

APPENDIX I

CONNECTICUT INTERSCHOLASTIC ATHLETIC CONFERENCE

CONCUSSION MANAGEMENT AND RETURN TO PLAY REQUIREMENTS

“WHEN IN DOUBT – SIT IT OUT”

A concussion is a type of traumatic brain injury or (TBI), “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” (Centers for Disease Control and Prevention, 2009).

PART I – SIGNS AND SYMPTOMS OF A CONCUSSION

A concussion should be suspected if any one or more of the following signs or symptoms are present, or if the coach/evaluator is unsure.

1. Signs of a concussion may include (what the athlete looks like):

- * Confusion / disorientation / irritability * Act silly / combative / aggressive
- * Trouble resting / getting comfortable * Repeatedly ask same questions
- * Lack of concentration * Dazed appearance
- * Slow response / drowsiness * Restless / irritable
- * Incoherent / slurred speech * Constant attempts to return to play
- * Slow / clumsy movements * Constant motion
- * Loss of consciousness * Disproportionate / inappropriate reactions
 - Amnesia / memory problems * Balance problems
 -

2. Symptoms of a concussion may include (what the athlete reports):

- * Headache or dizziness * Over sensitivity to sound / light / touch
- * Nausea or vomiting * Ringing in ears
- * Blurred or double vision * Feeling foggy or groggy

Note: Public Act No. 10-62 requires that a coach MUST immediately remove a student-athlete from participating in any intramural or interscholastic athletic activity who (A) is observed to exhibit signs, symptoms or behaviors consistent with a concussion following a suspected blow to the head or body, or (B) is diagnosed with a concussion, regardless of when such concussion or head injury may have occurred.

PART II – RETURN TO PARTICIPATION (RTP)

Currently, it is impossible to accurately predict how long concussions will last. There must be full recovery before someone is allowed to return to participation. Connecticut law now requires that

no athlete may resume participation until they have received written medical clearance from a licensed health care professional (physician, physician assistant, advanced practice registered nurse, athletic trainer) trained in the evaluation and management of concussions.

Concussion Management Requirements:

1. No athlete SHALL return to participation (RTP) on the same day of concussion.
2. Any loss of consciousness, vomiting or seizures the athlete MUST be immediately transported to the hospital.
3. Close observation of an athlete MUST continue following a concussion. This should be monitored for an appropriate amount of time following the injury to ensure that there is no escalation of symptoms.
4. Any athlete with signs or symptoms related to a concussion MUST be evaluated from a licensed

health care professional (physician, physician assistant, advanced practice registered nurse, athletic trainer) trained in the evaluation and management of concussions.

5. The athlete MUST obtain written clearance from one of the licensed health care professionals mentioned above directing them into a well-defined RTP stepped protocol similar to one outlined below. If at any time signs or symptoms should return during the RTP progression the athlete should cease activity*.

6. After the RTP protocol has been successfully administered (no longer exhibits any signs or symptoms or behaviors consistent with concussions), final written medical clearance is required by one of the licensed health care professionals mentioned above for them to fully return to unrestricted participation in practices and competitions.

Medical Clearance RTP Protocol (Recommended one full day between steps)

Rehabilitation Stage Functional exercise at each stage or rehabilitation Objective of each stage

1. No activity Complete physical and cognitive rest until Recovery asymptomatic. School may need to be modified.

2. Light aerobic Walking, swimming or stationary cycling keeping Increase Heart Rate activity intensity, <70% of maximal exertion; no resistance training.

3. Sport specific Skating drills in ice hockey, running drills in soccer; Add Movement exercise no head impact activities.

4. Non-contact Progression to more complex training drills, i.e., Exercise, coordination training drills passing drills in football and ice hockey; may start and cognitive load progressive resistance training.

5. Full contact Following medical clearance, participate in normal Restore confidence and practice training activities assess functional skills by coaching staff

*If at any time symptoms should return during the RTP progression the athlete should stop activity that day. If the athlete's symptoms are gone the next day, she/he may resume the RTP progression at the last

step completed in which no symptoms were present. If symptoms return and don't resolve, the athlete should be referred back to their medical provider.

References:

1. NFHS. Concussions. 2008 NFHS Sports Medicine Handbook (Third Edition). 2008: 77-82.

<http://www.nfhs.org>

2. McCrory, Paul MBBS, PhD; Meeuwisse, Willem MD, PhD; Johnston, Karen MD, PhD; Dvorak, Jiri MD; Aubry, Mark MD; Molloy, Mick MB; Cantu, Robert MA, MD. Consensus Statement on Concussion in Sport 3rd International Conference on Concussion in Sport held in Zurich, November 2008. *Clinical Journal of Sport Medicine*: May 2009 – Volume 19 – issue 3 – pp 185-200.

http://journals.www.com/cjsportsmed/Fulltext/2009/05000/Consensus_Statement_on_Concussion_in_Sport_3rd.1.aspx

3. Centers for Disease Control and Prevention. *Heads Up: Concussion in High School Sports*.

http://www.cdc.gov/NCIPC/tbi/Coaches_Tool_Kit.htm.

4. U.S. Department of Health and Human Services Centers for Disease Control and Prevention. *A Fact Sheet for Coaches*. (2009). Retrieved on June 16, 2010. http://www.cdc.gov/concusson/pdf/coaches_Engl.pdf.

Resources:

• Centers for Disease Control and Prevention. *Injury Prevention & Control: Traumatic Brain Injury*. Retrieved on June 16, 2010. <http://www.cdc.gov/TraumaticBrainInjury/index.html>

• Centers for Disease Control and Prevention. *Heads Up: Concussion in High School Sports Guide for Coaches*. Retrieved