



Policies and Educational Awareness Training

Identify Suspected Cases of Concussions

The highest medical authority at a practice or game is the person who is in the best position to diagnose a suspected concussion and to make the call. The presence of (or immediate access to) a medical doctor (MD), doctor of osteopathy (DO), athletic trainer (AT), physician's assistant (PA), nurse practitioner (NP), or paramedic (PM) trained in concussion recognition is ideal. However, in cases where medical professionals are not present or immediately available, a person should be present who is at least EMT certified or is currently certified in Red Cross Community First Aid or the equivalent.

Signs observed by parents, guardians, or sports staff: appears dazed or stunned; is confused about the assignment or position; forgets instructions; 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; and can't recall events after hit or fall.

Symptoms reported by player: headache or pressure in the 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; or does not "feel right".

What to do: If athletes report or exhibit one or more of the signs listed above or say they "just don't feel right" after a bump, blow, or jolt to the head or body, they may have a concussion and need to be further evaluated.

Danger signs which require immediate medical attention: one pupil larger than the other; drowsiness or inability to wake up; headache that gets worse and does not go away; weakness, numbness, or decreased coordination; repeated vomiting or nausea; slurred speech; convulsions or seizures; inability to recognize people or places; increasing confusion, restlessness, or agitation; unusual behavior, loss of consciousness (even brief). If one or more of these danger signs occur after a bump, blow, or jolt to the head or body: call 9-1-1 or transport the athlete immediately to the emergency room.

On Field Medical Status Evaluation (Example Questions)*:

Orientation Questions: (ask the athlete)

What inning are we in?	Who scored last?
What field is this?	Do you remember the hit?
What city is this?	What team did we play last?
Who is the opposing team?	Repeat the following words: Girls, Dog, Green.

Concentration: (ask the athlete)

Repeat the days of the week backwards (starting with today)

Repeat the months of the year backward (starting with December)

Repeat these numbers backward 63, (36), 419 (914), 6294 (4926)

Exertional Maneuvers:

Complete 5 jumping jacks/Complete 5 sit ups.

Word List Memory: (ask the athlete)

Repeat the three words from earlier: Girls, Dog, Green

*Other superior sideline assessment tools are available including SCAT, ImPact, King Devit, and sideline apps such as HitCheck.

Athlete Removal by Sports Official and Re-Entry into Contest

When an athlete has been removed from a contest by a sports official due to signs or symptoms of a concussion, the only persons who should clear an athlete's reentry are a medical doctor (MD), doctor of osteopathic medicine (DO), physician's assistant (PA), registered nurse practitioner (NP), paramedic (PM), or athletic trainer (AT). If none of these are present on-site at the contest, the athlete shall not return to that contest or any subsequent contest until cleared.

If a Concussion Is Suspected, the Following Actions Should Be Taken

- ▶ **Remove the athlete from play** - if any of the signs and symptoms are observed, remove the athlete from play. When in doubt, sit them out!
- ▶ **Make sure the athlete is evaluated by an MD or DO who is experienced in evaluating concussions.** Let the professionals judge the severity.
- ▶ **Inform the athlete's parents / guardians and provide them with the CDC fact sheet** on "Concussions for parents" to help them monitor the athlete for signs and symptoms:
http://www.cdc.gov/headsup/pdfs/custom/headsupconcussion_fact_sheet_for_parents.pdf
- ▶ **Keep the athlete out of play the day of the injury AND until an MD or DO experienced in evaluating concussion says it's OK for the athlete to return.** The MD or DO must provide written medical clearance and the athlete should be asymptomatic at rest and with exertion. The MD or DO should require the athlete to follow a progressive return to play protocol. Here is a link to the CDC's progressive return to play protocol:
https://www.cdc.gov/headsup/basics/return_to_sports.html

Instruction and Supervision

- ▶ Athletes should wear the proper sport specific equipment such as helmets.
- ▶ Teach and practice safety rules of play and encourage good sportsmanship.
- ▶ Teach and practice correct sport specific techniques for minimizing injuries.

Proper Fitting and Care of Helmets

All equipment managers and coaches should be trained on the proper fitting and care of helmets.

Educational Awareness through Online Training and Information Handouts and Administration/Document Retention

Coaches Basic Concussion Training Course (Free)

All coaches should complete the CDC Heads UP to Youth Sports: Online Training For Coaches video every two years with certificate of completion documentation retained at team/association/conference level for a period of at least 15 years: <https://www.train.org/cdctrain/course/1089818/details>

Athlete/Parent Concussion Awareness Information Sheet

The following CDC Parent / Athlete Concussion Information Sheet should be distributed annually to all athletes and parents (if minor participants) with the signed and dated sheet retained at the team/association/conference level for a period of at least 15 years:

http://www.cdc.gov/headsup/pdfs/youthsports/parent_athlete_info_sheet-a.pdf

Compliance with State Concussion Laws and NFHS Recommendations

To the extent that our state's concussion laws exceed the requirements outlined above, we should comply with our state's law. A summary of state concussion laws can be found at:

<http://www.lawatlas.org/preview?dataset=sc-reboot>

To the extent that our state's version of National Federation of High School Associations (NFHS) rules, regulations, or recommendations on brain injury exceed the requirements outlined above, we should comply with such standards.

Distribution/Acknowledgement/Documentation

A hard or electronic copy of this risk management program which includes policies and educational awareness training should be distributed to each administrator and staff member prior to the start of every season. Each should acknowledge in writing (wet or electronic signature) that they have received and carefully reviewed the entire program and will comply with its terms. The sports organization should maintain documentation on an annual basis that this risk management plan was distributed as well as the administrator and staff acknowledgements.

DISCLAIMER AND HOLD HARMLESS/INDEMNIFICATION

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