz_Eng.pdf)

If you think your athlete has sustained a concussion...don't assess it yourself.

Take him/her out of play, and seek the advice of a health care professional.