

# **SCARSDALE UFSD**

## **CONCUSSION MANAGEMENT PROGRAM**

**Interscholastic, Extracurricular, and Physical  
Education Related Head Injuries**

**TABLE OF CONTENTS**

<b>1. Policy.....</b>	<b>Page 3</b>
<b>2. Concussion Management Regulations.....</b>	<b>Page 4</b>
<b>3. Concussion Management Team.....</b>	<b>Page 5</b>
<b>4. Training and Education.....</b>	<b>Page 5</b>
<b>5. Concussion Management Protocol.....</b>	<b>Page 5</b>
<b>6. Accommodations in Academic Areas.....</b>	<b>Page 6</b>
<b>7. Baseline and Post-injury Neurocognitive Testing.....</b>	<b>Page 7</b>
<b>8. Concussion Management Procedures.....</b>	<b>Pages 8, 9</b>
<b>9. Post Head Injury Checklist.....</b>	<b>Page 10</b>
<b>10. ImPACT Testing.....</b>	<b>Pages 11, 12</b>

## CONCUSSION MANAGEMENT POLICY

### SCARSDALE SCHOOL DISTRICT CONCUSSION MANAGEMENT POLICY

Physical education teachers, coaches, nurses, and other appropriate staff will receive training to recognize the signs, symptoms, and behaviors consistent with a concussion. Any student exhibiting those signs, symptoms, or behaviors while participating in a school sponsored class, extracurricular activity, or interscholastic athletic activity shall be removed from the game or activity and be evaluated as soon as possible by an appropriate health care professional. Depending on the circumstances, the coach, athletic trainer, or school nurse will notify the student's parents or guardians and recommend appropriate monitoring to parents or guardians.

If a student sustains a concussion at a time other than when he or she is engaged in a school-sponsored activity, the District expects the parent/legal guardian to report the condition to the school nurse so that the District can support appropriate management.

The student shall not return to school or activity until authorized by an appropriate health care professional. All students returning to school or extracurricular activities will be governed by the Concussion Management Plan. The District Physician will make the final decision on return to activity, including physical education class and after-school sports.

Any student who continues to have signs or symptoms upon return to activity shall be removed from play, if applicable, or other activity and reevaluated by his or her health care provider. Upon return from re-evaluation, the student's activity will be governed by the Concussion Management Plan and, the District Physician will make the final decision on return to activity, including physical education class and after-school sports.

The Superintendent, in consultation with appropriate district staff, including the chief school medical officer, will develop regulations and protocols to govern concussion management.

Reference: New York State Concussion Management and Awareness Act adopted in November 2011.

Adopted after a second reading: July 9, 2012

Updated: October 2016, Adopted after second reading:

**SCARSDALE SCHOOL DISTRICT  
CONCUSSION MANAGEMENT REGULATIONS**

Physical education teachers, coaches, nurses, and other appropriate staff will receive training to recognize the signs, symptoms, and behaviors consistent with a concussion. Any student exhibiting those signs, symptoms, or behaviors while participating in a school-sponsored class, extracurricular activity, or interscholastic athletic activity shall be removed from the game or activity and be evaluated as soon as possible by an appropriate health care professional. Depending on the circumstances, the coach, athletic trainer, or school nurse will notify the student's parents or guardians and recommend appropriate monitoring to parents or guardians.

If a student sustains a concussion at a time other than when he or she is engaged in a school-sponsored activity, the District expects the parent/legal guardian to report the condition to the school nurse so that the District can support appropriate management.

The student shall not return to school or activity until authorized by an appropriate health care professional and the District Physician. Any student who continues to have signs or symptoms upon return to activity shall be removed from play and reevaluated by his or her health care provider.

Reference: *New York State Concussion Management and Awareness Act, adopted in November 2011.*

## **CONCUSSION MANAGEMENT TEAM**

The District will assemble a Concussion Management Team (CMT). The CMT will consist of the District Physician, the Director of Physical Education, Health & Athletics, the Director of Special Education and Student Services, school nurses, a guidance counselor, a school psychologist and physical education teachers. The District CMT will coordinate the dissemination of pertinent information to all administrators, teachers, coaches and parents. Training is mandatory for all nurses, physical education teachers, and coaches that work with students. In addition, information related to concussions will also be included at pre-season meetings attended by athletes and their parents. Information will be provided to parents and athletes at the beginning of sports seasons. Parents will be made aware of the school district's policy and how these injuries will ultimately be managed by school officials.

## **TRAINING AND EDUCATION**

Training for the Concussion Management Team will provide current information about: signs and symptoms of concussions, post-concussion and second impact syndromes, return to play and school protocols, and available area resources for concussion management and treatment. Particular emphasis should be placed on the fact that no athlete will be allowed to return to play the day of injury and that all athletes should obtain appropriate medical clearance prior to returning to play or school.

Concussion information will be provided for all administrators, teachers, coaches, school nurses, athletic trainers and guidance counselors. Extensive information on concussions and brain injuries can be found on the Centers for Disease Control website: <http://www.cdc.gov/headsup/index.html>

As noted above, education of parents and students will be accomplished through preseason meetings for sports teams and information sheets and sign-off forms provided to parents. The protocols for return to school and return to activity or interscholastic athletics will cover all students returning to school after suffering a concussion, regardless of whether the accident occurred outside of school or while participating in a school activity. The Concussion Management Policy and Regulations will be made available on the district website.

**CONCUSSION MANAGEMENT PROTOCOL**Return to play

Return to play following a concussion involves a stepwise progression once the individual is symptom free. There are many risks to premature return to play including: a greater risk for a second concussion because of a lower concussion threshold, second impact syndrome (abnormal brain blood flow that can result in death), exacerbation of any current symptoms, and possibly increased risk for additional injury due to alteration in balance. These New York State Public High School Athletic Association (NYSPHAA) current "return to play" recommendations are based on the most recent expert opinion. No student athlete should return to play while symptomatic. Students are prohibited from returning to play the day the concussion is sustained. If there is any doubt as to whether a student has sustained a concussion, it should be treated as a concussion. Once the student athlete is symptom free at rest for 24 hours and has a signed release by the treating clinician, she/he may begin the return to play progression below.

**Return to Play (RTP) Protocol**

Clearance from physician

Day 1: Light aerobic activity

Day 2: Sport-specific activity

Day 3: Non-contact training drills

Day 4: Full contact practice

Day 5: Return to play

Each step should take 24 hours so that an athlete would take approximately one week to proceed through the full rehabilitation protocol once they are asymptomatic at rest upon exertion. If any post-concussion symptoms occur while in the stepwise program, then the student should drop back to the previous asymptomatic level and try to progress again after a further 24-hour period of rest has passed. The program is broken down into five steps in which only one step is covered a day. The student should also be monitored for recurrence of symptoms due to mental exertion, such as reading, working on a computer, or taking a test.

### **ACCOMMODATIONS IN ACADEMIC AREAS**

- The student's teacher and all staff members providing instruction to the student shall be notified by the Dean/School Counselor with regard to the student's medical condition.
- The student may attend school full time with considerations to be given to modifying the school day, including allowance of rest breaks, shortened day, extra time to complete work and reduced homework load.
- The teacher will permit the student to reduce his work load by shorter papers and less reading. Extended and flexible deadlines on papers and projects.

### **BASELINE AND POST-INJURY NEUROCOGNITIVE TESTING**

Prior to interscholastic competition, athletes at Scarsdale High School will be given an established computerized neurocognitive assessment, which can be used as a baseline measurement in the event of a concussion. If an athlete suffers a head injury, a physician may request that the district share this baseline measurement and administer a post-injury neurocognitive assessment to assist in the diagnosis and treatment of the injury.

\*The district is using ImPACT (Immediate Post-Concussion Assessment and Cognitive Testing), a web-based software program, to administer these assessments. Information on this assessment tool can be found at: [www.impacttest.com](http://www.impacttest.com).

\*\*A student may receive an "invalid" score on an ImPACT test. A student would receive an "invalid" score if the result indicated that something went wrong with the test. For example, if a student just clicks on the answers quickly without reading the directions, the test will invalidate the score based on the fact that he or she responded too quickly to the prompts. In the case of an invalid score, the student will be tested again. If the student receives an "invalid" result a second time, the school nurse or athletic trainer will contact the parents.

## CONCUSSION MANAGEMENT PROCEDURES

1. If a student suffers a head injury (possible concussion) in physical education, sports, or any school related activity and exhibits any signs or symptoms:
  - a. The coach, physical education teacher, nurse and/or athletic trainer will:
    - i. Immediately remove the athlete from play, competition or activity.
    - ii. Complete the Post Head Injury Checklist (pg. 9).
    - iii. Notify parent, request pick up of athlete to seek medical attention and give Concussion Checklist to parent.
    - iv. Complete incident report.
      1. A copy of the incident report and Post Head Injury Checklist will be sent to the nurse within 48 hours (an email notification will be sent if possible).
  - b. The family will be advised to seek medical attention and report findings to the health office.
  - c. The physician:
    - i. Will assess and diagnose the student. Provide documentation for parents including diagnosis, physical and/or academic accommodations and for what period of time.
    - ii. May request neurocognitive assessment (ImPACT) baseline scores from Health Office, if available.
    - iii. May request that a post-injury neurocognitive assessment (ImPACT) be administered.
  - d. The school nurse:
    - i. Will follow up with family to obtain physician orders.
    - ii. On resolution of the concussion, the nurse will receive a clearance note from the physician, allowing the student to return to all activity.
      1. For high school and middle school students:
        - a. The nurse will notify the Athletic Department, school counselor/dean and the Physical Education Department.
        - b. In the case of an athlete, the athletic trainer and coach will initiate and supervise the "Return to Play" protocol. In the case of a student returning to Physical Education class, the physical education teacher will initiate and supervise the "Return to Play" protocol.
      2. For elementary school students:
        - a. The nurse will notify classroom and physical education teachers.
        - b. The physical education teacher will initiate and supervise the "Return to Play" protocol.
  - e. The school counselor/dean will notify the appropriate teachers and request that the student receive academic accommodations until the student is cleared to return.

If a student suffers a concussion, he or she will not be able to return to play unless cleared, in writing, by a physician. If a student suffers a subsequent concussion within 12 months of having been concussed or multiple concussions, it is recommended that the student be evaluated by a neurologist or a physician who is a concussion management expert. A written report from the physician must be submitted to the school's health office before the student can begin the return to play protocol. Multiple concussions will warrant individual consideration by the District Physician. The District Physician will make the the final decision regarding student participation in school related activities.

9. If a student suffers a concussion outside of school, orders from a physician should be brought to the school's health office. At that point, the school nurse and related staff will follow all applicable Concussion Management Procedures, which are listed above.

*All school regulations and procedures regarding injuries sustained during school, or at a school related activity, remain in effect.*

**POST HEAD INJURY CHECKLIST**

NAME: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

DATE of injury: \_\_\_\_\_ TIME of injury: \_\_\_\_\_ SPORT: \_\_\_\_\_

Description of Injury: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please circle Yes or No for each symptom listed below -**

<u>Has the athlete ever had a concussion?</u>	<u>Yes</u>	<u>No</u>	
<u>Was there a loss of consciousness?</u>	<u>Yes</u>	<u>No</u>	<u>Unclear</u>
<u>Does he/she remember the injury?</u>	<u>Yes</u>	<u>No</u>	<u>Unclear</u>
<u>Does he/she have confusion after the injury?</u>	<u>Yes</u>	<u>No</u>	<u>Unclear</u>

**Symptoms observed at time of injury:**

<u>Dizziness</u>	<u>Yes</u>	<u>No</u>	<u>Ringing in Ears</u>	<u>Yes</u>	<u>No</u>
<u>Drowsy/Sleepy</u>	<u>Yes</u>	<u>No</u>	<u>“Don’t Feel Right”</u>	<u>Yes</u>	<u>No</u>
<u>Seizure</u>	<u>Yes</u>	<u>No</u>	<u>Memory Problems</u>	<u>Yes</u>	<u>No</u>
<u>Blurred Vision</u>	<u>Yes</u>	<u>No</u>	<u>Vacant/Glassy Stare</u>	<u>Yes</u>	<u>No</u>
<u>Headache</u>	<u>Yes</u>	<u>No</u>	<u>Nausea/Vomiting</u>	<u>Yes</u>	<u>No</u>
<u>Fatigue/Low Energy</u>	<u>Yes</u>	<u>No</u>	<u>Feeling “Dazed</u>	<u>Yes</u>	<u>No</u>
<u>Poor Balance/Coordination</u>	<u>Yes</u>	<u>No</u>	<u>Loss of Orientation</u>	<u>Yes</u>	<u>No</u>
<u>Sensitivity to Light</u>	<u>Yes</u>	<u>No</u>	<u>Sensitivity to Noise</u>	<u>Yes</u>	<u>No</u>

**Other Findings / Comments:** \_\_\_\_\_

**Final Action Taken**

Parents Notified? \_\_\_\_\_ Yes No                      Sent to Hospital? \_\_\_\_\_ Yes No

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

Evaluator’s Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ Tel# \_\_\_\_\_

**Please note: If this student had ImPACT performed at school, the baseline scores are available from the health office upon a physician’s request. The physician may also request a post-injury test.**

# ImPACT Testing

---

The Scarsdale High School Athletic Department, in accordance with district regulations, will be administering a baseline neurological assessment to high school student athletes. The baseline assessment is considered valid for 2 years. If a student suffers a concussion, this assessment can be very helpful to medical professionals treating the student.

To administer the assessment, we will use a software tool called ImPACT, which is a computerized exam utilized in many professional, college and high school athletic programs. This non-invasive test is set up in a “video game” type format and takes about 15-20 minutes to complete. It is a simple instrument used to track information such as memory, reaction time, speed and concentration. It is not an IQ test. The testing procedures pose no risks to the student.

The assessments will be conducted by an athletic trainer in one of the high school computer labs during practice time. The schedule (including make-up dates) will be determined by the trainer and coach. If your child is unable to take the assessment on the dates offered by the trainer, then the ImPACT Test will not be done for that season. The athletic trainer and athlete will not have access to a score report. The score reports are stored securely on a server maintained by ImPact. The only personnel at Scarsdale High School, who will have access to the report, are the school nurse and the athletic director. In the event of a head injury, the baseline information can be retrieved and a follow up assessment can be conducted. A student’s ImPACT testing results can be made available to the medical professional treating the student. These data can be helpful to a medical professional as they make decisions regarding treatment and “return to play.”

More information on the program can be found at: [www.impacttest.com](http://www.impacttest.com)

An Opt-Out Form from testing is attached to this notice. The ImPACT assessment is highly encouraged for all athletes. If you would prefer that your child not be tested, please complete the Opt-Out Form, which is attached to this notice. Any athlete who has suffered a concussion will follow the district’s “return to play” regulations, regardless of whether or not s/he has been tested through ImPACT. The

# ImPACT Testing

---

## Opt-Out Form

I have read the attached information and understand its contents. I do not want my child tested using the ImPACT neurological assessment.

Name of Athlete (Please print): \_\_\_\_\_

Sport: \_\_\_\_\_

Signature of Athlete: \_\_\_\_\_

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

Signature of Parent: \_\_\_\_\_

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

**IMPACT RECOMMENDS THAT HIGH SCHOOL ATHLETES BE TESTED ONCE EVERY TWO YEARS. SHS ATHLETES WILL BE TESTED IF THEY DO NOT HAVE AN IMPACT ON FILE OR IF IT HAS BEEN TWO YEARS SINCE THEIR PREVIOUS BASELINE TEST.**

SCARSDALE SCHOOL DISTRICT

CONCUSSION RETURN TO PLAY PROGRESSION

Student's Name: \_\_\_\_\_

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

Sport/P.E. Unit: \_\_\_\_\_

Once notified by the health office to begin the return to play, follow the steps below. To go to the next level, the student must be **symptom free**. The student may advance **one level every 24 hours**. If the student experiences symptoms (headache, fatigue, nausea, vomiting, dizziness, blurred vision or irritability) **progression is stopped**. At the next practice/class the student should **drop back to the previous asymptomatic level**. Each student will progress at their own rate. \* Please note: In non-contact activities, a student may complete the Return to Play Progression prior to Level 5.

					Date completed
<u>Level 1</u>	Light aerobic activity (speed walking)	↑ NO CONTACT heart rate	Incomplete symptomatic <input type="checkbox"/>	Completed <input type="checkbox"/>	
<u>Level 2</u>	Sport specific activity (running drills, jump rope)	↑ NO CONTACT movement	Incomplete symptomatic <input type="checkbox"/>	Completed <input type="checkbox"/>	
<u>Level 3</u>	Non-contact training in a practice setting	↑ CONTACT cognitive & psychomotor activity	Incomplete symptomatic <input type="checkbox"/>	Completed <input type="checkbox"/>	
<u>Level 4</u>	Full contact training in a practice setting (Full phys. ed. participation)	↑ CONTACT cognitive & psychomotor activity	Incomplete symptomatic <input type="checkbox"/>	Completed <input type="checkbox"/>	
<u>Level 5</u>	Return to competition (game play)		Incomplete symptomatic <input type="checkbox"/>	Completed <input type="checkbox"/>	

Notes: \_\_\_\_\_

Coach / P.E. Teacher: \_\_\_\_\_ (signature) Date: \_\_\_\_\_

**UPON COMPLETION RETURN TO HEALTH OFFICE.**

Date received: