

Kittatinny Regional High School

Sports-Related Concussion Policy

(In accordance with *N.J.S.A. 18A: 40-41.4*)

Prevention

1. The educational fact sheet will be distributed to all student-athletes and their families on a yearly basis. The student-athlete and his/her guardian must review the fact sheet and return the signed second page to the athletic trainer.
2. All Coaches, Athletic Trainers, School Nurses, and School/Team Physicians shall complete the National Federation of State High Schools Association online “Concussion in Sports” training program.
3. All Student-athletes participating in a contact sport will be required to complete baseline Impact testing prior to the season.

Possible Signs of a Concussion

(Could be observed by a Coach, Athletic Trainer, School/Team Physician, School Nurse)

1. Appears dazed, stunned, or disoriented
2. Forgets plays, or demonstrates short term memory difficulty
3. Exhibits difficulties with balance or coordination
4. Answers questions slowly or inaccurately
5. Loses consciousness

Possible Symptoms of a Concussion

1. Headache
2. Nausea/Vomiting
3. Balance problems or dizziness
4. Double vision or changes in vision
5. Sensitivity to light or noise
6. Feeling sluggish or foggy
7. Difficult with concentration or short term memory
8. Sleep disturbance
9. Irritability

Management and Referral Guidelines for All Staff

1. The student-athlete will be immediately evaluated by the school physician (if available), athletic trainer or school nurse to determine the presence or absence of a sports-related concussion.
2. If a concussion is suspected, the athlete will be immediately removed from competition or practice.
3. 911 should be called if there is a deterioration of symptoms, loss of consciousness, or a direct neck pain associated with the injury.
4. An athlete who is symptomatic but stable, may be transported by his or her parent/guardian. The parent/guardian should be advised to contact the student-athlete's primary care physician or seek care at the nearest emergency department on the day of the injury.
5. The school physician (if available), athletic trainer or school nurse should make contact with the student-athlete's parent/guardian if they are not present and inform him/her of the suspected sports-related concussion.
6. The school athletic trainer or nurse shall provide to the student-athlete and parent/guardian written at home care instructions for the management of a sports-related concussion and also provide a written form that briefly describes the signs and symptoms noted on the evaluation. A student-athlete suspected of having a concussion must have the form reviewed and signed by a physician who is trained in the evaluation and management of a sports-related concussion to determine if a concussion is present.
7. A student-athlete diagnosed with a concussion that is determined to be symptom-free by a physician and after passing the ImPACT test at KRHS must complete a 6-step graduated return-to-play exercise protocol. Younger students (k-8) should observe a 7 day rest/recovery period (after they are asymptomatic at rest) prior to beginning the graduated return-to-play exercise protocol. Steps 1-4 are to be completed with the school athletic trainer. After steps 1-4 are completed, the student-athlete must have their physician review and sign the protocol form in order to initiate steps 5-6.
8. Medical clearance that is inconsistent with school policy may be referred to the school physician.

Graduated Return-To-Play Exercise Protocol

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

Step 2. Light Aerobic exercise, which includes walking, swimming, and stationary cycling, keeping the intensity below 70% maximum heart rate. No resistance training. The objective of this step is increased heart rate.

Step 3. Sport-specific exercise including running: no head impact activities. The objective of this step is to add movement.

Step 4. Non contact training drills (e.g. passing drills). Student-athlete may initiate resistance training.

Step 5. Following medical clearance (consultation between school health care personnel and student-athlete's physician), participation in normal training activities. The objective of this step is to restore confidence and assess functional skills by coaching and medical staff.

Step 6. Return to play involving normal exertion or game activity.

If concussion symptoms reoccur during the graduated return-to-play protocol, the student-athlete will return to the previous level of activity that caused no symptoms.

If the student-athlete exhibits a re-emergence of any concussion signs or symptoms once they return to physical activity, he/she will be removed from further exertional activities and returned to his/her primary care physician.

Temporary Accommodations for Student-Athletes with a Sports-Related Concussion

- Rest is the best “medicine” for healing concussions or other head injuries. The concussed brain is affected in many functional aspects as a result of the injury. Memory, attention span, concentration and speed of processing significantly impacts learning. Further, exposing the concussed student-athlete to the stimulating school environment may delay the resolution of symptoms needed for recovery.
- Accordingly, consideration of the cognitive effects in returning to the classroom is also an important part of the treatment of sports-related concussions and head injuries.
- Mental exertion increases the symptoms from concussions and affects recovery. To recover, cognitive rest is just as important as physical rest. Reading, studying, computer usage, testing, texting, and watching TV can slow a student's recovery. School personnel may address a student-athlete with a diagnosed concussion in the following ways.
- Students who return to school after a concussion may need to:
 1. Take rest breaks as needed.
 2. Spend fewer hours at school.
 3. Be given more time to take tests or complete assignments. (All courses should be considered).
 4. Receive help with schoolwork.
 5. Reduce time spent on the computer, reading, and writing.
 6. Be granted early dismissal to avoid crowded hallways.