

A TRADITION OF EXCELLENCE FOR ALL



LYNCHBURG CITY SCHOOLS

# **Lynchburg City Schools Middle School Student-Athlete Handbook**

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## Introduction

This introduction is taken from the Lynchburg City Schools' Athletics Advisory Report, presented to the Lynchburg City School Board on May 17, 2011.

Lynchburg City Schools has maintained a strong, competitive, and vibrant athletics program. Historically, our programs have always been a source of pride for our students as well as the City as a whole. Competitive athletics is an integral and meaningful part of the Lynchburg City Schools' experience and contributes in unique and fundamental ways to the educational mission of the school division. Our athletics program is certainly aligned with the school division's current Mission Statement: "Every Child, By Name and By Need, to Graduation." The school division seeks an appropriate balance between academics and athletics. Aspiring for excellence in athletics is not antithetical to aspiring for excellence in the classroom. Indeed, aspirations to achieve greatness in all endeavors—certainly including athletics and academics—are essential to our mission. We do not believe anyone in the community should accept mediocrity in athletics. Certainly, no one will accept mediocrity in the achievement of our students in the classroom. The same is true on the playing field.

Athletics are an essential part of the middle school experience. Students benefit from the sense of belonging and commitment that comes through involvement in any extracurricular activity. The connection to a team is often the critical social link between students and their school. Students are more engaged in school when they are part of a team. Because school is more important to them, these students tend to achieve at higher levels. Due to their commitment to a team, these students also tend to care more about their classmates and their school. Participation in athletics continues to create bridges across racial, socio-economic, and ethnic divides in ways that participation in few other activities seems able to accomplish. Additionally, the importance of physical activity and competitive sports to the full development of young people is universally acknowledged. Vigorous adolescents need physical outlets for their energy and their competitive interests. They also want to continue their search for competence and excellence. Middle school athletics allows our students to improve their skills in a team context and to test themselves against competitive peers.

The personal lessons and benefits our students derive from practices, conditioning, and contests are well known: teamwork, a sense of belonging, focus, perseverance, accountability, leadership, time management, commitment, spirit, pride and grace in victory, humility and resilience in defeat. In no other extra-curricular venues can students learn such a wide and useful variety of life lessons. But sports also confer a number of valuable benefits upon the school community as a whole. Success in athletics and the availability of outstanding programs influence the choices families make about whether their children will be a part of our public school system. Teams that win and those that play hard even in defeat give not only students but alumni and the local community palpable and appropriate pride. Spectator sports and even so-called "minor" sports with relatively few spectators are capable of binding the community together.

We should never ignore the impact that sports can have on a community. Middle school sports are an important link to the broader Lynchburg community – providing an inexpensive and alternative form of entertainment for spectators of all ages—from children to retirees. Sports played well and with integrity provide one more public representation of some of the core values of our school system and community—fairness, civility, and excellence.

## **Middle School Athletic Guidelines**

### **To the Middle School Student Athlete**

Lynchburg City Schools provides the opportunity for students to participate on a variety of interscholastic teams. The privilege of membership on these teams also brings corresponding responsibilities. As a team member, you represent your community, your school, your teammates, and yourself. All of your actions as a team member reflect upon each of these aspects of your life.

The purpose of middle school athletics is to develop life-long habits of fitness, self-discipline, perseverance, personal improvement, sportsmanship, teamwork and fun.

### **Philosophy of the Middle School Program**

Lynchburg City Schools' philosophy of athletics is to offer a variety of competitive sports so that students have an opportunity to participate in athletic contests within the framework set forth by the Lynchburg City School Board. In offering this opportunity Lynchburg City Schools strives to instill in our youth both a competitive spirit and a spirit of good sportsmanship so that their participation in athletic contests brings honor to the student-athletes, to their school, and to their community.

A great athletic tradition is not built overnight; it takes the hard work of many young men and women. Such a tradition is worthy of the best efforts of all concerned.

Lynchburg City Schools' middle school athletic program promotes the success of the participants in meeting the challenges of life, making a positive adjustment and making a positive contribution to society. It is Lynchburg City Schools' belief that this goal can be accomplished by participation in a successful, well-rounded athletic program during the middle school years.

The contribution that you make to this athletic tradition will be a very satisfying accomplishment to you now and in years ahead.

### **The Student Athlete Should**

1. Be courteous to visiting teams and officials.
2. Play hard and to the limit of his/her ability, regardless of discouragement. The true athlete does not give up nor does he/she quarrel, cheat, bet or grandstand.
3. Retain his/her composure at all times and never leave the bench or enter the playing field/court to engage in a fight, confrontation, gesturing or bantering.
4. Be modest when successful and be gracious in defeat. A true athlete does not offer excuses for failure.
5. Maintain a high degree of physical fitness by observing team and training rules conscientiously.
6. Demonstrate loyalty to the school by maintaining a satisfactory scholastic standing and by participating in or supporting other school activities.
7. Play for the love of the game.
8. Understand and observe the rules of the game and the standards of eligibility.
9. Set a high standard of cleanliness, including proper dress and grooming for travel to away contests.
10. Respect the integrity and judgment of officials and accept their decisions without questions.
11. Respect the facilities of host schools and the trust entailed in being a guest.
12. Strive to exhibit the highest degree of sportsmanship.

### **Note**

Individual coaches of squads will have additional team rules that will be given to the players at the beginning of each season.

## Parent Responsibilities of Student Athletes

Parents have the responsibility to:

1. Make every effort to provide for the physical needs of their child, including well-balanced meals and plenty of sleep.
2. Keep informed of school policies, administrative decisions and academic requirements of any school program.
3. Ensure their child is appropriately attired at school and at school-sponsored activities.
4. Discuss work assignments, grades and report cards with their child.
5. Exhibit self-control and promote sportsmanlike behavior when attending games and practices, whether winning or losing.
6. Call the school during coaches' planning time or after school to discuss athletic issues.
7. Read the Middle School Athletic Handbook and sign and return the Code of Conduct.
8. Ensure their child's compliance with athletic attendance requirements and promptly report and explain absences and tardies to the coaches. **This is to include prompt arrival to and prompt departure from practices and games or school-sponsored functions.**

# Lynchburg City Schools' Middle School Athletic Participation Regulations

## Academic Eligibility Requirements

The purpose of these academic requirements is to help students improve their overall performance. The guidelines are not intended to punish a student for poor grades; instead, their intent is to provide students with both a sense of responsibility for their grades and an incentive to improve unsatisfactory academic performances.

## STUDENTS

Interscholastic Athletic Participation: Middle School Athletics: R 7-45 Middle School Student Athletes

### C. Middle School Student-Athletes

1. Coaches shall require each middle school student-athlete participating in middle school athletics to read the Lynchburg City Schools Middle School Student-Athlete Handbook.
2. Each middle school student-athlete and a parent/guardian shall sign a certification indicating compliance with number 1 above prior to engaging in any athletic practice. This shall be kept on file by the middle school athletic director.
3. Students must pass at least five subjects per semester to remain eligible.

### Study Hall

4. Student athletes receiving a grade in any subject of less than "C" on an interim or report card shall be assigned to study hall and shall remain in study hall until the next interim or report card on which all grade are "C" or better.

### Middle School Code of Conduct

All middle school students-athletes are subject to the following regulations:

1. It is a privilege, not a right, to participate on an interscholastic team. Therefore, this privilege can be revoked by the coach for improper conduct of a student-athlete at school or in the community.
2. A student-athlete who is apprehended by a school official for smoking, dipping, and/or chewing tobacco products will be ineligible to compete in interscholastic competition for one week. On the second offense, the student-athlete will be dismissed from the team for the remainder of the season.
3. On the first offense, an athlete who is caught stealing will be dismissed from the team for the remainder of the season.
4. Sale and/or distribution of drugs (including alcohol) - A student-athlete who is found to be either selling or distributing drugs/alcohol either on or off school grounds will be held responsible for his/her actions according to the policies, regulations, and practices of the Lynchburg City School Board.

5. Use/possession of drugs (including alcohol) - A student-athlete who is found to be either using or in possession of drugs (including alcohol) off school grounds will be held responsible for his/her actions according to the policies, regulations, and practices of the Lynchburg City School Board.
6. In order to be eligible to try out or to participate in any school-sponsored interscholastic athletic program, the student-athletes must submit to a physical examination and give the coach (or his/her designee) the completed examination, properly signed by the doctor, parent/guardian, and student-athlete. The physical examination must be conducted after May 1 for participation in athletics for the succeeding school year and must be completed before the student-athlete will be allowed to participate in interscholastic sports in any manner. This includes try-outs for cheerleading squads and all other teams.
7. No student-athlete will be allowed to try out for a team until outstanding obligations (including the return of equipment/uniforms from other interscholastic teams) have been met to the satisfaction of the building principal. Additionally, all required athletic forms (physical examination and code of conduct agreement) must be completed before an athlete is allowed to participate in interscholastic activities.
8. If a student-athlete is ejected from a contest by an official, the student-athlete will be required to sit out for one game.
9. The eligibility of student-athletes assigned in-school suspension shall be determined by the school administration.
10. Any suspension of 1-10 days (not including overnight suspension) will result in the suspended athlete being ineligible for practice or participation in interscholastic athletics or in any school function for the duration of the suspension. The suspended student-athlete will be required to appear before a committee composed of the principal, athletic director, and coach or sponsor of that team or activity to show just cause as to why the student athlete should be allowed to continue competition in that sport or activity. If sufficient cause is not presented, the student-athlete will be declared ineligible for the remainder of the season.
11. Absences from school on the day of an athletic event will jeopardize the student athlete's participation in that event(s). Failure to attend at least one-half of the student-athlete's classes on a given day will preclude that student from practice and/or a contest on that day (e.g. if a student-athlete has six classes he/she must fully attend three).

**Note:** It is important to attend all classes. All student athletes are encouraged to be in school for the full school day.

## **Administration of Violation of Team Rules**

The coach will suspend violators of team rules from practice, from games, or from the team – or take any other appropriate action he/she deems necessary. However, a committee composed of the coach, athletic director, and principal can be called on to hear an appeal of the penalty. The principal retains final judgment in these matters on the school level.

## **Transportation**

1. Parent(s)/Guardian(s) must grant written permission, including a signed medical release form for student athletes to participate in athletics. Adult chaperons must also submit an Emergency Medical Form. The signed form must be submitted to the coach or athletic director and the form must accompany the group on any trip away from the school building, including home events held at off-campus locations.
2. All student-athletes are expected to travel with his/her team to away events. It is at the coach's discretion to require the entire team to travel back to the school on the bus.
3. Privately owned cars may only be used in extenuating circumstances when a parent or guardian must provide transportation for his/her own child(ren) to an athletic event. The parent/guardian must secure prior approval of a building administrator.
4. Parents/guardians who are non-Lynchburg City School employees may not transport student athletes other than their own child (ren). Parents with extenuating circumstances, who make personal contact with the building principal or designee at least 24 hours preceding the athletic trip, may request an exception for that single event to have their child(ren) transported from an away contest by a specified parental designee. This exception request will be considered at the discretion of the building principal or designee and only granted with written documentation of the request for exception verified by the principal or designee.
5. Parents/Guardians who are Lynchburg City Schools' employees but not serving in an official school capacity may not transport athletes other than their own child (ren). Parents/Guardians who are Lynchburg City Schools' employees serving in an official school capacity who will be transporting student athletes other than their own child(ren) should refer to Policy 5-22.
6. Teachers/coaches may transport student athletes in a private vehicle to and from athletic events when necessary. Teachers/coaches who transport students to or from athletic events should refer to Policy 5-22.
7. Transportation to and from home events and practices is the responsibility of the student athlete/parent unless the school has provided other transportation. If transportation is provided by the school, student athletes must be transported by the vehicles provided by the school. Principals, athletic directors and coaches have the discretion to determine that any athletic contest held inside the city of Lynchburg can be considered a home athletic contest for transportation purposes. Off-campus home athletic events, practices and away events at a Lynchburg City Schools' site as on-site home athletic events and practices shall be treated the same.

8. If, after an event, the coach does not require a student-athlete to travel back to the school on the bus, the student-athlete may only travel home with his/her parent(s).
9. Cleats are not to be worn on Lynchburg City School buses.
10. A student-athlete will be held responsible for any damage he/she on a bus.
11. The school will be responsible for initiating the calls for repair of any damage sustained by the Lynchburg City Schools bus through athlete carelessness or athlete vandalism. The parent or student athlete is responsible for the cost of the repairs pursuant to School Board Policy 7-38.
12. After home games/activities and following the return to school from away events, student-athletes must have their own transportation home.
13. Student athletes are expected to abide by the regular school bus behavior regulations while making athletic trips.

### **Insurance Information**

**Please note that a student-athlete without health insurance coverage may NOT try-out or practice with a team or participate in athletic events unless health insurance has been obtained for that student.**

1. All student-athletes must be covered by health insurance. They may be covered under private insurance, individually purchased school insurance, or the \*FAMIS program. No student-athletes may practice or be in any way a part of an athletic team without some type of health insurance. If your child is currently not insured and you would like to purchase school insurance, the student-athlete should contact the athletic director at their school for the insurance form.

All student-athletes who want to purchase school insurance should give the following two items to the middle school athletic director: a check written directly to the insurance company for the entire premium for the type of insurance being purchased; and the completed and signed application for school insurance. The athletic director will submit insurance applications for athletes to the department of finance.

**\* Student-athletes eighteen (18) and under who may not be able to afford private or school health insurance may qualify for the Family Access to Medical Insurance Security (FAMIS) Plan. Contact the FAMIS Outreach Coordinator at the Johnson Health Center (Lynchburg) for more information or parents may call toll-free:**

**1-866-87FAMIS (1-866-873-2647)**

**TDD users ONLY call, 1-888-221-1590**

**8:00 am to 7:00 pm, Monday – Friday 9:00 a.m. to 12:00 noon, Saturday or contact the local department of social services.**

**INSURANCE INFORMATION**  
**Parent Please Fill Out**

For the 2015-16 school year, all LCS secondary student-athletes who compete on an LCS athletic team and are listed on the school's eligibility form (the VHSL Master Eligibility Form for the high schools) are covered by a blanket policy which LCS has purchased. This policy is the Basic Plan through Markel Insurance Company. The policy number is 15545077-0. However, we also need to know if you have any other type of medical insurance coverage on your son or daughter. Please complete the information below as it applies to health insurance coverage for your student-athlete.

Please check the appropriate box. If you checked box number 2, then complete all requested information.

1. Other than the blanket policy which LCS is providing, my son/daughter is not covered by any other form of health insurance.  
 2. Private Insurance

Name of Company \_\_\_\_\_  
Policy number \_\_\_\_\_  
Phone number of Insurance Co. \_\_\_\_\_

*(The phone number of insurance company must be supplied so that health provider can verify insurance coverage.)*

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**EMERGENCY AND MEDICAL INFORMATION**

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_ Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_

Phone (H) \_\_\_\_\_ (Work-Mother) \_\_\_\_\_ (Work-Father) \_\_\_\_\_ (Other) \_\_\_\_\_

Two persons we can call in the event you cannot be reached: 1. \_\_\_\_\_ Phone: \_\_\_\_\_

2. \_\_\_\_\_ Phone: \_\_\_\_\_

Major Illness? \_\_\_\_\_

Medication? \_\_\_\_\_

Allergies? \_\_\_\_\_

Previous head or neck injury? \_\_\_\_\_

Prior head-related problems? \_\_\_\_\_

Wears contact lenses while playing? \_\_\_\_\_

Braces or retainers? \_\_\_\_\_

Last Tetanus shot? \_\_\_\_\_

Are pupils unequal in size \_\_\_\_\_

If unequal, which is larger? \_\_\_\_\_ L \_\_\_\_\_ R

Preference of Physicians: 1. \_\_\_\_\_ Phone \_\_\_\_\_

2. \_\_\_\_\_ Phone \_\_\_\_\_

If neither physician is available, do we have your permission to take your child to a hospital or available physician? \_\_\_\_\_

I hereby give my permission to the team physician(s) to provide medical services to my child.

Parent/Guardian Signature \_\_\_\_\_

*(Required)*

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**ATHLETIC TRAINER**  
**(School Use Only)**

Date of valid physical \_\_\_\_\_ Comments \_\_\_\_\_

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**TIME LOSS INJURY RECORD**

DATE	DIAGNOSIS	TIME LOSS
_____	_____	_____
_____	_____	_____
_____	_____	_____

**MIDDLE SCHOOL CODE OF CONDUCT  
AND ELIGIBILITY REQUIREMENTS FOR ATHLETES OF LYNCHBURG CITY SCHOOLS**

1. It is a privilege, not a right, to participate on an interscholastic team. Therefore, this privilege can be revoked by the team's coach for improper conduct of a student at school or in the community. Any appeal of the revocation of this privilege may be made through the athletic director's office.
2. An athlete must be a regularly enrolled student in good standing. (Good standing is interpreted as having a record of good personal conduct.)
3. An athlete must not have reached the age of 15 years prior to August 1<sup>st</sup> of the school year.
4. **Tobacco:** An athlete who is witnessed by a school official smoking, dipping, and/or chewing tobacco products will be ineligible to compete in interscholastic competition for one week. A second offense will result in dismissal from the team for the remainder of the athletic season.
5. **Theft:** On the athlete's first offense, an athlete who steals while on school grounds or at a school event will be dismissed from the team for the remainder of the athletic season and subject to further disciplinary action.
6. **Sale and/or Distribution of Drugs (including alcohol):** On the first offense, an athlete who is found to be selling or distributing drugs/alcohol on school grounds or at a school event during the athletic season will be ineligible for athletic participation of any kind until officially reinstated in school and academically eligible for athletic participation. The student will be subject to disciplinary action by the school as well as criminal charges through the court system.
7. **Use/Possession of Drugs (including alcohol):** An athlete who is found to be either using or in possession of drugs/alcohol on or off school grounds will be suspended from interscholastic competition for the rest of the school year.
8. **Up-to-Date Physical:** In order to be eligible to try out for or to participate in any school-sponsored interscholastic athletic program, the student must agree to submit to a physical examination. The physical exam must be conducted after May 1 for participation in athletics for the succeeding school year and must be completed before the student will be allowed to participate in any manner. The requirement for a completed physical includes try-outs for all cheerleading squads. The student must give the coach (or his/her designee) the completed examination, properly signed by the doctor, parent/guardian, and student.
9. **Sportsmanship:** If an athlete is ejected from a contest by an official, the player will not participate in the next contest unless successfully appealed. The incident will be reviewed by the coach, player, athletic director, and the school administration prior to final action taken by the administration. Action could range from no additional restrictions to suspension for the rest of the season.
10. **School Suspension:** A suspension from school (not including overnight conferences) will result in the suspended student being declared ineligible for practice or participation in athletics or in any school function for the duration of the suspension. The suspended student will be required to meet with the principal, athletic director, and coach or sponsor of that team or activity to show just cause as to why the student should be allowed to continue competition in that sport or activity. If sufficient cause is not presented, the student will be declared ineligible for the remainder of that season or activity.
11. **In-school Detention:** The eligibility of a student assigned in-school detention shall be determined by the school administration.
12. **Attendance Zone:** Any questions about eligibility to participate because of a student's residency must be referred to the school's athletic director.
13. **Academic Eligibility:** Athletes must pass 5 subjects the preceding semester.
14. **Absences:** Absences on the day of an athletic event will jeopardize the athlete's participation in that event(s). Failure to attend at least one-half of the athlete's class on a given day will preclude that student from practice and/or a contest on that day (e.g. if you have 8 classes you must fully attend 4).
15. **Obligations:** No student will be allowed to try out for a team until outstanding obligations (including the return of equipment/uniforms from other interscholastic teams) are met and required athletic forms are completed (code of conduct and medical examination/physical).

My signature verifies that all relevant athletic policies of Lynchburg City Schools, including team rules for the sports listed below, have been explained to me. I understand and accept the above criteria and the Code of Conduct for Athletes of Lynchburg City Schools as prerequisites to being allowed to participate on an athletic squad. If I am unclear about any policies, it is my responsibility to contact my coach or athletic director.

SPORT	PARENT SIGNATURE	DATE	STUDENT SIGNATURE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## ATHLETIC DIRECTORS

Linkhorne Middle School

Charles Tucker

Paul Laurence Dunbar School for Innovation

Karl Loos

Sandusky Middle School

Lewis Watson

## CONTACT INFORMATION

### Linkhorne Middle School

School Telephone - (434) 515-5330

Web Site for Schedules: <http://www.lcsedu.net/schools/lms/athletics>

### Paul Laurence Dunbar School for Innovation

School Telephone - (434) 515-5310

Web Site for Schedules: <http://www.lcsedu.net/schools/dms/athletics>

### Sandusky Middle School

School Telephone - (434) 515-5350

Web Site for Schedules: <http://www.lcsedu.net/schools/sms/athletics>

### Fall

Football  
Cheerleading  
Cross Country  
Volleyball  
Girls' Tennis

### Winter

Girls' Basketball  
Boys' Basketball  
Cheerleading  
Wrestling

### Spring

Boys' Tennis  
Girls' Soccer  
Boys' Soccer  
Track

**Seminole District**

**Concussion**

**Management**

**Policies and Procedures**

## Introduction

Pursuant to Senate Bill 652, the 2010 General Assembly amended the *Code of Virginia* to include § 22.1-271.5 directing the Board of Education to develop and distribute to school divisions by July 1, 2011, guidelines for policies dealing with concussions in student-athletes, and requiring each school division to develop policies and procedures regarding the identification and handling of suspected concussions in student-athletes.

The goals of the Student-Athlete Protection Act (SB 652) are to ensure that student-athletes who sustain concussions are properly diagnosed, given adequate time to heal, and are comprehensively supported until they are symptom free. According to the Consensus Statement on Concussion in Sport (3<sup>rd</sup> International Conference on Concussion in Sport, Zurich, November 2008), “the cornerstone of concussion management is physical and cognitive rest until symptoms resolve and then a graded program of exertion prior to medical clearance and return to play.”

The Brain Injury Association of Virginia notes that it is important for all education professionals to be aware of the issues surrounding brain injuries and how they can affect the student’s abilities in the educational setting. Resulting impairments can be multifaceted and can include cognitive, behavioral, and/or physical deficits. Impairments can be mild or severe, temporary or permanent, resulting in partial or total loss of function. Because these deficits are so varied and unpredictable, it is difficult to forecast the recovery for a student with a brain injury.

## Definitions(s)

A **concussion** is a brain injury that is characterized by an onset of impairment of cognitive and/or physical functioning, and is caused by a blow to the head, face or neck, or a blow to the body that causes a sudden jarring of the head (i.e., a helmet to the head, being knocked to the ground). A concussion can occur with or without a loss of consciousness, and proper management is essential to the immediate safety and long-term future of the injured individual. A concussion can be difficult to diagnose, and failing to recognize the signs and symptoms in a timely fashion can have dire consequences.

Most athletes who experience a concussion can recover completely as long as they do not return to play prematurely. The effects of repeated concussions can be cumulative, and after a concussion, there is a period in which the brain is particularly vulnerable to further injury. If an athlete sustains a second concussion during this period, the risk of permanent brain injury increases significantly and the consequences of a seemingly mild second concussion can be very severe, and even result in death (i.e., “second impact syndrome”).

**Appropriate licensed health care provider** means a physician, physician assistant, osteopath or athletic trainer licensed by the Virginia Board of Medicine; a neuropsychologist licensed by the Board of Psychology; or a nurse practitioner licensed by the Virginia State Board of Nursing.

**Return to play** means participate in a non-medically supervised practice or athletic competition.

An Act to amend the Code of Virginia by adding a section numbered [22.1-271.5](#), relating to policies for student-athletes with concussions.

[S 652]

Approved April 11, 2010

Be it enacted by the General Assembly of Virginia:

1. That the Code of Virginia is amended by adding a section numbered [22.1-271.5](#) as follows:

§ [22.1-271.5](#). *Policies on concussions in student-athletes.*

*A. The Board of Education shall develop and distribute to each local school division guidelines on policies to inform and educate coaches, student-athletes, and their parents or guardians of the nature and risk of concussions, criteria for removal from and return to play, and risks of not reporting the injury and continuing to play.*

*B. Each local school division shall develop policies and procedures regarding the identification and handling of suspected concussions in student-athletes. Such policies shall require:*

*1. In order to participate in any extracurricular physical activity, each student-athlete and the student-athlete's parent or guardian shall review, on an annual basis, information on concussions provided by the local school division. After having reviewed materials describing the short- and long-term health effects of concussions, each student-athlete and the student-athlete's parent or guardian shall sign a statement acknowledging receipt of such information, in a manner approved by the Board of Education; and*

*2. A student-athlete suspected by that student-athlete's coach, athletic trainer, or team physician of sustaining a concussion or brain injury in a practice or game shall be removed from the activity at that time. A student-athlete who has been removed from play, evaluated, and suspected to have a concussion or brain injury shall not return to play that same day nor until (i) evaluated by an appropriate licensed health care provider as determined by the Board of Education and (ii) in receipt of written clearance to return to play from such licensed health care provider.*

*The licensed health care provider evaluating student-athletes suspected of having a concussion or brain injury may be a volunteer.*

*C. In addition, local school divisions may provide the guidelines to organizations sponsoring athletic activity for student-athletes on school property. Local school divisions shall not be required to enforce compliance with such policies.*

2. That the Board of Education, in developing the policies pursuant to subsection A of § [22.1-271.5](#), shall work with the Virginia High School League, the Department of Health, the Virginia Athletic Trainers Association, representatives of the Children's Hospital of the King's Daughters and the Children's National Medical Center, the Brain Injury Association of Virginia, the American Academy of Pediatrics, the Virginia College of Emergency Physicians and other interested stakeholders.

3. That the policies of the Board of Education developed pursuant to subsection A of § [22.1-271.5](#) shall become effective on July 1, 2011.

## School Name

### Concussion Management Policies and Procedures

- I. In order to participate in any extracurricular athletic activity, all student-athletes and the student-athlete's parent or guardian must review information on concussions provided by School Name. After reviewing the materials describing the short- and long-term health effects of concussions, each student-athlete and the student-athlete's parent or guardian must sign the Acknowledgement of the Health Effects of Concussion (Attachment 1) which ensures receipt, review, and understanding of the information. This must be performed annually.
- II. School Name will develop and implement a concussion management plan (Attachment 2) that outlines the roles of the sports medicine staff (Team Physician, Certified Athletic Trainer, Athletic Director, Physician Assistant, Neurologist).
  - a. Every athlete will have a baseline assessment available to them. The baseline assessment information will be gathered by the use of one or more of the following tools: Sideline Assessment of Concussion (Attachment 3) and/or ImPACT, which is a computerized neurocognitive assessment tool. The same baseline assessment tools will be used post injury. However, these assessments will not be the sole criteria to determine the presence or absence of a concussion. A comprehensive assessment will be performed by the sports medicine staff.
  - b. A student-athlete suspected by a coach, athletic trainer, or team physician of sustaining a concussion or brain injury during a practice or game will be removed from the activity and will not return to play that same day. They must be evaluated by an appropriate licensed health care provider and receive written clearance to return to play from such licensed health care provider (Attachment 4). The licensed health care provider evaluating student-athletes suspected of having a concussion or brain injury may be a volunteer.
  - c. Appropriate licensed health care provider means a physician, physician assistant, osteopath or athletic trainer licensed by the Virginia Board of Medicine; a neuropsychologist licensed by the Board of Psychology; or a nurse practitioner licensed by the Virginia State Board of Nursing.
  - d. No member of School Name athletic team may participate in any athletic event or practice the same day he or she has been diagnosed with a concussion or exhibits signs, symptoms or behaviors attributable to a concussion. No member of School Name athletic team may return to participation in an athletic event or training on the days after he/she experiences a concussion unless all of the following conditions have been met:
    - i. the student no longer exhibits signs, symptoms or behaviors consistent with a concussion, at rest or with exertion;
    - ii. the student is asymptomatic during, or following periods of supervised exercise that is gradually intensifying (Attachment 5); and
    - iii. the student receives a written medical release (Attachment 4) from a licensed health care provider.
  - e. Written home instructions will be provided and explained to the student-athlete as well as the parent or guardian. (Attachment 6)
  - f. Sports medicine staff members shall be empowered to determine management and return-to-play for all injured student-athletes, as deemed appropriate. Conflicts or concerns will be forwarded to individual schools Athletic Director, Administrator, and/or Team Physician for remediation.

- g. All student-athletes diagnosed with a concussion will be documented by the sports medicine staff. This documentation will include injury evaluation, management, and clearance to return to play.
- III. The School Name concussion policy team will refine and review local concussion management policies on an annual basis. The team shall consist of at a minimum but not be limited to a school administrator, athletic administrator, appropriate licensed health care provider, coach, parent, and student.
- IV. Helmet replacement and reconditions policies and procedures
- a. Helmets must be National Operating Committee on Standards for Athletic Equipment (NOCSAE) certified by the manufacturer at the time of purchase.
  - b. Reconditioned helmets must be NOCSAE recertified by the reconditioner.
- V. Training required for personnel and volunteers
- a. School Name will ensure school staff, coaches, athletic trainers, team physicians, and volunteers receive current training annually on:
    - i. how to recognize the signs and symptoms of a concussion;
    - ii. strategies to reduce the risk of concussions;
    - iii. how to seek proper medical treatment for a person suspected of having a concussion; and
    - iv. when the athlete may safely return to the event or training.
  - b. All coaches will be given a copy of the concussion management plan, a concussion fact sheet, and will view a video on concussions each year.
    - i. (See Attachments 2, 7, 8, 9)
    - ii. Video selection is determined by the School Name `sports medicine staff.
  - c. The concussion policy management team will ensure training is current and consistent with best practice protocols.
  - d. School Name will maintain a tracking system to document compliance with the annual training requirement. This documentation will be maintained by the Athletic Director and/or Athletic Trainer at School Name.
  - e. Annual training on concussion management will use a reputable program such as, but not limited to, the following:
    - i. The Centers 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](http://www.cdc.gov/concussion/HeadsUp/online_training.html).
      - 1. (Attachments 7, 8, 9)
    - ii. The National Federation of State High School Associations' (NFHS) online coach education course – Concussion in Sports – What You Need to Know. This CDC-endorsed program provides a guide to understanding, recognizing and properly managing concussions in high school sports. It is available at [www.nfhslearn.com](http://www.nfhslearn.com).

Approved by: \_\_\_\_\_ Superintendent

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

Approved by: \_\_\_\_\_ Principal

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

Approved by: \_\_\_\_\_ Athletic Director

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

Approved by: \_\_\_\_\_ Athletic Trainer

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

Approved by: \_\_\_\_\_ Team Physician

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

# Attachment 1

# Acknowledgement of the Health Effects of Concussions

## Parent/Guardian Acknowledgement

I have received, reviewed and understand the concussion information on the “Heads-Up” handout that was given to me. I promise to seek help from an appropriate licensed healthcare provider if I suspect that my child has sustained a concussion or is showing signs or symptoms of a concussion.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

## Student-Athlete Acknowledgement

I have received, reviewed and understand the concussion information on the “Heads-Up” handout that was given to me. I will seek help from an appropriate licensed healthcare provider if I suspect that I have sustained a head injury. I will be truthful with my coaches and medical staff when reporting injuries, including head injuries.

\_\_\_\_\_  
Printed Name

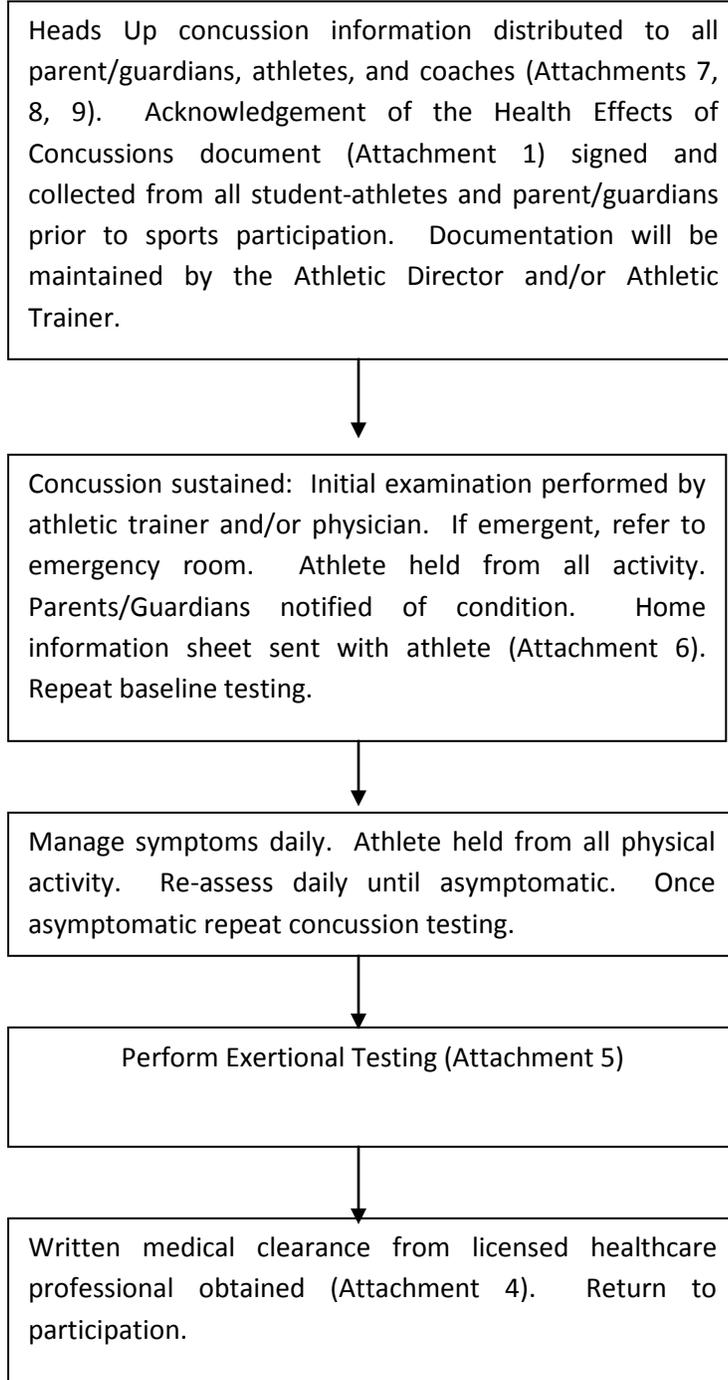
\_\_\_\_\_  
Student-Athlete Signature

\_\_\_\_\_  
Date

Please return this form along with your physical to your Coach, Athletic Trainer, or Administrator. Per the Seminole District Concussion Policy, you will not be able to play until this form and the physical are completed.

# **Attachment 2**

## Concussion Management Plan



# **Attachment 3**

## SIDELINE ASSESSMENT OF CONCUSSION

Name: \_\_\_\_\_  
 Team: \_\_\_\_\_ Examiner: \_\_\_\_\_  
 Date of Exam: \_\_\_\_\_ Time: \_\_\_\_\_  
 Exam (circle one): **Blind** **Injury** **Post-Game**

**Neurologic Screening**  
 Loss of consciousness: Y N  
 Witnessed Unresponsiveness: Length: \_\_\_\_\_  
 Post Traumatic Amnesia Y N  
 Retrograde Amnesia Y N  
Normal Abnormal

*Strength*  
 Right Upper Extremity    
 Left Upper Extremity    
 Right Lower Extremity    
 Left Lower Extremity    
*Sensation (Romberg)*    
*Coordination (Tandem Walk)*

### Symptom Evaluation

How do you feel?

*You should score yourself on the following symptoms, base on how you feel now at the time of this evaluation*

Symptom	None	Mild	Moderate	Severe
Headache				
'Pressure in head'				
Neck Pain				
Nausea or vomiting				
Dizziness				
Blurred vision				
Balance problems				
Sensitivity to light				
Sensitivity to noise				
Feeling slowed down				
Feeling like 'in a fog'				
'Don't feel right'				
Difficulty concentrating				
Difficulty remembering				
Fatigue or low energy				
Confusion				
Drowsiness				
Trouble falling asleep				
More emotional				
Irritability				
Sadness				

Total number of symptoms (max possible 21)

Do the symptoms get worse with physical activity Y N

Do the symptoms get worse with mental activity Y N

If you know the athlete well prior to the injury, how different is the athlete acting compared to his/her normal self?

*Please circle one response* No different    Very different    Unsure

I. **ORIENTATION**

Month of the year	0	1
Date	0	1
Day of the week	0	1
Year	0	1
Time	0	1
<b>Orientation Total Score:</b>	<b>/5</b>	

II. **IMMEDIATE MEMORY**

All 3 trials are completed regardless of score on trial 1 & 2; score equals sum across all 3 trials			
List	Trial 1	Trial 2	Trial 3
Elbow	0 1	0 1	0 1
Apple	0 1	0 1	0 1
Carpet	0 1	0 1	0 1
Saddle	0 1	0 1	0 1
Bubble	0 1	0 1	0 1
<b>Total Immediate Memory Recall</b>	<b>/15</b>		
<i>Note: Do not inform the subject that delayed recall will be tested</i>			

III. **NEUROLOGICAL SCREENING**

Recollection of injury (pre- or post-traumatic amnesia):
Strength:
Sensation:
Coordination:

IV. **CONCENTRATION**

<b>Digits Backwards:</b> If correct, go to the next string length. If incorrect, read the second trial. Stop after incorrect on both trials.		
4-9-3	6-2-9	0 1
3-8-1-4	3-2-7-9	0 1
6-2-9-7-1	1-5-2-8-6	0 1
7-1-8-4-6-2	5-3-9-1-4-8	0 1
<b>Month of the Year in Reverse Order:</b> Athlete must recite entire reverse sequence correctly.		
Dec-Nov-Oct- Sept-Aug-Jul-Jun-May-Apr-Mar-Feb-Jan		0 1
<b>Total Concentration Score:</b>	<b>/5</b>	

V. **DELAYED MEMORY RECALL**

List	Trial 1
Elbow	0 1
Apple	0 1
Carpet	0 1
Saddle	0 1
Bubble	0 1
<b>Total Delayed Memory Recall</b>	<b>/5</b>

**SUMMARY OF TOTAL SCORES**

<b>Orientation</b>	<b>/5</b>
<b>Immediate Memory</b>	<b>/15</b>
<b>Concentration</b>	<b>/5</b>
<b>Delayed Memory Recall</b>	<b>/5</b>
<b>Overall Total Score</b>	<b>/30</b>

# **Attachment 4**

# Concussion Return to Play Clearance Form

This release is to certify that \_\_\_\_\_ has been examined  
(Student-athlete's name)

due to experiencing the signs, symptoms and behaviors consistent with a concussion.

Following an examination, it is my medical opinion that he/she:

\_\_\_\_\_ **Is unable to return to any participation in athletics until further notice.**

**Return appointment scheduled on the following date** \_\_\_\_\_

\_\_\_\_\_ **May return to full participation in athletics on** \_\_\_\_\_  
(Date)

The above named student/athlete has met the protocol for return to play as set forth by the Virginia Board of Education Guidelines.

- a. the student no longer exhibits signs, symptoms or behaviors consistent with a concussion, at rest or with exertion;
- b. the student is asymptomatic during, or following periods of supervised exercise that is gradually intensifying; and
- c. the student receives a written medical release from a licensed health care provider.

\_\_\_\_\_  
**Appropriate Health Care Provider's Name** (Type or print) **Date**  
(As defined by the Virginia Board of Education)

\_\_\_\_\_  
**Appropriate Health Care Provider's Signature** **Phone Number**

**Note: Appropriate licensed health care provider** means a physician, physician assistant, osteopath or athletic trainer licensed by the Virginia Board of Medicine; a neuropsychologist licensed by the Board of Psychology; or a nurse practitioner licensed by the Virginia State Board of Nursing.

## Graduated Return to Play Guidelines

Rehabilitation stage	Functional exercise at each stage of rehabilitation	Objective of each stage
No Activity	Complete physical and cognitive rest	Recovery
Light Aerobic Exercise	Walking, swimming or stationary cycling keeping intensity <70% maximum predicted heart rate No Resistance training	Increased Heart Rate
Sport Specific Exercise	Skating drills in ice hockey, running drills in soccer. No head impact activities	Add Movement
Non-Contact Training Drills	Progression to more complex training drills, Such as passing drills in football and ice hockey May start progressive resistance training	Exercise, coordination, and cognitive load
Full Contact Practice	Following medical clearance: Participate in normal training activities	Restore confidence and assess functional skills by coaching staff
Return to Play	Normal game play	

As the baseline step of the Return to Play Progression, the athlete needs to have completed physical and cognitive rest and not be experiencing concussion symptoms for a minimum of 24 hours. Keep in mind, the younger the athlete, the more conservative the treatment.

It is important to monitor symptoms and cognitive function carefully during each increase of exertion. Athletes should only progress to the next level of exertion if they are not experiencing symptoms at the current level. If symptoms return at any step, an athlete should stop these activities as this may be a sign the athlete is pushing too hard. Only after additional rest, when the athlete is once again not experiencing symptoms for a minimum of 24 hours, should he or she start again at the previous step during which symptoms were experienced.

The Return to Play Progression process is best conducted through a team approach and by a health care professional who knows the athlete's physical abilities and endurance. By gauging the athlete's performance on each individual step, a health care professional will be able to determine how far to progress the athlete on a given day. In some cases, the athlete may be able to work through one step in a single day, while in other cases it may take several days to work through an individual step. It may take several weeks to months to work through the entire progression.

# **Attachment 5**

## Exertional Testing Protocol Following Concussion

1. 5-15 minutes of cardiovascular exercise; exercise intensity < 70% maximum predicted heart rate
2. Strength training: (i.e. push-ups, sit-ups, squats thrusts)
3. Advanced cardiovascular training: sprint activities
4. Advanced strength training: weight lifting exercises
5. Sport specific agility drills (no risk of contact)

If there is no change or reoccurrence of symptoms the athlete may progress to a **non-contact practice session**.

The athlete may return to full sport participation once this protocol is completed and they have written medical clearance from a licensed healthcare professional.

This protocol should be completed over the minimum of two (2) days. If at any time symptoms should reoccur, all activity will be stopped and athlete will be re-evaluated and held from activity until asymptomatic.

# **Attachment 6**

## Concussion Home Instruction Sheet

The \_\_\_\_\_ High School sports medicine staff would like to inform you that \_\_\_\_\_ sustained a concussion during \_\_\_\_\_ on \_\_/\_\_/\_\_. He/she was evaluated by \_\_\_\_\_ and will undergo additional concussion testing today/tomorrow. A concussion or mild traumatic brain injury can cause a variety of physical, cognitive, and emotional symptoms. Concussions range in severity from minor to major, but they all temporarily interfere with the way your brain works. It is important to understand that during the next few weeks this athlete may experience one or more of these signs and symptoms.

Headache	Nausea
Balance Problems	Dizziness
Diplopia - Double Vision	Confusion
Photophobia – Light Sensitivity	Difficulty Sleeping
Misophonia – Noise Sensitivity	Blurred Vision
Feeling Sluggish or Groggy	Memory Problems
Difficulty Concentrating	

Following a concussion your brain needs time to heal. **Until you completely recover from your concussion, you will be held out of all athletic activity.** 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. While your brain is still healing, you are much more likely to have a repeat concussion. In rare cases, repeat concussions can cause permanent brain damage, and even death. Severe brain injury can change your whole life.

### WATCH FOR ANY OF THE FOLLOWING PROBLEMS:

Worsening headache	Stumbling/loss of balance
Vomiting	Weakness in one arm/leg
Decreased level of Consciousness	Blurred Vision
Dilated Pupils	Increased irritability
Increased Confusion	

If any of the above symptoms appear or increase, please seek medical attention immediately.

If you have any questions or concerns you may contact your Athletic Trainer, Physician, or nearest hospital.

Athletic Trainer \_\_\_\_\_ Phone \_\_\_\_\_

Physician \_\_\_\_\_ Phone \_\_\_\_\_

Hospital \_\_\_\_\_ Phone \_\_\_\_\_

When your symptoms are completely gone and your concussion testing results have returned to a normal level, you will perform exertional testing under the supervision of your athletic trainer. **Before returning to your sport, you must have written medical clearance from a licensed healthcare professional.**

### Daily School Schedule

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

Grade: \_\_\_\_\_

Date of Injury: \_\_\_\_\_

Period	Class	Teacher
1		
2		
3		
4		
5		
6		
7		

# Attachment 7

# 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](http://www.cdc.gov/Concussion).

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR DISEASE CONTROL AND PREVENTION



# **Attachment 8**

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

### 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](http://www.cdc.gov/Concussion).

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR DISEASE CONTROL AND PREVENTION



# Attachment 9



## HEADS UP CONCUSSION IN YOUTH SPORTS

## A Fact Sheet for **COACHES**

To download the coaches fact sheet in Spanish, please visit [www.cdc.gov/ConcussionInYouthSports](http://www.cdc.gov/ConcussionInYouthSports)  
Para descargar la hoja informativa para los entrenadores en español, por favor visite:  
[www.cdc.gov/ConcussionInYouthSports](http://www.cdc.gov/ConcussionInYouthSports)

### THE FACTS

- A concussion is a **brain injury**.
- All concussions are **serious**.
- Concussions can occur **without** loss of consciousness.
- Concussions can occur **in any sport**.
- Recognition and proper management of concussions when they **first occur** can help prevent further injury or even death.

### WHAT IS A CONCUSSION?

A concussion is an injury that changes how the cells in the brain normally work. A concussion is caused by a blow to the head or body that causes the brain to move rapidly inside the skull. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious. Concussions can also result from a fall or from players colliding with each other or with obstacles, such as a goalpost.

The potential for concussions is greatest in athletic environments where collisions are common.<sup>1</sup> Concussions can occur, however, in **any** organized or unorganized sport or

recreational activity. As many as 3.8 million sports- and recreation-related concussions occur in the United States each year.<sup>2</sup>

### RECOGNIZING A POSSIBLE CONCUSSION

To help recognize a concussion, you should watch for the following two things among your athletes:

1. A forceful blow to the head or body that results in rapid movement of the head.
- and-
2. Any change in the athlete’s behavior, thinking, or physical functioning. (See the signs and symptoms of concussion listed on the next page.)

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



## SIGNS AND SYMPTOMS

### SIGNS OBSERVED BY COACHING STAFF

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets sports plays
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows behavior or personality changes
- Can't recall events prior to hit or fall
- Can't recall events after hit or fall

### SYMPTOMS REPORTED BY ATHLETE

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Does not "feel right"

*Adapted from Lovell et al. 2004*

Athletes who experience any of these signs or symptoms after a bump or blow to the head should be kept from play until given permission to return to play by a health care professional with experience in evaluating for concussion. Signs and symptoms of concussion can last from several minutes to days, weeks, months, or even longer in some cases.

Remember, you can't see a concussion and some athletes may not experience and/or report symptoms until hours or days after the injury. If you have any suspicion that your athlete has a concussion, you should keep the athlete out of the game or practice.

### PREVENTION AND PREPARATION

As a coach, you can play a key role in preventing concussions and responding to them properly when they occur. Here are some steps you can take to ensure the best outcome for your athletes and the team:

- **Educate athletes and parents about concussion.** Talk with athletes and their parents about the dangers and potential long-term consequences of concussion. For more information on long-term effects of concussion, view the following online video clip: [http://www.cdc.gov/ncipc/tbi/Coaches\\_Tool\\_Kit.htm#Video](http://www.cdc.gov/ncipc/tbi/Coaches_Tool_Kit.htm#Video).



Explain your concerns about concussion and your expectations of safe play to athletes, parents, and assistant coaches. Pass out the concussion fact sheets for athletes and for parents at the beginning of the season and again if a concussion occurs.

- **Insist that safety comes first.**
  - Teach athletes safe playing techniques and encourage them to follow the rules of play.
  - Encourage athletes to practice good sportsmanship at all times.
  - Make sure athletes wear the right protective equipment for their activity (such as helmets, padding, shin guards, and eye and mouth guards). Protective equipment should fit properly, be well maintained, and be worn consistently and correctly.
  - Review the athlete fact sheet with your team to help them recognize the signs and symptoms of a concussion.

Check with your youth sports league or administrator about concussion policies. Concussion policy statements can be developed to include the league's commitment to safety, a brief description of concussion, and information on when athletes can safely return to play following a concussion (i.e., an athlete with known or suspected concussion should be kept

from play until evaluated and given permission to return by a health care professional). Parents and athletes should sign the concussion policy statement at the beginning of the sports season.

- **Teach athletes and parents that it's not smart to play with a concussion.**

Sometimes players and parents wrongly believe that it shows strength and courage to play injured. Discourage others from pressuring injured athletes to play. Don't let athletes persuade you that they're "just fine" after they have sustained any bump or blow to the head. Ask if players have ever had a concussion.
- **Prevent long-term problems.** 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 brain swelling, permanent brain damage, and even death. This more serious condition is called *second impact syndrome*.<sup>4,5</sup> Keep athletes with known or suspected concussion from play until they have been evaluated and given permission to return to play by a health care professional with experience in evaluating for concussion. Remind your athletes: "It's better to miss one game than the whole season."

## ACTION PLAN

### WHAT SHOULD A COACH DO WHEN A CONCUSSION IS SUSPECTED?

- 1. Remove the athlete from play.** Look for the signs and symptoms of a concussion if your athlete has experienced a bump or blow to the head. Athletes who experience signs or symptoms of concussion should not be allowed to return to play. When in doubt, keep the athlete out of play.
- 2. Ensure that the athlete is evaluated right away by an appropriate health care professional.** Do not try to judge the severity of the injury yourself. Health care professionals have a number of methods that they can use to assess the severity of concussions. As a coach, recording the following information can help health care professionals in assessing the athlete after the injury:
  - Cause of the injury and force of the hit or blow to the head
  - Any loss of consciousness (passed out/knocked out) and if so, for how long
  - Any memory loss immediately following the injury
  - Any seizures immediately following the injury
  - Number of previous concussions (if any)

- 3. Inform the athlete's parents or guardians about the possible concussion and give them the fact sheet on concussion.**

Make sure they know that the athlete should be seen by a health care professional experienced in evaluating for concussion.

- 4. Allow the athlete to return to play only with permission from a health care professional with experience in evaluating for concussion.** A repeat concussion that

occurs before the brain recovers from the first can slow recovery or increase the likelihood of having long-term problems. Prevent common long-term problems and the rare *second impact syndrome* by delaying the athlete's return to the activity until the player receives appropriate medical evaluation and approval for return to play.

### REFERENCES

1. Powell JW. Cerebral concussion: causes, effects, and risks in sports. *Journal of Athletic Training* 2001; 36(3):307-311.
2. Langlois JA, Rutland-Brown W, Wald M. The epidemiology and impact of traumatic brain injury: a brief overview. *Journal of Head Trauma Rehabilitation* 2006; 21(5):375-378.
3. Lovell MR, Collins MW, Iverson GL, Johnston KM, Bradley JP. Grade 1 or "ding" concussions in high school athletes. *The American Journal of Sports Medicine* 2004; 32(1):47-54.
4. Institute of Medicine (US). Is soccer bad for children's heads? Summary of the IOM Workshop on Neuropsychological Consequences of Head Impact in Youth Soccer. Washington (DC): National Academy Press; 2002.
5. Centers for Disease Control and Prevention (CDC). Sports-related recurrent brain injuries-United States. *Morbidity and Mortality Weekly Report* 1997; 46(10):224-227. Available at: [www.cdc.gov/mmwr/preview/mmwrhtml/00046702.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/00046702.htm).

***If you think your athlete has sustained a concussion... take him/her out of play, and seek the advice of a health care professional experienced in evaluating for concussion.***

## Resources

### **A. Organizations and agencies that provide resources related to concussions**

1. American Academy of Pediatrics, <http://www.aap.org>
2. American Medical Society for Sports Medicine, <http://www.amssm.org/>
3. Brain Injury Association of Virginia, <http://www.biav.net>
4. Children's Hospital of the King's Daughters, <http://www.chkd.org>
5. Children's National Medical Center, <http://www.childrensnational.org>
6. Consensus Statement on Concussion in Sport (3rd International Conference on Concussion in Sport, Zurich, November 2008), <http://www.sportconcussions.com/html/Zurich%20Statement.pdf>
7. National Academy of Neuropsychology, <http://www.nanonline.org>
8. Virginia Athletic Trainers' Association, <http://www.vata.us>
9. Virginia College of Emergency Physicians, <https://www.acep.org>
10. Virginia Department of Health, <http://www.vdh.state.va.us>
11. Virginia High School League, <http://www.vhsl.org>

### **B. Concussion assessment tools**

1. Sports Concussion Assessment Tool (SCAT), Concussion in Sport Group, [http://www.amssm.org/MemberFiles/SCAT\\_v13-\\_Side\\_2.doc](http://www.amssm.org/MemberFiles/SCAT_v13-_Side_2.doc)
2. The Sideline Assessment for Concussions, Brain Injury Association of America, [http://www.knowconcussion.org/pdfs/sideline\\_assessment.pdf](http://www.knowconcussion.org/pdfs/sideline_assessment.pdf) and <http://www.knowconcussion.org/pdfs/bess.pdf>
3. Sports-Related Concussions in Children and Adolescents, Pediatrics, <http://pediatrics.aappublications.org/cgi/content/abstract/peds.2010-2005v1?rss=1>

### **C. Educational strategies for working with students who have concussions**

1. Brain Injury and the Schools: A Guide for Educators, Brain Injury Association of Virginia, <http://www.biav.net>