

Westmont High School Concussion Protocol

Concussion Information

Mild traumatic brain injury, or concussion, is an injury that results in a functional disturbance in the brain and can result in impaired cognition and neurological function. Management of a suspected concussion involves a progressive return to cognitive and physical activity. Current research has shown that initial cognitive rest with a progressive return is essential in the resolution of concussion symptoms. Activities that involve cognitive stimulation include: classroom activities, driving, playing video games, computer use, text messaging, cell phone use, loud and/or bright environments, watching television, reading, and studying. These stimuli must be limited, and in some cases completely avoided, for a period of time during recovery before being progressively reinstated. Physical activity such as physical education, athletics, and strength or cardiovascular conditioning can be beneficial in aiding in the recovery of a concussion, but must be progressively reinstated under the supervision of a health care professional. The Westmont High School Concussion Care Protocol is designed to take a collaborative approach to progressively return the student to full academic and physical/athletic activity while taking into account the student's individualized needs.

Symptoms

The following is a list of symptoms to be aware of as they can be signs of a concussion or a medical emergency that would require immediate referral to the Emergency Room:

Concussion Symptoms	Concussion Signs	Danger Signs for Emergency Referral
<i>(what the athlete may report)</i> <ul style="list-style-type: none">• Headache• "Pressure" In Head• Blurred Vision• Nausea/Vomiting• Feeling "in a "fog"• Fatigue/Sleepiness• Difficulty focusing/concentrating• Temporary loss of memory• Sensitivity to light or sound	<i>(what others may observe)</i> <ul style="list-style-type: none">• Dazed Appearance• Balance Problems• Memory Issues• Confusion• Sleepiness/Grogginess• Personality Changes• Irritability	<i>(immediate referral to ER is recommended)</i> <ul style="list-style-type: none">• Unequal pupil size• Is drowsy or cannot be awakened• A headache with increasing intensity• Any reported weakness or numbness• Repeated vomiting• Convulsions or seizures• Slurred speech• Becomes increasingly confused, restless, or agitated• Loss of consciousness (even if only a brief amount of time)• Suspected cervical spine injury

Diagnosis, Treatment and Return to Play

A concussion may result when the head hits an object, a moving object strikes the head, or a hit to the body transmits a force to the head.

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A concussion can result from a fall, sports activities, and car accidents. Significant movement of the brain (called jarring) in any direction can cause the concussion signs and symptoms previously described. It should be noted that most concussions do not involve a loss of consciousness.

- If a concussion is suspected, the athlete will be removed from participation. That Athlete WILL NOT return to participation that day. NO EXCEPTIONS.
- The athletic trainer may use the Sports Concussion Assessment Tool 5th Edition (SCAT5) to evaluate an athlete for a suspected concussion. After the SCAT5 is complete, the athletic trainer will compare the new scores to the baseline test to make a decision on further health care measures.
- If a concussion is suspected, a referral to an approved healthcare provider is recommended.
- **It is Westmont High School's decision and Illinois State Law that any athlete believed to have suffered a concussion (at the decision of the athletic trainer) must be cleared by a Physician comfortable in concussion management or other approved health care providers. This includes physicians, sports medicine physicians, Advanced Practice Nurses (APN), and Physician Assistants (PA) comfortable with concussion management. Westmont High School would like the athlete and parents to confirm with the healthcare provider of their choosing that he or she is comfortable diagnosing and clearing a patient for sport participation.**
- **Approved providers do not include Chiropractors, Family Nurse Practitioners or providers uncomfortable with concussion management. If you need a referral the athletic trainer is able to give you one that will meet your needs. It is now Illinois law that any high school athletes who suffer head injuries will have to be cleared by a medical professional before returning to a game.**
- **It is Westmont High School's policy to suggest an initial visit with an approved health care provider to diagnose the athlete with a concussion whether he or she is diagnosed by the athletic trainer or a physician. If it is determined that the athlete has sustained a concussion, he or she must see a Physician or approved health care provider before competing in a game/participating in a full practice. The visit to clear an athlete for competition/full practice must be completed with a Physician or approved health care provider comfortable with concussion management.**
- After being diagnosed with a concussion, the athlete will report to the athletic trainer and complete a checklist of symptom severity each day until the athlete is asymptomatic, or reports zero symptoms.

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- Once an athlete no longer has signs, symptoms, or behaviors of a concussion and is cleared to return to activity by a health-care professional, he or she should proceed in a step-wise fashion to allow the brain to re-adjust to exercise. The athlete will complete no more than one step each day. The return to activity program schedule may proceed as below following medical clearance.
- If at any time during the RTP program symptoms would re-occur, activity is immediately stopped and the athlete would return the following day to complete the SAME step in the program considering he or she is symptom free.

• **Progressive Return to Play (RTP) Program**

Step 1: Light aerobic exercise- 20 minutes on an exercise bike; no weight lifting, resistance training, or any other exercises.

Step 2: Moderate aerobic exercise- 15 to 20 minutes of running at moderate intensity in the gym or on the field without a helmet or other equipment.

Step 3: Sports specific agility exercises without head impact activities.

Step 4: Sports Non-contact training drills in full uniform. May begin weight lifting, resistance training, and other exercises. Followed by clearance for full participation from approved health care provider

Step 5: Full contact practice or training.

Step 6: Full game play.

▪ **Return to Learn (RTL) Program**

- Supervised by School Nurse but outlined by treating health care provider
- Not all cases will require academic assistance or modifications, but these guidelines must be specified by the treating health care provider

Step 1: Rest at Home

Step 2: School Activities Outside the Classroom: homework, reading, etc. at home

Step 3: Return to School Part-Time

Step 4: Full Day of School and Academic Activity

This protocol is intended to provide the mechanics to follow during the course of contests/matches/events when an athlete sustains an apparent concussion.

1. During the pre-game conference of coaches and officials, the official shall remind the head coaches that a school-approved appropriate health care professional will need to clear for return to play any athlete removed from a contest for an apparent head injury.

2. The officials will have no role in determining concussion other than the obvious situation where a player is unconscious or apparently unconscious as is provided for under the previous rule. Officials will merely point out to a coach that a player is apparently injured and advise the coach that the player should be examined by the school-approved health care provider.

3. If it is confirmed by the school's approved health care professional that the student did not sustain a concussion, the head coach may so advise the officials during an appropriate stoppage of play and the athlete may re-enter competition pursuant to the contest rules.

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4. Otherwise, if an athlete can not be cleared to return to play by a school-approved health care professional as defined in this protocol, that athlete may not be returned to competition that day but is subject to return to play protocols established by the athlete's school.
5. Following the contest, a Special Report shall be filed by the contest official(s) with the IHSA Office through the Officials Center.
6. In cases where an assigned IHSA state finals event medical professional is present, his/her decision to not allow an athlete to return to competition may not be over-ruled.

Points of Emphasis:

- It is important to note that the recovery from a concussion is a very individualized process. Caution must be taken not to compare students with concussions as they progress through the recovery process.
- The primary care or treating physician must be a physician licensed to practice medicine in all of its branches, a physician's assistant, or an advanced nurse practitioner as mandated by the Illinois Youth Sports Concussion Safety Act.
- Initiation of the return to academics aspect of the concussion care protocol and modified Physical Education participation can begin prior to evaluation by the primary care or treating physician, but progression into full participation in Physical Education classes and the Return to Physical/Athletic Activity progression cannot begin until the student is evaluated by one of the above indicated health care practitioners and documentation allowing this is provided to the school nurse or athletic trainer.

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