The Board of Education recognizes that concussions and head injuries are the most 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 and guidelines to support the proper evaluation and management of head injuries.

A concussion is a reaction by the brain to a jolt or force that can be transmitted to the head by an impact or blow occurring anywhere on the body. Essentially, a concussion results from the brain moving back and forth or twisting rapidly inside the skull. The symptoms of a concussion result from a temporary change in the brain’s function. Recovery from concussion will vary. Avoiding re-injury and overexertion 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 will receive training to recognize the signs, symptoms or behaviors consistent with a concussion. Any student exhibiting those signs, symptoms or behaviors while participating in a school-sponsored class, extracurricular activity, or interscholastic activity shall be removed from the game or activity and be evaluated as soon as possible by an appropriate health care professional. The coach, school nurse, or other District employee in charge of, or supervising the activity, will notify the student’s parents or guardians and recommend appropriate monitoring to them.

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 appropriate school nurse so that the District can support the appropriate management of the condition.
In the event of any concussion, regardless of where it was sustained, the student shall not return to school or activity unless authorized to do so by an appropriate health care professional. The school’s chief medical officer will make the final decision in return to activity including physical education class and interscholastic athletics. Any student who continues to exhibit signs or symptoms upon return to activity must be removed from play and re-evaluated by the school’s chief medical officer.

**CONCUSSION GUIDELINES AND PROCEDURES**

**Education**

Each school coach, physical education teacher, and nurse who works with and/or provides instruction to pupils engaged in school sponsored athletic activities, shall complete, on a biennial basis, a course of instruction relating to recognizing the symptoms of mild traumatic brain injuries and monitoring and seeking proper medical treatment for pupils who suffer mild traumatic brain injuries.

Education of parents should be accomplished through preseason meetings and/or information sheets provided to parents. Education should include, but not be limited to the definition of concussion, signs and symptoms of concussion, how concussions may occur, management of the injury and the protocol for return to school and return to activity.

**Concussion Management Team (CMT)**

The District will assemble a concussion management team (CMT) consisting of the Director Of Physical Education, Health and Athletics, school nurse, coaches, athletic trainer (when applicable), and the school medical officer. The CMT should coordinate any necessary training for all administrators, teachers, coaches and parents. Training should include: signs and symptoms of concussions, post concussion and second impact syndromes, return to play and school protocols, and available area resources for concussion management and treatment. Particular emphasis will be placed on the fact that no athlete will be allowed to return to play the day of injury and also that all athletes
should obtain appropriate medical clearance prior to retuning to play or school.

The CMT will act as a liaison for any student returning to school and/or play following a concussion. The CMT will review and/or design an appropriate re-entry plan for the student while the student is recovering. This will include informing administrators, teachers and guidance counselors of the progress of the recovering student.

**Return to Play Procedure**

During the recovery period, in the first few days following the injury, it is important to emphasize to the student and parent/guardian that physical and cognitive rest is required. Activities that require concentration and attention may exacerbate the symptoms and, as a result, delay the recovery. Rest at home is encouraged at least for the day following the injury. When a student is asymptomatic for at least 24 hours, they may be re-evaluated by the school medical officer. If cleared, the student may begin the return to play progression below.

Return to play following a concussion involves the following five-step process. This progression will be a minimum of 5 days (24 hours between steps) for return to competition play.

**Step 1:** Light aerobic exercise for a duration of no more that 10 minutes with the goal to increase the heart rate. Examples: stationary bike, walking, light jogging.

**Step 2:** Moderate sport specific exercise with limited body and head movement no longer than 30 minutes in duration. Examples: stick and/or ball skills, moderate jogging, brief running, moderate intensity stationary bike.

**Step 3:** Non-contact exercise of greater intensity and time frame. Examples: running, high intensity stationary biking, the player’s regular weightlifting routine and non-contact sport specific drills.

**Step 4:** Normal practice routine.
Step 5: Game play (full competition).

If any post concussion symptoms occur while in the five step program, the student should drop back to the previous asymptomatic level and try to progress again after a further 24 hour period of rest has passed. The student should be symptom free without the use of any medication to mask the pain. The program, and return to play procedure, will be monitored by the CMT and the appropriate coach.

These protocols will be followed by all Red Hook Central School District health care professionals (school physician, nurses, athletic trainer), coaches and teachers who are responsible for returning a student to active participation after a concussion, as appropriate. The District's concussion management and return to play procedure is to be followed even if the student presents a prescription and/or note form his/her primary care physician or emergency room physician authorizing a return to play or other physical activity sooner than required by this policy.

1ST READING: 7/5/12
2ND READING & ADOPT: 9/5/12