Horace Mann School Concussion Management Policy

Horace Mann School recognizes that concussions and head injuries are commonly reported injuries in children and adolescents who participate in sports and recreational activities and can have serious consequences if not managed carefully. Therefore, Horace Mann School has adopted the following policy to support the proper evaluation and management of head injuries.

A concussion is a mild traumatic brain injury. A concussion occurs when normal brain functioning is disrupted by a blow or jolt to the head. Recovery from one concussion to another will vary. Avoiding re-injury and over-exertion until fully recovered are the cornerstones of proper concussion management.

While Horace Mann School employees will exercise reasonable care to protect students, head injuries may still occur. Physical Education teachers, coaches, athletic trainers and nurses will receive annual training to recognize the signs, symptoms and behaviors consistent with a concussion. Concussion information will also be available on the Horace Mann School athletic website and will be provided as part of the permission slip for participation in interscholastic athletics.

Any student exhibiting signs, symptoms or behaviors associated with a possible concussion while participating in a school-sponsored class, extracurricular activity, or interscholastic athletic activity will be removed from the game or activity and be evaluated as soon as possible by an appropriate health care professional. The School Nurse or Certified Athletic Trainer 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 engaged in a school-sponsored activity, the School expects the parent or other legal guardian to report the condition to the School Nurse or Certified Athletic Trainer so that the School can support the appropriate management of the condition.

The student shall not return to school or activity until authorized to do so in writing by an appropriate health care professional. The School’s Concussion Management Team will make the final decision on return to activity including physical education class and/or after-school athletic team. Any student who continues to have signs or symptoms upon return to activity must be removed from play and reevaluated by their health care provider.

The Horace Mann School Concussion Management Team has developed regulations and protocols to guide the return to activity.

Return to Learning (RTL) - 48-Hour Rule

Students who experience a potential head injury will be required to stay home from school and not participate in any aspect of school activities for 48-hours. The required respite allows the school’s concussion management team (CMT) to receive physician notes and feedback from the parents to create an academic plan for the student’s re-entry, all while
providing cognitive rest for the recovering student. Note: 48-hours is defined as two full school days regardless of interruption by weekends or holiday’s.

Support:
Since 2013, the school has managed 164 evaluations and 119 diagnosed concussions and is uniquely poised to facilitate the transition of a student with a concussion from the medical setting back to the educational setting.

Because delayed onset of symptoms during the first 24 to 48 hours is possible, parents should closely and periodically monitor the student during this time. Ideally, students should be symptom free before RTL commences since activities that require concentration and attention may exacerbate post-concussion symptoms and delay recovery.

Day One

– At Home
The student should be kept home from school on total bed rest with no (or very limited) television, video games, texting, reading, homework, or driving. Parents should consult a physician if student is symptomatic. Parents need to keep lines of communication open with the CMT and share all information available from the physician, personal observations and student’s current status.

- At School
The CMT will convene and begin to layout academic adjustments.

Day Two

- At Home
Between periods of resting and napping, the student may engage in light mental activity such as light reading or television, as long as these activities do not provoke symptoms. Parents will be contacted by CMT for an update of student’s status and work together in deciding on the level of academic adjustments and RTL protocols.

- At School
The CMT will finalize the level of academic adjustment needed at school depending upon the type and severity of the symptoms present and the times of the day when the student feels better or worse.
Concussion Management Protocol for 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 (NYSPHSAA) current returns to play recommendations are based on the most recent international 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 (provided there are no other mitigating circumstances).

Phase 1: low impact, non-strenuous, light aerobic activity such as walking or riding a stationary bike. If tolerated without return of symptoms over a 24 hour period proceed to;

Phase 2: higher impact, higher exertion, and moderate aerobic activity such as running or jumping rope. No resistance training. If tolerated, without return to symptoms over a 24 hour period proceed to;

Phase 3: sport-specific non-contact activity. Low resistance weight training with a spotter. If tolerated, without return to symptoms over a 24 hour period proceed to;

Phase 4: sport-specific activity, non-contact drills. Higher resistance weight training with a spotter. If tolerated, without return to symptoms over a 24 hour period proceed to;

Phase 5: full contact training drills and intense aerobic activity. If tolerated, without return to symptoms over a 24 hour period proceed to;

Phase 6: Return to full activities with no restrictions.

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 and with provocative exercise. 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 Concussion Management and Awareness Act requires the immediate removal from athletic activities of any pupil believed to have sustained or who has sustained a mild traumatic brain injury (concussion). In the event that there is any doubt as to whether a student has sustained a concussion, it shall be presumed that he or she has been so injured until proven otherwise. No such student shall resume athletic activity until he or she shall have been symptom free for not less than twenty-four hours, and has been evaluated by and received written and signed authorization from a licensed physician. The physician authorization will then be forwarded to the Division Nurse for clearance.

http://www.cdc.gov/concussion/headsup/return_to_play.html

[*These NYSPHAA current return to play recommendations are based on the most recent international expert opinion.]
What is a concussion?
A concussion is a brain injury. Concussions are caused by a bump, blow, or jolt to the head or body. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious.

What are the signs and symptoms?
You can’t see a concussion. Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days after the injury. If your teen reports one or more symptoms of concussion listed below, or if you notice the symptoms yourself, keep your teen out of play and seek medical attention right away.

<table>
<thead>
<tr>
<th>Signs Observed by Parents or Guardians</th>
<th>Symptoms Reported by Athlete</th>
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<tbody>
<tr>
<td>Appears dazed or stunned</td>
<td>Headache or “pressure” in head</td>
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<tr>
<td>Is confused about assignment or position</td>
<td>Nausea or vomiting</td>
</tr>
<tr>
<td>Forgets an instruction</td>
<td>Balance problems or dizziness</td>
</tr>
<tr>
<td>Is unsure of game, score, or opponent</td>
<td>Double or blurry vision</td>
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<tr>
<td>Moves clumsily</td>
<td>Sensitivity to light or noise</td>
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<tr>
<td>Answers questions slowly</td>
<td>Feeling sluggish, hazy, foggy, or groggy</td>
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<tr>
<td>Loses consciousness (even briefly)</td>
<td>Concentration or memory problems</td>
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<tr>
<td>Shows mood, behavior, or personality changes</td>
<td>Confusion</td>
</tr>
<tr>
<td>Can’t recall events prior to hit or fall</td>
<td>Just not “feeling right” or is “feeling down”</td>
</tr>
<tr>
<td>Can’t recall events after hit or fall</td>
<td></td>
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</tbody>
</table>

How can you help your teen prevent a concussion?
Every sport is different, but there are steps your teens can take to protect themselves from concussion and other injuries.
- Make sure they wear the right protective equipment for their activity. It should fit properly, be well maintained, and be worn consistently and correctly.
- Ensure that they follow their coaches’ rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.

What should you do if you think your teen has a concussion?
1. Keep your teen out of play. If your teen has a concussion, her/his brain needs time to heal. Don’t let your teen return to play the day of the injury and until a health care professional, experienced in evaluating for concussion, says your teen is symptom-free and it’s OK to return to play. A repeat concussion that occurs before the brain recovers from the first—usually within a short period of time (hours, days, or weeks)—can slow recovery or increase the likelihood of having long-term problems. In rare cases, repeat concussions can result in edema (brain swelling), permanent brain damage, and even death.

2. Seek medical attention right away. A health care professional experienced in evaluating for concussion will be able to decide how serious the concussion is and when it is safe for your teen to return to sports.

3. Teach your teen that it’s not smart to play with a concussion. Rest is key after a concussion. Sometimes athletes wrongly believe that it shows strength and courage to play injured. Discourage others from pressuring injured athletes to play. Don’t let your teen convince you that s/he’s “just fine.”

4. Tell all of your teen’s coaches and the student’s school nurse about ANY concussion. Coaches, school nurses, and other school staff should know if your teen has ever had a concussion. Your teen may need to limit activities while s/he is recovering from a concussion. Things such as studying, driving, working on a computer, playing video games, or exercising may cause concussion symptoms to reappear or get worse. Talk to your health care professional, as well as your teen’s coaches, school nurse, and teachers. If needed, they can help adjust your teen’s school activities during her/his recovery.

If you think your teen has a concussion:
Don’t assess it yourself. Take him/her out of play. Seek the advice of a health care professional.

It’s better to miss one game than the whole season.
For more information and to order additional materials free-of-charge, visit: www.cdc.gov/Concussion.

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What is a concussion?
A concussion is a brain injury that:
• Is caused by a bump, blow, or jolt to the head or body.
• Can change the way your brain normally works.
• Can occur during practices or games in any sport or recreational activity.
• Can happen even if you haven’t been knocked out.
• Can be serious even if you’ve just been “dinged” or “had your bell rung.”

All concussions are serious. A concussion can affect your ability to do schoolwork and other activities (such as playing video games, working on a computer, studying, driving, or exercising). Most people with a concussion get better, but it is important to give your brain time to heal.

What are the symptoms of a concussion?
You can’t see a concussion, but you might notice one or more of the symptoms listed below or that you “don’t feel right” soon after, a few days after, or even weeks after the injury.
• Headache or “pressure” in head
• Nausea or vomiting
• Balance problems or dizziness
• Double or blurry vision
• Bothered by light or noise
• Feeling sluggish, hazy, foggy, or groggy
• Difficulty paying attention
• Memory problems
• Confusion

What should I do if I think I have a concussion?
• Tell your coaches and your parents. Never ignore a bump or blow to the head even if you feel fine. Also, tell your coach right away if you think you have a concussion or if one of your teammates might have a concussion.
• Get a medical check-up. A doctor or other health care professional can tell if you have a concussion and when it is OK to return to play.
• Give yourself time to get better. If you have a concussion, your brain needs time to heal. While your brain is still healing, you are much more likely to have another concussion. Repeat concussions can increase the time it takes for you to recover and may cause more damage to your brain. It is important to rest and not return to play until you get the OK from your health care professional that you are symptom-free.

How can I prevent a concussion?
Every sport is different, but there are steps you can take to protect yourself.
• Use the proper sports equipment, including personal protective equipment. In order for equipment to protect you, it must be:
  - The right equipment for the game, position, or activity
  - Worn correctly and the correct size and fit
  - Used every time you play or practice
• Follow your coach’s rules for safety and the rules of the sport.
• Practice good sportsmanship at all times.

If you think you have a concussion:
Don’t hide it. Report it. Take time to recover.

It’s better to miss one game than the whole season.
For more information and to order additional materials free-of-charge, visit: www.cdc.gov/Concussion.