

NORTHEAST METROPOLITAN REGIONAL  
VOCATIONAL SCHOOL

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WAKEFIELD, MA 01880

***CONCUSSION***  
***POLICY AND PROCEDURES***  
***1/2016 - 12/2017***

***Reviewed by Committee Members:***

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# ***NORTHEAST METRO TECH HIGH SCHOOL ATHLETIC DEPARTMENT***

## **CONCUSSION POLICY AND PROCEDURES**

The Commonwealth of Massachusetts' Executive Office of Health and Human Services requires that all public middle and high schools subject to the Massachusetts Interscholastic Athletic Association (MIAA) rules adhere to the state law entitled **HEAD INJURIES AND CONCUSSIONS IN EXTRACURRICULAR ATHLETIC ACTIVITIES** (105 CMR 201.000). The purpose of 105 CMR 201.000 is to provide standardized procedures for persons involved in the prevention, training, management and return to activity decisions regarding students who incur head injuries while involved in extracurricular athletic activities, including but not limited to interscholastic sports, in order to protect their health and safety.

Student-athletes and their parents, coaches, athletic directors, school nurses, and physicians must learn about the consequences of head injuries and concussions through training programs and written materials. The law requires that athletes and their parents inform their coaches about prior head injuries at the beginning of the season.

The law clearly states that any student who, during a practice or competition, sustains a head injury or suspected concussion, or exhibits signs and symptoms of a concussion, or loses consciousness, even briefly, shall be removed from the practice or competition immediately and may not return to the competition or practice that day. In addition, the injured student may not engage in any extracurricular athletic activity without written medical clearance and authorization.

The policy of Northeast Metropolitan Regional Vocational School ("Northeast") mandates that in order to participate in Northeast Athletics or extracurricular athletic activities, each student must:

- Present a physical from within the last 13 months of the start of each sports season stating that he/she is in good standing health and permitted to participate in interscholastic athletics
- Prior to each season, complete a Pre-participation Concussion Form with up-to-date information of any history of a concussion or head and neck injury.
- Each year, before the student begins practice or competition, present a signed consent form stating that both the athlete and parent have learned about sports-related head injuries and understand the law as well as understand the concerns for sports related head injuries.

The Certified Athletic Trainer and Coaches will review the pre-participation concussion form prior to athlete participation, and will forward all documentation of concussions and head/neck injury to the Athletic Director and Nurse's Office to be maintained on file.

At the beginning of each season, student athletes will receive training on sports related head injuries and prevention. They will also be provided with an informational sheet with the symptoms of concussions, and reference to information available online. School rules and regulations on concussions will appear in the student and faculty handbook.

- No student athlete will be permitted to participate in athletics and extracurricular athletic activities unless a current physical is on file and a Pre- participation Concussion Form is returned signed by the parent to the Athletic Director.
- All violations or non-compliance of the Northeast Concussion Policy shall be reported to the Athletic Director and school administration for further disciplinary actions.
- All documentations of concussions of the student athletes, including the Pre-Participation Forms, Report of Head Injury Forms, medical clearance authorization forms, and reentry plans will be kept on file in the Athletic Director's Office and copies will be sent to the School Nurse.
- The Athletic Director will maintain files of all documents of training verification and receipt of distributed informational materials.
- All concussion forms and documents will be available in both English and Spanish. Translators will be available at meetings as necessary.

The Superintendent – Director designates the Athletic Director as the person responsible for administering the regulatory requirements regarding head injuries in athletics.

- The Athletic Director shall participate in the development of the biannual review of the policies and procedures for the prevention and management of sports related head injuries within the school district or school.
- The Athletic Director shall complete the annual training.
- The Athletic Director must ensure that:
  - a) The training requirements for staff, parents, volunteers, coaches and students are met and that accurate and complete records are maintained.
  - b) All students meet the physical examination requirements prior to participation in any extracurricular activity – practice or competition.
  - c) All students participating in extracurricular athletic activities have completed and submitted pre-participation forms of concussion history.
  - d) Pre-participation forms are reviewed by the coaches, the trainer, and the school nurse.
  - e) Head injury report forms are completed by the parent and/or coach and reviewed by the Athletic Director, Athletic Trainer, and school nurse.
  - f) Required statistical reports are prepared and submitted to DESE.

## HEAD INJURY TRAINING PROGRAM

All Coaches, School Nurses, School/Team Physicians, Certified Athletic Trainers, Parents and any other affiliates of Northeast Athletics must complete an Interscholastic Head Injury Training Program.

- The athletic head injury training program must include, but not be limited to: the recognition of the signs and symptoms of head and neck injuries, concussions, the risk of secondary injury, including the risk of second impact syndrome. The NFHS online course *Concussion in Sports – What You Need to Know* or the CDC's *Heads Up Concussion in Youth Sports* online courses are both considered to be appropriate training options.
- The training program must include a description of the protocol for the return to sports competition or practice after a head injury is sustained.
- The Athletic Director may have a concussion awareness assembly for all athletes, parents and coaches prior to each season to present training or to distribute training materials.
- At minimum, students and parents will be required to sign an acknowledgement verifying that they have reviewed DPH approved written materials to meet the training requirement.
- A Concussion and Head Injury fact sheet will be made available to all parents of student athletes and will be included with the required Pre-participation form. The Policy, written training materials, and all required forms will be available in English and Spanish on the Northeast website: [www.northeastmetrotech.com](http://www.northeastmetrotech.com).
- The Athletic Director will provide instruction to coaches regarding proper athletic techniques to reduce risk for head injuries at preseason coaches meeting.

## PROCEDURES FOR ATTENDING STAFF IN THE EVENT OF INJURY

- In the event of serious injury where it is determined that the athlete should be immobilized or where athlete remains unconscious, reports numbness, etc., proper medical precautions should be taken and the Athletic Trainer or Coach shall summon emergency medical help (call 911) to the area of play.
- The Athletic Trainer will remove the injured student athlete from play, perform an assessment and contact the parent/guardian to make recommendations for further medical evaluation.
- The Athletic Trainer will fill out an injury report and "Report of Head Injury" form which will be copied and sent to the School Nurse. The Athletic Trainer will notify the Athletic Director and School Nurse of the injury.
- The Athletic Trainer/Coach or attending person will advise the student athlete and parent/guardian that complete physical, cognitive, emotional, and social rest is very important when experiencing signs and symptoms associated with concussion.

### **Special Circumstances:**

- If there is no Athletic Trainer on duty, the Coach will remove the athlete from play, contact the parent/ guardian to bring the student athlete for medical evaluation. The Coach will also contact the Athletic Director, the Athletic Trainer, and fill out an injury report and “Report of Head Injury” form.
- If the Coach or Athletic Trainer cannot contact the parent/ guardian or if the parent/ guardian cannot get to the site, a Coach or Athletic Trainer will accompany the student athlete to a hospital for medical evaluation.

### **PROCEDURES FOR STUDENT ATHLETE AND PARENTS**

- The student athlete must see his/her primary physician after suffering a concussion.
- The physician will need to provide written clearance for the student athlete to start the return to play protocol.

### **INDIVIDUALIZED RETURN TO PLAY PROTOCOL**

The student athlete’s *individualized return to play protocol* must be supervised by either the physician or athletic trainer. Individuals will be monitored for symptoms and cognitive function carefully during each stage of increased exertion. Athletes will only progress to the next level of exertion if they are asymptomatic at the current level. The following steps will be followed:

**Step 1:** Completion of a full day of normal cognitive activities (school day, studying for tests, watching practice, interacting with peers) without any return of signs or symptoms. If no symptoms return, the next day the athlete will advance to:

**Step 2:** Begin with light aerobic exercise, but only to increase an athlete’s heart rate. This translates into 5 to 10 minutes on an exercise bike, walking, or light jogging. There should be no weight lifting, jumping or hard running at this point.

**Step 3:** Add activities that increase an athlete’s heart rate, and incorporate limited body or head movement. This includes moderate jogging, brief running, moderate-intensity stationary biking, and moderate-intensity weightlifting (reduced time and/or reduced weight from your typical routine).

**Step 4:** Increase to heavy, non-contact physical activity. This includes sprinting/running, high-intensity stationary biking, the player’s regular weightlifting routine, and non-contact sport-specific drills (in 3 planes of movement).

**Step 5:** Reintegrate the athlete into practice sessions, even full contact in controlled practice if appropriate for the sport. Breaks must be given, for rest and for the athletic trainer to monitor. The athlete must participate in one regular practice at this step before being allowed into a game or competition.

**Step 6:** Return to full play.

Note: Each step in this protocol should last **no less than 24 hours with a minimum of 5 days** required to be considered a full return to competition. If symptoms recur during the program, the athlete should stop immediately. Once asymptomatic after at least another 24 hours, the athlete should resume at the previous asymptomatic level and try to progress again. If symptoms continue to recur the athlete will be sent back to their health care provider for further evaluation.

## **RE-ENTRY TO SCHOOL**

The School Nurse will make a graduated re-entry plan for any student athlete who has had a concussion. The School Nurse will inform all school administrators, the Athletic Director, and the Guidance Counselor of the injury and the reentry plan. The School Nurse will inform teachers about the student returning to a full academic schedule. If symptoms of the concussion last longer than 10 days, the school's 504 Coordinator (Administrator of Student Services) will be notified and asked to convene a meeting to develop an appropriate accommodation plan for the student.

# **NORTHEAST METRO TECH HIGH SCHOOL ATHLETIC DEPARTMENT**

## **PRE-PARTICIPATION CONCUSSION FORM**

### **STATE LAW REGARDING SPORTS-RELATED HEAD INJURY & CONCUSSIONS**

The Commonwealth of Massachusetts' Executive Office of Health and Human Services requires that all schools subject to the Massachusetts Interscholastic Athletic Association (MIAA) rules adhere to the following law. Student-athletes and their parents, coaches, athletic directors, school nurses, and physicians must learn about the consequences of head injuries and concussions through training programs and written materials. The law requires that athletes and their parents inform their coaches about prior head injuries at the beginning of the season. If a student athlete shows signs of a head related injury during a game or practice, the law mandates taking the student out of play or practice, and requires written certification from a licensed medical professional for "return to play." Parents and students who plan to participate in any athletic program at Northeast Metro Tech High School are required to learn about the risks and consequences of head injuries and concussions. This education can be done through a free on-line course or by reading the attached material. These courses explain the causes and effects of sport related head injuries and concussions. The free on-line course is available through the Center for Disease Control (CDC). The course is called "Heads Up - Concussions in Youth Sports". The entire course can be completed in less than 30 minutes.

<http://www.cdc.gov/concussion>

### **CONCUSSION HISTORY**

Student Name: \_\_\_\_\_

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

Have you experienced a previous concussion?      YES    NO

If you answered yes, please complete the following previously diagnosed concussion details:

Date(s) of previous concussion(s): \_\_\_\_\_

Sport/Activity: \_\_\_\_\_

Symptoms: \_\_\_\_\_

Please sign below that you have read the above, learned about sports-related head injuries and understand the law as well as understand the concerns for sport related head injuries.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Student: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE NOTE THAT THE STUDENT MUST TURN THIS FORM IN BEFORE HE/SHE CAN PARTICIPATE IN ANY SPORT OR ACTIVITY. IF A STUDENT PARTICIPATES IN MULTIPLE ACTIVITIES DURING A SCHOOL YEAR, THIS FORM WILL BE REQUIRED PRIOR TO THE START OF EACH ACTIVITY.**

# NORTHEAST METRO TECH HIGH SCHOOL ATHLETIC DEPARTMENT

## HEAD INJURY FACT SHEET AND CARE INSTRUCTIONS FOR CONCUSSIONS

Based on mechanism of injury and evaluation, it is believed that \_\_\_\_\_ has suffered a concussion while participating in a **Northeast Metro Tech High School** athletic practice/event on \_\_\_\_\_. The following are instructions to care for this athlete over the next few days. The athlete should adhere to the following:

- Do not drive a vehicle.
- Rest. No physical activity.
- Limit texting, computer use, and video games.
- Do not drink alcohol.
- Do not take Aspirin or Ibuprofen (Advil, Motrin).
- Tylenol may be acceptable if authorized by the certified athletic trainer or team physician.
- Sleep is all right, but if the athlete is experiencing moderate to severe symptoms someone should check on him/her periodically.

### **Signs and Symptoms of a Concussion**

Signs and symptoms of a concussion do not always present right away. Some may not present until hours after the initial trauma. Due to this fact, you should be aware of possible signs and symptoms that may indicate a significant concussion.

### **Physical / Emotional / Sleep Symptoms:**

Headache; Difficulty remembering; Behavioral changes; Sleep more than usual; Fatigue; Difficulty concentrating; Irritability; Sleep less than usual; Dizziness; Feeling slowed down; Sadness; Drowsiness; Sensitivity to light; Feeling in a fog; Feeling emotional; Trouble falling asleep; Sensitivity to noise; Slowed reaction times; Nervousness; Nausea; Altered attention; Anxiety; Balance problems; Amnesia; Loss of consciousness; Vision difficulty

### **If any of the Following Symptoms Occur, Seek Medical Attention as soon as possible:**

- Persistent or repeated vomiting
- Convulsions/seizure
- Difficulty seeing, any weird movements of the eyes, one pupil is larger than the other
- Restlessness, irritability, or drastic changes in emotional control
- Difficulty walking
- Difficulty speaking, slurred speech, repeating sentences or words
- Progressive or sudden impairment of consciousness
- Bleeding or drainage of fluid from the nose or ears

Certified Athletic Trainer Signature: \_\_\_\_\_ Date: \_\_\_\_\_