



## Bremen High School District 228 Guidelines for Return to Learn After a Head Injury

After an athlete has been evaluated by an athletic trainer or physician and it has been determined that the athlete has sustained a concussion, the following protocol will be used to safely progress their return to learn. Under no circumstances will this protocol be accelerated. Should the athlete not be fully symptom free, they may progress through the RTL Protocol under parent or guardian direction. However, the athlete **MUST** be fully symptom free to progress through the RTP Protocol under Physician direction.

**Each athlete's return to learn guideline will be different and will not be compared to one another. The teaching staff and concussion management team will handle every case differently in order to provide the student-athletes with the best care. In opposition, it is strongly encouraged to be completely open and honest in regards to symptoms and triggers of symptoms during this process.**

Rehabilitation Stage	Cognitive Activity at Each Stage of Rehabilitation	Success Goal of Each Stage
1. Controlled Cognitive activities	The student athlete should be exposed to normalcy until symptoms increase. The athlete is then encouraged to take note of different triggers of symptoms before the next stage.	Athlete can manage 35-45 minutes of cognitive function or activities of daily living without exacerbating symptoms.
2. Begin educational sessions in school with permission of parent or guardian	The student athlete should attempt to carry out a normal school day until symptoms increase. Accommodations may include: having a reader, prepared notes from a teacher, delaying tests/quizzes, 15 minute breaks. The Parent may decide for the athlete to report to school later or the Nurse may decide to leave school earlier.	Increase the amount of classes each day until one full day of class can be completed with controlled symptoms using any accommodation necessary.
3. Full class day symptom free	The student athlete can complete all and any school work given to him/her without symptoms of a concussion.	Completed RTL protocol
4. Begin RTP protocol	The RTP 6 day protocol begins. (B.R.A.I.N.G)	Complete the RTP protocol without symptoms of a concussion.

## Bremen High School District 228 Guidelines for Return to Play After a Head Injury

After an athlete has been evaluated by an athletic trainer or physician and it has been determined that the athlete has sustained a concussion, the following protocol will be used to safely progress their return to play. Under no circumstances will this protocol be accelerated. **There should be approximately 24 hours (or longer) for each stage, and the athlete should return to previous stages if symptoms recur. Resistance training should only be added in later stages.**

Rehabilitation Stage	Functional Exercise at Each Stage of Rehabilitation	Success Goal of Each Stage
1. No activity	Complete physical rest	Recovery (symptom free at rest)
2. Biking	Stationary cycling keeping intensity <70% maximum predicted heart rate (30 min. max)	Increase heart rate without symptoms
3. Running	Running while keeping intensity <70% maximum predicted heart rate (30 min. max)	Add movement without symptoms
4. Agility Exercises	Sport-specific exercises. No head-impact activities.	Add coordination and cognition without symptoms
5. Non-contact practice	Full practice without contact	Increase exercise, coordination, and cognitive load without symptoms
	May start progressive resistance training	
6. Full contact practice	Following medical clearance participate in normal training activities	Restore confidence and assess functional skills by coaching staff without symptoms
7. Return to play	Normal game play	

Protocol established from: "Consensus statement on concussion in sport – The 3rd International Conference on concussion in sport, held in Zurich, November 2008." *Journal of Clinical Neuroscience*. (2009) 16:755–763

**Return to Participation:** It is determined that an athlete is able to return to play when they are symptom free at rest and at exertion, and have returned to a baseline state of any of the tests they were administered. **An athlete will not return to participation the same day as a concussive event. When returning athletes to play, they will follow the stepwise symptom-limited program outlined above.** Once the athlete has received clearance from a physician licensed in all branches, and/or the athletic trainer, they may return to play. If an athlete receives clearance from a physician, the athletic trainer still reserves the right to hold the athlete out of participation. A parent's consent is not a sufficient means for an athlete to return to participation. A written script from a physician stating that the athlete is cleared to return to play is required.

Athletes who have not been cleared to participate cannot be in uniform for any games.

This protocol is implemented to promote compliance with: IHSA Return to Play Policy, IHSA Protocol for Implementation of NFHS Sports Playing Rule for Concussions, Illinois HB 0200, and City of Chicago Ordinance – Concussion Injuries in Student Athletes in Chicago Schools (Ch. 7-22 Municipal Code of Chicago) which outline that athletes exhibiting symptoms of a concussion cannot return to play until cleared by an appropriate health care professional.

## Return to Learn Protocol

A.) Concussion Management team will be notified of the student athlete's concussion.

1.) Management team includes

- a.) ATC
- b.) Athletic Director
- c.) School Nurse
- d.) Assistant Principal (PPS)
- e.) Student's counselors
- f.) Student's Educators
- g.) Parent or Guardian
- h.) Team Physician if applicable
- i.) Social Worker

B.) Returning to classroom

1.) The High's Schools Assistant Principal (PPS) will contact the individual student athlete's counselor via e-mail and will primarily oversee that proper academic accommodations are being made.

a.) The ATC and school Nurse will be cc'd on this e-mail.

2.) The guidance counselor will then alert the student's teachers via e-mail and will assist in academic accommodations.

a.) The ATC and school Nurse will be cc'd on this e-mail.

b.) This e-mail will include the student's name, degree of concussion, and each symptom that the student has reported to the ATC, school Nurse, or physician.

3.) The student should be able to maintain 35-45 minutes of normal mental activity or cognitive function before returning to the classroom.

a.) The parent may decide when this is appropriate, unless the overseeing physician decides otherwise.

b.) If any days of absence are required, they will be considered excused absences.

4.) Once the student has resumed classes, appropriate accommodations will be established by the teachers with the assistance of the guidance counselor and school social worker.

a.) Teachers are aware that no two concussions are ever the same and each student will have different accommodations for different triggers of symptoms.

b.) The teacher is to utilize the two pieces of literature given to them by the ATC and Athletic Director. These will be used to properly integrate the student athlete into their normal classroom activities as best as possible. Both Sources will be available on District 228's website.

- "Supporting the Student-Athlete's Return to the Classroom After a Sport-Related Concussion", By: Neal McGrath, PhD.
- CDC Guidelines and Informational Packets
- Concussion Management Power Point

c.) Primary purpose of the social worker will be to provide emotional support for the student athlete throughout the process.

#### 5.) Role of the School Nurse

a.) Carries out daily medical evaluations and provides a rest and recovery area when the student-athlete becomes more symptomatic during the school day.

b.) A record of these daily symptoms offers a valuable method for tracking the student-athlete's progress, which in turn will help identify worsening symptoms.

c.) Depending on what triggered the worsening symptom(s), the school nurse can decide if a temporary reduction in the student's academic demands or a reduction in student attendance is necessary.

d.) Whenever necessary, the Nurse and ATC will communicate on a daily basis.

6.) The final goal is to allow the student-athlete to complete one full day of school without the needs of any academic accommodation and free of symptoms.

7.) When all of the above guidelines are met, the ATC will communicate to the physician and the athlete may begin the return to play protocol for D228.



## Bremen High School District 228 Concussion Procedure Acknowledgement and Consent Form

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### Student/Parent Consent and Acknowledgements

By signing this form, we acknowledge we have been provided information regarding the Policy and Procedures regarding the treatment of concussions for student-athletes in Bremen High School District 228. We also acknowledge that we understand that these procedures are in accordance with current practices in the field of sports medicine and the current IHSA and State of Illinois legal requirements.

### STUDENT

Student Name (Print): \_\_\_\_\_ Grade (9-12) \_\_\_\_\_

Student Signature: \_\_\_\_\_

### PARENT OR LEGAL GUARDIAN

Name (Print): \_\_\_\_\_

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

Relationship to student: \_\_\_\_\_