

# CONCUSSION

## A Fact Sheet for Coaches

### WHAT IS A CONCUSSION?

A concussion is a brain injury that:

- Is caused by a blow to the head or body.
  - From contact with another player, hitting a hard surface such as the ground, ice or floor, or being hit by a piece of equipment such as a bat, lacrosse stick or field hockey ball.
- Can change the way your brain normally works.
- Can range from mild to severe.
- Presents itself differently for each athlete.
- Can occur during practice or competition in ANY sport.
- **Can happen even if you do not lose consciousness.**

### CIF Bylaw 313 -Play It Safer

A student-athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time for the remainder of the day. A student-athlete who has been removed from play may not return to play until the athlete is evaluated by a licensed health care provider trained in the evaluation and management of concussion and receives written clearance to return to play from that health care provider.

### WHAT ARE THE SYMPTOMS OF A CONCUSSION?

You can't see a concussion, but you might notice some of the symptoms right away. Other symptoms can show up hours or days after the injury. Concussion symptoms include:

- Amnesia.
- Confusion.
- Headache.
- Loss of consciousness.
- Balance problems or dizziness.
- Double or fuzzy vision.
- Sensitivity to light or noise.
- Nausea (feeling that you might vomit).
- "Don't feel right."
- Feeling sluggish, foggy or groggy.
- Feeling unusually irritable.
- Concentration or memory problems (forgetting game plays, facts, meeting times).
- Slowed reaction time.

Exercise or activities that involve a lot of concentration, such as studying, working on the computer, or playing video games may cause concussion symptoms (such as headache or tiredness) to reappear or get worse.

### WHAT CAN HAPPEN IF I KEEP PLAYING A STUDENT WITH A CONCUSSION OR RETURNS TOO SOON?

Athletes with the signs and symptoms of concussion should be removed from play immediately (CIF Bylaw 313). Continuing to play with the signs and symptoms of a concussion leaves the young 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 athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athlete will often under report symptoms of injuries and concussions are no different. It is your duty as a coach to place the health and safety of your student-athletes ahead of winning.

### WHAT A COACH SHOULD DO IF YOU THINK YOUR PLAYER HAS SUFFERED A CONCUSSION

Any athlete even suspected of suffering a concussion **must** be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without written medical clearance. The new "CIF Bylaw 313" now requires the consistent and uniform implementation of long and well-established return to play concussion guidelines that help ensure and protect the health of student-athletes. A coach's job is to ensure everyone follows these guidelines.



**IT'S BETTER TO MISS ONE GAME THAN THE WHOLE SEASON.  
WHEN IN DOUBT, GET CHECKED OUT.**



For more information and resources, visit [www.cifstate.org/health\\_safety/](http://www.cifstate.org/health_safety/) & [www.cdc.gov/concussion](http://www.cdc.gov/concussion)



# Concussion Certification for Coaches

California law mandates that all coaches must receive training on concussions. The training may be fulfilled through the free, online course available through the National Federation of State High School Associations (NFHS).

## **NFHS Learning Center: Concussion in Sports**

*<http://nfhslearn.com/courses/61064/concussion-in-sports>*

*Complete this 20-minute online class for FREE from the NFHS and the CIF.*

*Coaches should download and print their certificate at the completion of the course.*

Coaches shall immediately remove from practice or game competition any athlete who is suspected of sustaining a concussion or head injury and remain out of practice or play for the rest of the day.

Coaches shall not allow an athlete who has been removed from play because of a suspected concussion/brain injury to return to play until the athlete has received written clearance from a licensed health care provider trained in the evaluation and management of brain injuries.

## **Additional Resources**

[CDC - Heads up: Concussion in High School Sports](https://www.cdc.gov/headsup/highschoolsports/index.html)

<https://www.cdc.gov/headsup/highschoolsports/index.html>



## CIF Concussion Information Sheet

### **Why am I getting this information sheet?**

You are receiving this information sheet about concussions because of California state law AB 25 (effective January 1, 2012), now Education Code § 49475:

1. *The law requires a student athlete who may have a concussion during a practice or game to be removed from the activity for the remainder of the day.*
2. *Any athlete removed for this reason must receive a written note from a medical doctor trained in the management of concussion before returning to practice.*
3. *Before an athlete can start the season and begin practice in a sport, a concussion information sheet must be signed and returned to the school by the athlete and the parent or guardian.*

Every 2 years all coaches are required to receive training about concussions (AB 1451), as well as certification in First Aid training, CPR, and AEDs (life-saving electrical devices that can be used during CPR).

### **What is a concussion and how would I recognize one?**

A concussion is a kind of brain injury. It can be caused by a bump or hit to the head, or by a blow to another part of the body with the force that shakes the head. Concussions can appear in any sport, and can look differently in each person.

*Most concussions get better with rest and over 90% of athletes fully recover.* However, all concussions should be considered serious. If not recognized and managed the right way, they may result in problems including brain damage and even death.

*Most concussions occur without being knocked out.* Signs and symptoms of concussion (see back of this page) may show up right after the injury or can take hours to appear. If your child reports any symptoms of concussion or if you notice some symptoms and signs, seek medical evaluation from your team's athletic trainer and a medical doctor trained in the evaluation and management of concussion. If your child is vomiting, has a severe headache, or is having difficulty staying awake or answering simple questions, call 911 to take him or her immediately to the emergency department of your local hospital.

On the CIF website is a **Graded Concussion Symptom Checklist**. If your child fills this out after having had a concussion, it helps the doctor, athletic trainer or coach understand how he or she is feeling and hopefully shows improvement. We ask that you have your child fill out the checklist at the start of the season even before a concussion has occurred so that we can understand if some symptoms such as headache might be a part of his or her everyday life. We call this a "baseline" so that we know what symptoms are normal and common for your child. Keep a copy for your records, and turn in the original. If a concussion occurs, he or she should fill out this checklist daily. This Graded Symptom Checklist provides a list of symptoms to compare over time to make sure the athlete is recovering from the concussion.

### **What can happen if my child keeps playing with concussion symptoms or returns too soon after getting a concussion?**

*Athletes with the signs and symptoms of concussion should be removed from play immediately. There is NO same day return to play for a youth with a suspected concussion.* Youth athletes may take more time to recover from concussion and are more prone to long-term serious problems from a concussion.

Even though a traditional brain scan (e.g., MRI or CT) may be "normal", the brain has still been injured. Animal and human research studies show that a second blow before the brain has recovered can result in serious damage to the brain. If your athlete suffers another concussion before completely recovering from the first one, this can lead to prolonged recovery (weeks to months), or even to severe brain swelling (Second Impact Syndrome) with devastating consequences.

There is an increasing concern that head impact exposure and recurrent concussions may contribute to long-term neurological problems. One goal of this concussion program is to prevent a too early return to play so that serious brain damage can be prevented.

**Signs observed by teammates, parents and coaches include:**

- |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"><li>• Looks dizzy</li><li>• Looks spaced out</li><li>• Confused about plays</li><li>• Forgets plays</li><li>• Is unsure of game, score, or opponent</li><li>• Moves clumsily or awkwardly</li><li>• Answers questions slowly</li></ul> | <ul style="list-style-type: none"><li>• Slurred speech</li><li>• Shows a change in personality or way of acting</li><li>• Can't recall events before or after the injury</li><li>• Seizures or has a fit</li><li>• Any change in typical behavior or personality</li><li>• Passes out</li></ul> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Symptoms may include one or more of the following:**

- |                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"><li>• Headaches</li><li>• "Pressure in head"</li><li>• Nausea or throws up</li><li>• Neck pain</li><li>• Has trouble standing or walking</li><li>• Blurred, double, or fuzzy vision</li><li>• Bothered by light or noise</li><li>• Feeling sluggish or slowed down</li><li>• Feeling foggy or groggy</li><li>• Drowsiness</li><li>• Change in sleep patterns</li></ul> | <ul style="list-style-type: none"><li>• Loss of memory</li><li>• "Don't feel right"</li><li>• Tired or low energy</li><li>• Sadness</li><li>• Nervousness or feeling on edge</li><li>• Irritability</li><li>• More emotional</li><li>• Confused</li><li>• Concentration or memory problems</li><li>• Repeating the same question/comment</li></ul> |
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**What is Return to Learn?**

Following a concussion, student athletes may have difficulties with short- and long-term memory, concentration and organization. They will require rest while recovering from injury (e.g., avoid reading, texting, video games, loud movies), and may even need to stay home from school for a few days. As they return to school, the schedule might need to start with a few classes or a half-day depending on how they feel. If recovery from a concussion is taking longer than expected, they may also benefit from a reduced class schedule and/or limited homework; a formal school assessment may also be necessary. Your school or doctor can help suggest and make these changes. Student athletes should complete the Return to Learn guidelines and return to complete school before beginning any sports or physical activities, unless your doctor makes other recommendations. Go to the CIF website ([cifstate.org](http://cifstate.org)) for more information on Return to Learn.

**How is Return to Play (RTP) determined?**

Concussion symptoms should be completely gone before returning to competition. A RTP progression involves a gradual, step-wise increase in physical effort, sports-specific activities and the risk for contact. If symptoms occur with activity, the progression should be stopped. If there are no symptoms the next day, exercise can be restarted at the previous stage.

RTP after concussion should occur only with medical clearance from a medical doctor trained in the evaluation and management of concussions, and a step-wise progression program monitored by an athletic trainer, coach, or other identified school administrator. Please see [cifstate.org](http://cifstate.org) for a graduated return to play plan. [AB 2127, a California state law effective 1/1/15, states that return to play (i.e., full competition) must be **no sooner than 7 days after the concussion diagnosis has been made by a physician.**]

**Final Thoughts for Parents and Guardians:**

It is well known that high school athletes will often not talk about signs of concussions, which is why this information sheet is so important to review with them. Teach your child to tell the coaching staff if he or she experiences such symptoms, or if he or she suspects that a teammate has had a concussion. You should also feel comfortable talking to the coaches or athletic trainer about possible concussion signs and symptoms that you may be seeing in your child.

**References:**

- American Medical Society for Sports Medicine position statement: concussion in sport (2013)
- Consensus statement on concussion in sport: the 4th International Conference on Concussion in Sport held in Zurich, November 2012
- <http://www.cdc.gov/concussion/HeadsUp/youth.html>

School: \_\_\_\_\_

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3. *Before an athlete can start the season and begin practice in a sport, a concussion information sheet must be signed and returned to the school by the athlete and the parent or guardian.*

Every 2 years all coaches are required to receive training about concussions (AB 1451), as well as certification in First Aid training, CPR, and AEDs (life-saving electrical devices that can be used during CPR).

For current and up-to-date information on concussions you can visit:  
<http://www.cdc.gov/concussion/HeadsUp/youth.html>

I acknowledge that I have received and read the CIF Concussion Information Sheet.

\_\_\_\_\_  
Student-Athlete Name  
Printed

\_\_\_\_\_  
Student-Athlete  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Legal Guardian  
Printed

\_\_\_\_\_  
Parent or Legal Guardian  
Signature

\_\_\_\_\_  
Date

## CIF Acute Concussion Notification Form for Parents/Guardians

- Your child has symptoms consistent with a concussion.  
At the time of evaluation, there was no sign of any serious complications.
- He/she will need monitoring for a further period by a responsible adult, and should not be left alone over the next 12-24 hours.

<b>Call 911 and go to the nearest Hospital Emergency Department for the following:</b>	
<input type="radio"/> Headache that worsens	<input type="radio"/> Can't recognize people or places
<input type="radio"/> Seizure (uncontrolled jerking of arms/legs)	<input type="radio"/> Looks very drowsy/Can't be awakened
<input type="radio"/> Weakness or numbness of arms/legs	<input type="radio"/> Increased confusion and/or irritability
<input type="radio"/> Repeated vomiting	<input type="radio"/> Unusual behavior
<input type="radio"/> Loss of consciousness	<input type="radio"/> Slurred speech
<input type="radio"/> Lack of balance/unsteadiness on feet	<input type="radio"/> Drainage of blood/fluid from ears or nose
<input type="radio"/> Changes in vision (double, blurry vision)	<input type="radio"/> Loss of bowel and/or bladder control

### **Recommendations:**

- AVOID medications like ibuprofen (Motrin, Advil) or aspirin for the next 48 hours due to the potential of increased bleeding risk in the brain.
- Acetaminophen (Tylenol) can be tried but often won't take away a concussion headache. DO NOT give narcotic pain medication like codeine.
- Check for normal breathing every few hours while sleeping but DO NOT wake your child up unless you are concerned. If he/she can't be aroused, call 911 immediately.
- Make an appointment to see a physician within 72 hours. Inform your child's teachers about the injury. Keep your child out of school if symptoms are severe or worsened by reading or studying.
- Track your child's symptoms using the **CIF Graded Concussion Symptom Checklist** (Find this on [cifstate.org](http://cifstate.org)). Bring these checklists to your physician.
- No activities like afterschool sports and PE, and no physical exertion until your child is evaluated and cleared by a physician (MD/DO) trained in the diagnosis and management of concussions.
- Refer to the **CIF Return-to-Learn** and **CIF Return-to-Play** protocols on [cifstate.org](http://cifstate.org).



# CIF GRADED CONCUSSION SYMPTOM CHECKLIST

Today's Date: \_\_\_\_\_ Time: \_\_\_\_\_ Hours of Sleep: \_\_\_\_\_ Date of Diagnosis: \_\_\_\_\_

- **Grade the 22 symptoms with a score of 0 through 6.**
  - *Note that these symptoms may not all be related to a concussion.*
- **You can fill this out at the beginning of the season as a baseline (after a good night's sleep).**
- **If you suffer a suspected concussion, use this checklist to record your symptoms daily.**
  - *Be consistent and try to grade either at the beginning or end of each day.*
- **There is no scale to compare your total score to; this checklist helps you follow your symptoms on a day-to-day basis.**
  - *If your total scores are not decreasing, see your physician right away.*
- **Show your baseline (if available) and daily checklists to your physician.**

- Baseline Score  
 Post Concussion Score

	None	Mild	Moderate	Severe			
Headache	0	1	2	3	4	5	6
"Pressure in head"	0	1	2	3	4	5	6
Neck Pain	0	1	2	3	4	5	6
Nausea or Vomiting	0	1	2	3	4	5	6
Dizziness	0	1	2	3	4	5	6
Blurred Vision	0	1	2	3	4	5	6
Balance Problems	0	1	2	3	4	5	6
Sensitivity to light	0	1	2	3	4	5	6
Sensitivity to noise	0	1	2	3	4	5	6
Feeling slowed down	0	1	2	3	4	5	6
Feeling like "in a fog"	0	1	2	3	4	5	6
"Don't feel right"	0	1	2	3	4	5	6
Difficulty concentrating	0	1	2	3	4	5	6
Difficulty remembering	0	1	2	3	4	5	6
Fatigue or low energy	0	1	2	3	4	5	6
Confusion	0	1	2	3	4	5	6
Drowsiness	0	1	2	3	4	5	6
Trouble falling asleep	0	1	2	3	4	5	6
More emotional than usual	0	1	2	3	4	5	6
Irritability	0	1	2	3	4	5	6
Sadness	0	1	2	3	4	5	6
Nervous or Anxious	0	1	2	3	4	5	6
<b>TOTAL SUM OF EACH COLUMN</b>	0						
<b>TOTAL SYMPTOM SCORE (Sum of all column totals)</b>							

NAME \_\_\_\_\_ HIGH SCHOOL \_\_\_\_\_  
D.O.B. \_\_\_\_\_ SPORT \_\_\_\_\_ PHYSICIAN (MD/DO) \_\_\_\_\_

## Physician Letter to School

To Whom It May Concern:

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_

### **INJURY STATUS**

**Date of Concussion Diagnosis by MD/DO:** \_\_\_\_\_

- Has been diagnosed by a MD/DO with a concussion and is currently under our care.  
Medical follow-up evaluation is scheduled for (date): \_\_\_\_\_
- Was evaluated and did not have a concussion injury. There are no limitations on school and physical activity.

### **ACADEMIC ACTIVITY STATUS** (Please mark all that apply)

- This student is not to return to school.**
- This student may begin a return to school based on successful progression through the **CIF Concussion Return to Learn Protocol**. This student requires the necessary school accommodations set forth on the **Physician(MD/DO) Recommended School Accommodations Following Concussion** form.
- This student is no longer experiencing any signs or symptoms of concussion and may be released to full academic participation.
- Comments: \_\_\_\_\_

### **PHYSICAL ACTIVITY STATUS** (Please mark all that apply)

- This student is not to participate in physical activity of any kind.**
- This student is not to participate in recess or other physical activities except for untimed, voluntary walking.
- This student may begin a graduated return to play progression (see **CIF Concussion RTP Protocol** form).
- This student has medical clearance for unrestricted athletic participation (Has completed the **CIF Concussion RTP Protocol**).
- Comments: \_\_\_\_\_

**Physician (MD/DO) Signature:** \_\_\_\_\_

**Exam Date:** \_\_\_\_\_

**Physician Stamp and Contact Info:**

**Parent/Guardian Acknowledgement Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## CIF Concussion Return to Learn (RTL) Protocol

### Instructions:

- Keep brain activity below the level that causes worsening of symptoms (e.g., headache, tiredness, irritability).
- If symptoms worsen at any stage, stop activity and rest.
- Seek further medical attention if your child continues with symptoms beyond 7 days.
- If appropriate time is allowed to ensure complete brain recovery before returning to mental activity, your child may have a better outcome than if he or she tries to rush through these guidelines.
- Please give this form to teachers/school administrators to help them understand your child's recovery.

Stage	Home Activity	School Activity	Physical Activity
Brain Rest	<ul style="list-style-type: none"> <li>• Rest quietly, nap and sleep as much as needed.</li> <li>• Avoid bright light if bothersome.</li> <li>• Drink plenty of fluids and eat healthy foods every 3-4 hours.</li> <li>• Avoid "screen time" (text, computer, cell phone, TV, video games).</li> </ul>	<ul style="list-style-type: none"> <li>• Noschool.</li> <li>• No homework or take-home tests.</li> <li>• Avoid reading and studying.</li> </ul>	<ul style="list-style-type: none"> <li>• Walking short distances to get around is okay.</li> <li>• No exercise of any kind.</li> <li>• No driving.</li> </ul>
	<p><b><i>This step usually ends 3-5 days after injury.</i></b></p> <p><b><i>Progress to the next stage when your child starts to improve, but s/he may still have some symptoms.</i></b></p>		
Restful Home Activity	<ul style="list-style-type: none"> <li>• Set a regular bedtime/wake up schedule.</li> <li>• Allow at least 8-10 hours of sleep and naps if needed.</li> <li>• Drink lots of fluids and eat healthy foods every 3-4 hours.</li> <li>• Limit "screen time" to less than 30 minutes a day.</li> </ul>	<ul style="list-style-type: none"> <li>• Noschool.</li> <li>• May begin easy tasks at home (drawing, baking, cooking).</li> <li>• Soft music and 'books on tape' ok.</li> <li>• Once your child can complete 60-90 minutes of light mental activity without a worsening of symptoms he/she may go to the next step.</li> </ul>	<ul style="list-style-type: none"> <li>• Light physical activity, like walking.</li> <li>• No strenuous physical activity or contact sports.</li> <li>• No driving.</li> </ul>
	<p><b><i>Progress to the next stage when your child starts to improve and s/he has fewer symptoms.</i></b></p>		
Return to School - PARTIAL DAY	<ul style="list-style-type: none"> <li>• Allow 8-10 hours of sleep per night.</li> <li>• Avoid napping.</li> <li>• Drink lots of fluids and eat healthy foods every 3-4 hours.</li> <li>• "Screen time" less than 1 hour a day.</li> <li>• Spend limited social time with friends outside of school.</li> </ul>	<ul style="list-style-type: none"> <li>• Gradually return to school.</li> <li>• Start with a few hours/half-day.</li> <li>• Take breaks in the nurse's office or a quiet room every 2 hours or as needed.</li> <li>• Avoid loud areas (music, band, choir, shop class, locker room, cafeteria, loud hallway and gym).</li> <li>• Use sunglasses/ earplugs as needed. Sit in front of class.</li> <li>• Use preprinted large font (18) class notes.</li> <li>• Complete necessary assignments only.</li> <li>• No tests or quizzes.</li> <li>• Limit homework time.</li> <li>• Multiple choice or verbal assignments better than lots of long writing.</li> <li>• Tutoring or help as needed.</li> <li>• Stop work if symptoms increase.</li> </ul>	<ul style="list-style-type: none"> <li>• Light physical activity, like walking, and as instructed by physician.</li> <li>• No strenuous physical activity or contact sports.</li> <li>• No driving.</li> </ul>
	<p><b><i>Progress to the next stage when your child can complete the above activities without symptoms.</i></b></p>		
Return to School - FULL DAY	<ul style="list-style-type: none"> <li>• Allow 8-10 hours of sleep per night.</li> <li>• Avoid napping.</li> <li>• Drink lots of fluids and eat healthy foods every 3-4 hours.</li> <li>• "Screen time" less than 1 hour a day.</li> <li>• Spend limited social time with friends outside of school.</li> </ul>	<ul style="list-style-type: none"> <li>• Progress to attending core classes for full days of school.</li> <li>• Add in electives when tolerated.</li> <li>• No more than 1 test or quiz per day.</li> <li>• Give extra time or untimed homework/tests.</li> <li>• Tutoring or help as needed.</li> <li>• Stop work if symptoms increase.</li> </ul>	<ul style="list-style-type: none"> <li>• Light physical activity, like walking, and as instructed by physician.</li> <li>• No strenuous physical activity or contact sports.</li> <li>• No driving.</li> </ul>
	<p><b><i>Progress to the next stage when your child has returned to full school and is able to complete all assignments/tests without symptoms.</i></b></p>		
Full Recovery	<ul style="list-style-type: none"> <li>• Return to normal home and social activities.</li> </ul>	<ul style="list-style-type: none"> <li>• Return to normal school schedule and course load.</li> </ul>	<ul style="list-style-type: none"> <li>• Must complete Graduated Return to Play (RTP) Protocol before returning to strenuous physical activity or contact sports.</li> <li>• See CIF RTP Protocol.</li> </ul>

**Physician (MD/DO) Recommended School Accommodations Following Concussion**

Patient Name: \_\_\_\_\_ Date: \_\_\_\_\_

I, \_\_\_\_\_, give permission for my physician to share the following information with my child's school and for communication to occur between the school and my physician for changes to this plan. Parent Signature: \_\_\_\_\_

Physician Name and Contact Information: \_\_\_\_\_ Physician Signature: \_\_\_\_\_

The patient will be reevaluated for revision of these recommendations in \_\_\_\_\_ weeks. Date: \_\_\_\_\_

This patient has been diagnosed with a concussion (a brain injury) and is currently under our care. Please excuse the patient from school today due to the medical appointment. Flexibility and additional supports are needed during recovery. The following are suggestions for academic adjustments to be individualized for the student as deemed appropriate in the school setting. Adjustments can be modified as the student's symptoms improve/worsen. Please see the CIF Return to Learn Protocol for more information (cifstate.org).

Area	Requested Modifications	Comments/Clarifications
<b>Attendance</b>	<input type="checkbox"/> No School <input type="checkbox"/> Partial School day as tolerated by student – emphasis on core subject work <u>Encouraged Classes:</u> _____ <u>Discouraged Classes:</u> _____ <input type="checkbox"/> Full School day as tolerated by student <input type="checkbox"/> Water bottle in class/snack every 3-4 hours	
<b>Breaks</b>	<input type="checkbox"/> If symptoms appear/ worsen during class, allow student to go to quiet area or nurse's office; if no improvement after 30 minutes allow dismissal to home <input type="checkbox"/> <u>Mandatory Breaks:</u> _____ <input type="checkbox"/> Allow breaks during day as deemed necessary by student or teachers/school personnel	
<b>Visual Stimulus</b>	<input type="checkbox"/> Enlarged print (18 font) copies of textbook material / assignments <input type="checkbox"/> Pre-printed notes (18 font) or note taker for class material <input type="checkbox"/> Limited computer, TV screen, bright screen use <input type="checkbox"/> Allow handwritten assignments (as opposed to typed on a computer) <input type="checkbox"/> Allow student to wear sunglasses/hat in school; seat student away from windows and bright lights <input type="checkbox"/> Reduce brightness on monitors/screens <input type="checkbox"/> Change classroom seating to front of room as necessary	
<b>Auditory Stimulus</b>	<input type="checkbox"/> Avoid loud classroom activities <input type="checkbox"/> Lunch in a quiet place with a friend <input type="checkbox"/> Avoid loud classes/places (i.e. music, band, choir, shop class, gym and cafeteria) <input type="checkbox"/> Allow student to wear earplugs as needed <input type="checkbox"/> Allow class transitions before the bell	
<b>School Work</b>	<input type="checkbox"/> Simplify tasks (i.e. 3 step instructions) <input type="checkbox"/> Short breaks (5 minutes) between tasks <input type="checkbox"/> Reduce overall amount of in-class work <input type="checkbox"/> Prorate workload (only core or important tasks)/eliminate non-essential work <input type="checkbox"/> No homework <input type="checkbox"/> Reduce amount of nightly homework _____ minutes per class; _____ minutes maximum per night; take a break every _____ minutes <input type="checkbox"/> Will attempt homework, but will stop if symptoms occur <input type="checkbox"/> Extra tutoring/assistance requested <input type="checkbox"/> May begin make-up of essential work	
<b>Testing</b>	<input type="checkbox"/> No Testing <input type="checkbox"/> Additional time for testing/untimed testing <input type="checkbox"/> Alternative Testing methods: oral delivery of questions, oral response or scribe <input type="checkbox"/> No more than one test a day <input type="checkbox"/> No Standardized Testing	
<b>Educational Plan</b>	<input type="checkbox"/> Student is in need of a 504 Plan and/or IEP (if prolonged symptoms are interfering with academic performance)	
<b>Physical Activity</b>	<input type="checkbox"/> No physical exertion/athletics/gym/recess <input type="checkbox"/> Walking in PE class/recess only <input type="checkbox"/> May begin graduated return to play protocol; see CIF Return to Play (RTP) protocol (cifstate.org)	



# CIF Concussion Return to Play (RTP) Protocol

**CA STATE LAW AB 2127 STATES THAT RETURN TO PLAY (I.E., COMPETITION) CANNOT BE SOONER THAN 7 DAYS AFTER EVALUATION BY A PHYSICIAN (MD/DO) WHO HAS MADE THE DIAGNOSIS OF CONCUSSION, AND ONLY AFTER COMPLETING A GRADUATED RETURN TO PLAY PROTOCOL.**

**Instructions:**

- This is an example of a *graduated return to play protocol* that **MUST** be completed before you can return to FULL COMPETITION.
  - A certified athletic trainer (AT), physician, or identified concussion monitor (e.g., athletic director, coach), must initial each stage after you successfully pass it.
  - You should be back to normal academic activities before beginning Stage II, unless otherwise instructed by your physician.
- After Stage I, you cannot progress more than one stage per day (or longer if instructed by your physician).
- If symptoms return at any stage in the progression, IMMEDIATELY STOP any physical activity and follow up with your school's AT, other identified concussion monitor, or your physician. In general, if you are symptom-free the next day, return to the previous stage where symptoms had not occurred.
- Seek further medical attention if you cannot pass a stage after 3 attempts due to concussion symptoms, or if you feel uncomfortable at anytime during the progression.

You must have written physician (MD/DO) clearance to begin and progress through the following Stages as outlined below, or as otherwise directed by your physician. <u>Minimum</u> of 6 days to pass Stages I and II.				
Date & Initials	Stage	Activity	Exercise Example	Objective of the Stage
	<b>I</b>	No physical activity for at least 2 full symptom-free days	<ul style="list-style-type: none"> <li>• No activities requiring exertion (weight lifting, jogging, P.E. classes)</li> </ul>	<ul style="list-style-type: none"> <li>• Recovery and elimination of symptoms</li> </ul>
	<b>II-A</b>	Light aerobic activity	<ul style="list-style-type: none"> <li>• 10-15 minutes (<i>min</i>) of walking or stationary biking.</li> <li>• <b>Must be performed under direct supervision by designated individual</b></li> </ul>	<ul style="list-style-type: none"> <li>• Increase heart rate to no more than 50% of perceived maximum (<i>max</i>) exertion (e.g., &lt; 100 beats per min)</li> <li>• Monitor for symptom return</li> </ul>
	<b>II-B</b>	Moderate aerobic activity <i>(Light resistance training)</i>	<ul style="list-style-type: none"> <li>• 20-30 min jogging or stationary biking</li> <li>• Body weight exercises (squats, planks, push-ups), max 1 set of 10, no more than 10 min total</li> </ul>	<ul style="list-style-type: none"> <li>• Increase heart rate to 50-75% max exertion (e.g., 100-150 bpm)</li> <li>• Monitor for symptom return</li> </ul>
	<b>II-C</b>	Strenuous aerobic activity <i>(Moderate resistance training)</i>	<ul style="list-style-type: none"> <li>• 30-45 min running or stationary biking</li> <li>• Weight lifting ≤ 50% of max weight</li> </ul>	<ul style="list-style-type: none"> <li>• Increase heart rate to &gt; 75% max exertion</li> <li>• Monitor for symptom return</li> </ul>
	<b>II-D</b>	Non-contact training with sport-specific drills <i>(No restrictions for weightlifting)</i>	<ul style="list-style-type: none"> <li>• Non-contact drills, sport-specific activities (cutting, jumping, sprinting)</li> <li>• No contact with people, padding or the floor/mat</li> </ul>	<ul style="list-style-type: none"> <li>• Add total body movement</li> <li>• Monitor for symptom return</li> </ul>
<b>Prior to beginning Stage III, please make sure that written physician (MD/DO) clearance for return to play, after successful completion of Stages I and II, has been given to your school's concussion monitor.</b>				
	<b>III</b>	Limited contact practice	<ul style="list-style-type: none"> <li>• Controlled contact drills allowed (no scrimmaging)</li> </ul>	<ul style="list-style-type: none"> <li>• Increase acceleration, deceleration and rotational forces</li> <li>• Restore confidence, assess readiness for return to play</li> <li>• Monitor for symptom return</li> </ul>
		Full contact practice Full unrestricted practice	<ul style="list-style-type: none"> <li>• Return to normal training, with contact</li> <li>• Return to normal unrestricted training</li> </ul>	
<b>MANDATORY: You must complete at least ONE contact practice before return to competition, or if non-contact sport, ONE unrestricted practice</b> <i>(If contact sport, highly recommend that Stage III be divided into 2 contact practice days as outlined above)</i>				
	<b>IV</b>	Return to play (competition)	<ul style="list-style-type: none"> <li>• Normal gameplay (competitive event)</li> </ul>	<ul style="list-style-type: none"> <li>• Return to full sports activity without restrictions</li> </ul>

Athlete's Name: \_\_\_\_\_

Date of Concussion Diagnosis: \_\_\_\_\_