

DeRuyter Central School
Concussion Management and Student Athlete
Return to Play Procedure following a concussion

The following procedure has been established in accordance with the National Federation of State High School Associations and the International Conference on Concussion in Sport, Prague 2004. In addition it has been fabricated in a collaborative effort with concussive experts within the greater Syracuse area and the DeRuyter Central School Supervising Medical Officers. As such it is imperative to remember the safety of the student athlete is the primary concern of DeRuyter Central School District and its medical personal.

The information contained below is to be used as mere guidelines that are to be implemented in the time following a concussive event. This information is **not to be considered as all-inclusive or all encompassing.**

When a student athlete shows signs or symptoms of a concussion, which include:

- i. Amnesia
- ii. Confusion or appearing dazed
- iii. Headache or head pressure
- iv. Loss of consciousness
- v. Balance difficulty or dizziness or clumsy movements
- vi. Double or blurred vision
- vii. Sensitivity to light or sound
- viii. Nausea, vomiting or loss of appetite
- ix. Irritability, or change in personality
- x. Feeling sluggish or foggy or groggy
- xi. Concentration or focusing problems
- xii. Slowed reaction times, drowsiness
- xiii. Fatigue or sleep disturbance

Or is suspected to have sustained a brain injury after an evaluation by competent medical personal at the time of the incident,

1. The student-athlete **will not** be allowed to return to play in the current game or practice.
2. The student-athlete should not be left alone, and regular monitoring for deterioration is essential over the initial few (4+) hours following injury.
3. Following the initial injury, the student-athlete **must follow up** with their primary health care provider or an Emergency Department within the first 24 hours.
4. The student-athlete **must have** the initial evaluation filled out, signed and dated when returning to school.
5. Return to play **must follow** a medically supervised process.

The cornerstone of proper concussion management is rest until all symptoms resolve and then a graded program of exertion before return to sport. The program is broken down into six steps in which only one step is covered per one 24-hour period. The six steps involve the following:

1. *Day 0*: No exertional activity until asymptomatic for 24 hours.
2. *Day 1*: Light aerobic exercise such as walking or stationary bike, etc. No resistance training.
3. *Day 2*: Sport specific exercise such as running, etc. Progressive addition of resistance training may begin.
4. *Day 3*: Non-contact training/skill drills.
5. *Day 4*: Full contact training in practice setting (if a contact/collision sports).
6. *Day 5*: Return to competition.

If any concussion symptoms recur, the athlete should stop the progression. The student-athlete should rest for 24 hours. If symptoms resolve and remain resolved for 24 hours the student-athlete may begin the progression at the most recent level successfully completed without symptoms. In addition, the student-athlete should also be monitored for recurrence of symptoms due to mental exertion, such as reading, working on a computer, or studying.

The Return to Play Progression will be monitored by the parent in collaboration with the school nurse and the student's primary healthcare provider, if the PCP requests. In order to monitor closely any student's Return to Play Progression, the school nurse may enlist the assistance of school faculty/staff. This assistance may include, but is not limited to, requesting faculty/staff alert the school nurse/parent if they witness the student exhibiting signs/symptoms of concussion. If the student-athlete experiences any of the concussive symptoms previously listed, the student-athlete must report these symptoms to the school nurse and should report these to their parent. The school nurse will verify, in writing or verbally, that the parent is aware of recurring symptoms and the student will be placed on Activity Restrictions for 24 hours, minimum.

The student-athlete is requested to "check-in" with the school nurse, daily, while completing the Return to Play Progression. Parents are encouraged to keep vigilant watch for delayed symptoms of concussion, even after the student-athlete has completed the Return to Play Progression.