



Concussion Protocol

Purpose: Provide a systematic comprehensive post-concussion care procedure that will directly assist with the implementation of the most appropriate treatment plan; which will promote a more effective recovery, provide educational resources related to concussion management, and reduce the risk of sustaining a more significant brain injury from occurring.

1. Pre-Season Baseline Neurocognitive Testing:

- Pre-season baseline ImPACT testing is available to participating student-athletes and will be scheduled with activity program at designated school.
- Baseline ImPACT test scores are valid for 2 consecutive years; student-athletes will need to re-test if continuing athletic participation beyond this period.
- Priority baseline testing will be offered to those high-impact and collision activities.

2. Concussion Education:

- Concussion education material will be available for student-athletes, parent(s)/guardian(s), and coaches through healthcare providers.
 - Additional information can be found on the MSHSL or CDC website.
- Educate student-athletes, parent(s)/guardian(s), and coaches in recognizing the potential signs and symptoms of a concussion and the risk of continuing to participate while experiencing any those.
- Per MSHSL rules, all coaches/officials will be up to date with mandatory concussion education training.

3. Identification, Diagnosis, & Evaluation of Concussions:

- Coaches and officials have necessary training in identifying a potential head injury.
 - Student-athlete will be removed from activity immediately and referred to an Appropriate Health Care Provider (AHCP) for further evaluation.
- Medical personnel on site will provide an appropriate evaluation utilizing concussion assessment tools that may include, but not limited to;
 - Standard Concussion Assessment Tool- 5th Edition (SCAT5), Balance Error Scoring System (BESS), Vestibular/Ocular-Motor Screening (VOMS)

- If medical personnel is not readily available, coaches/officials will prohibit the student-athlete from participating for the durations of the event. The student athlete will be required to follow up with an appropriate healthcare professional before returning to play.
- Parents/Guardians will be notified following the initial injury.
- If a student-athlete is diagnosed with a concussion, he/she must be removed from participation and may not return to play for a minimum for 24-hours. The athlete may not return until cleared by an AHCP for a gradual return to play protocol as lined out by the MSHSL.

4. **Post-Injury Management & Treatment Plan:**

- **Acute Injury:**
 - Once a student-athlete has been diagnosed with a concussion, he/she will be removed from athletic participation immediately and will not be allowed to return to play.
 - **“When in doubt, sit them out.”**
 - Student-athlete will be monitored regularly.
 - Medical personnel will routinely monitor signs and symptoms for duration of the event.
 - If necessary, medical personal will determine if student-athlete should seek immediate emergency medical care.
 - Before being discharged by the medical personnel, parent/guardian/coach will be provided with information necessary to monitor signs and symptoms including red flags indicating need to seek emergency care.
 - If necessary, the onsite medical personnel will reach out to the appropriate health care provider of the student-athlete to facilitate continuation of care.
- **Follow-up Treatment Plan:**
 - AHCP will continue to coordinate ongoing care between student-athlete, parents/guardians, MD, teachers/counselors, school health office, and coaches throughout the recovery process.
 - Student-athletes who have been diagnosed with a concussion require physical and cognitive rest to ensure an effective and efficient recovery.
 - If recovery is prolonged, for more than 10-14 days, the student-athlete will be referred to a concussion specialist.

5. Return to Activities:

- Academics:
 - Once the student-athlete is symptom free for a minimum of 24-hours at rest, academic accommodations will be decreased until granted activity clearance.
- Athletics:
 - Once the student-athlete is symptom free for a minimum of 24-hours at rest, the AHCP will begin return to play protocol indicated by MSHSL.
 - The athletic trainer at each respective school has the authority to extend the length of time for the return to play if they deem it in the best interest of the student-athlete.

MSHSL Return to Play Protocol:

1. No Activity, complete rest until all symptoms have resolved. Once asymptomatic, proceed to level 2.
2. Light, aerobic exercise such as walking or stationary cycling. No resistance training.
3. Sports Specific Exercise (e.g. skating in hockey, running in soccer). Progressive addition of resistance training at steps 3 or 4.
4. Non-contact training drills
5. Full contact training after medical clearance.
6. Game play.



Concussion Management- Home Care Instructions

I believe _____ sustained a concussion on _____.

To make sure he/she recovers, please use the following important recommendations as a guide to proper care. If any of the signs and/or symptoms below develop before the follow-up visit, please call 911, local emergency medical services, or your family physician for immediate medical care.

RED-FLAG SIGNS AND SYMPTOMS: *SEEK EMERGENCY CARE IMMEDIATELY*

- Loss of or fluctuating level of consciousness
- Seizures
- Increasing confusion
- Noticeable changes in personality
- Numbness/tingling in the arms or legs
- Dilated or unequal pupils
- Severe nausea/vomiting
- Slurred speech or inability to speak
- Inability to recognize people or places
- Worsening or severe headache

DO:	DO NOT:
<ul style="list-style-type: none">• REST is BEST• Use Tylenol (acetaminophen)• Use ice pack on head/neck ~20 min• Avoid things that exacerbate symptoms• Participate in social activities as tolerated	<ul style="list-style-type: none">• Wake-up every hour• Use Aspirin, Ibuprofen, Aleve, Advil, or other NSAIDs.• Consume alcohol• Drive or operate heavy machinery

Recommendations provided by _____

Please feel free to contact me if you have any questions. I can be reached at _____

Please follow up with _____

Signature: _____ Date: _____



CONCUSSION RETURN TO PLAY PROTOCOL:

Return-to-play decisions are complex. In accordance to the MSHSL, a student-athlete may be cleared to return to competition when the student-athlete is free of all signs and symptoms of a concussion at rest and during exercise. Once free of symptoms and signs of concussion, a stepwise symptom free exercise process is required before a student-athlete can return to competition.

- Each step requires a minimum of 24 hours.
- The student-athlete can proceed to the next level only if he/she continues to be free of any symptoms and or signs at the current level.
- If any symptoms or signs recur, the student-athlete drops back to the previous level.
- After a concussion has been diagnosed, only an Appropriate Health Care Professional can authorize a subsequent return to play.

The return-to-play after a concussion is a step-wise process.

EACH STEP REQUIRES A MINIMUM OF 24 HOURS.

STEPS:	DATE:	COMMENTS:
No Activity Symptom free for 24-hours		
ImPACT Post-Injury Test (If applicable)		
Light Aerobic Exercise (walking/stationary bike/elliptical/no resistance training)		
Sport Specific Exercise (skating in hockey, running in soccer, progress with aerobic/anaerobic resistance training)		
Non-contact Training Drills		
Full-contact Training Drills		
Game Play		



Academic Accommodations Post-Concussion

Patient Name: _____

Date of Birth: _____

Students-athletes recovering from concussions often exhibit cognitive symptoms that make attending school and learning difficult. They may not be able to attend school or only partial days. Some symptoms that could affect performance in the classroom include: sensitivity to light and noise, headache, trouble focusing, concentrating, or remembering, and difficulty looking at a screen. The accommodations below often help reduce the symptoms and allow them to return to school quicker. Compliance with these accommodations allows the brain to recover more quickly even if it appears the student-athlete is symptom free.

Attendance Restrictions:

_____ No School.

Date: _____ to _____.

_____ Modified Days.

Date: _____ to _____.

_____ Full Days as Tolerated.

Other Accommodations:

_____ Allow student to wear sunglasses/hat

_____ Allow pre-printed notes

_____ Limit exposure to screens/projectors

_____ Allow breaks if symptoms worsen

_____ Change classroom seating

_____ Avoid noisy/busy environments

including _____

_____ Allow early/late passing time between
classes

Academic Testing:

_____ No tests or quizzes. Please reschedule.

Date: _____ to _____.

_____ Allow extra time to complete test(s).

_____ Administer test(s) in a quiet
environment.

Thank you for your assistance in helping the concussed student-athlete with the above school accommodations.

Medical Provider: _____ Date: _____