

Neosho County Community College
Concussion Management
Policy and Procedures

Addendum to the NCCC Emergency Action Plan (EAP)

Reviewed and approved by the NCCC Safety and Security Committee March 4, 2019

Reviewed and approved by the NCCC Executive Committee March 5, 2019

Reviewed and approved by the NCCC Board of Trustees March 14, 2019

NCCC Concussion Management Policy

Addendum to the EAP

Concussion is a type of traumatic brain injury that can have a serious short-term and long-term effects on student-athletes, and be potentially life threatening. Concussions occur from forces applied directly or indirectly to the skull that involves the rapid acceleration and deceleration of the brain. Concussions are very common in sports, and can happen in both males and females of all ages and in all sport activities, though it is more common in contact and collision sports. The exact recovery period from this trauma is unclear and will vary depending on the individual. Deciding when a patient can safely return to participation of sport activity following a concussion is critical and challenging. The decision of return to play has to be made by licensed physicians or certified athletic trainers (ATCs). The Neosho Athletic Department Concussion Management Policy has been made based on National Athletic Trainers' Association Position Statement that was published in March 2014 and is updated as necessary. All Neosho athletic staff are to follow the Neosho Athletic Department Concussion Management Policy in order to manage concussions properly.

- 1) All Neosho student-athletes must read the Concussion fact sheet and sign the appropriate student athlete statement (sample attached) acknowledging that:
 - a. They have read and understand the Concussion fact sheet; and
 - b. They understand the responsibility for reporting any injuries, signs/symptoms, and illnesses to the athletic training staff.

- 2) All Neosho coaches (head coaches, assistant coaches, and volunteer coaches) must read the Concussion fact sheet and sign the appropriate coaches statement (sample attached) acknowledging that:
 - a. They have read and understand the concussion fact sheet;
 - b. They encourage their athletes to report any suspected injuries and illnesses to athletic training staff, which includes any signs and symptoms of concussions;
 - c. They understand the responsibility for referring any athlete to the athletic training staff when there is a suspected concussion;
 - d. They understand the risk of serious concussion and respect the decision of athletic training staff;
 - e. They have read and understand the Neosho Concussion Management Policy; and
 - f. All Neosho coaches must complete annual training for ConcussionWise PRO for coaches.

- 3) All Neosho certified athletic trainers, athletic training students, and team physician must read and sign the appropriate medical provider statement acknowledging that:
 - a. They will provide athletes with the Concussion fact sheet and encourage their athletes to report any suspected injuries and signs/symptoms of concussion to athletic training staff and/or team physician.
 - b. They have read, understand, and will follow the Neosho Concussion Management Policy

Concussion Management Protocol

1) Baseline Assessment

The purpose of baseline assessment is to aid the medical staff in the post-injury management process by providing data that represent an athlete's brain function in an uninjured state. Baseline assessment is a supplement to support the decision-making of return to participation status of an injured athlete.

All new student-athletes in the sports of baseball, men's & women's basketball, cheerleading & dance, men's & women's soccer, softball, volleyball, and wrestling must receive a pre-season concussion baseline assessment. It is conducted on each athlete upon entering as a first-year student, transfer, or for those who sustained a concussion the previous season. We use Standardized Assessment of Concussion (SAC) and Balance Error Scoring System (BESS) for the base-line assessment.

- a. Athletic training staff will conduct the baseline assessments for all new athletes using SAC.
- b. Athletic training staff will keep the scores of baseline SAC for each athlete's medical file.
- c. Returners who suffered concussion the previous season must receive a baseline assessment again for the new academic year.

2) Evaluation

When a student-athlete shows any signs, symptoms or behaviors consistent with a concussion, the athlete will be immediately removed from participation. An athlete suspected of sustaining a concussion will be evaluated by the athletic training staff using the Standardized Assessment of Concussion (SAC), graded symptom checklists, Balance Error Scoring System (BESS). **Once the athlete is diagnosed with a concussion, the student-athlete should not be returned to athletic participation on the day of injury.** No concussed athlete should return to physical activity without being evaluated and cleared by a physician or certified athletic trainer.

- a. Each concussion is unique: each patient should be evaluated and treated on an individual basis.
- b. The student-athlete is required to report to athletic training staff after 2-3 hours post-injury, 24 hours for the additional evaluation.
- c. Follow-up evaluations will be conducted and documented daily to track any signs/symptoms recovery

3) Follow-up care

When an athlete sustains a concussion, appropriate follow-up care and proper education is critical. The concussion take-home instructions will be explained by the athletic training staff and given to the concussed student-athlete as well as the roommate, guardian, other teammates, coaching staff if necessary.

The concussed athlete will be re-evaluated as early as 2-3 hours post-injury for any change in signs/symptoms. Appropriate follow-up evaluation should be conducted daily to track symptoms recovery. All the follow-up care must be done by athletic training staff, in order for cessation of symptoms and restoration of motor control.

During the recovery, a concussed student-athlete should avoid physical activity including any workouts, conditioning, and PE classes. Physical activity during concussion is detrimental to the patient's recovery. A concussed athlete should also limit cognitive activity (academic work, video games, computer use, cellphone use etc..) in order to not exacerbate any symptoms of concussion. Instructors should receive emails from certified athletic trainers about the concussed

athletes who may need a cognitive rest. A concussed student-athlete should not be pressured by peers, coaching staff, or teachers/instructors to return to any physical or cognitive activities.

Once the concussed patient no longer exhibits concussion-related signs/symptoms and the clinical examination/assessment is normal, athletic training staff will begin a 6-step graduated return to play protocol with the athlete.

4) Graduate Return-to-Play Protocol

The Return-to-Play (RTP) progression should not start until a concussed student-athlete no longer reports concussion-related signs/symptoms, and performs at or above preinjury levels of functioning on all objective concussion assessments (baseline testing). The decision of when to start the exertional Return-to-Play progression must be made by physicians or certified athletic trainers.

The exertional Return-to-Play progression should follow:

Step 1: No activity

Step 2: Light exercise: interval bike ride

Step 3: sport-specific activities without the threat of contact from others

Step 4: Noncontact training involving others, resistance training

Step 5: Unrestricted training

Step 6: Return to play

There has to be 24 hours between each step. A concussed athlete must report to athletic training staff after each step, and report any concussion-related symptoms. If the athlete remains asymptomatic on the day following the first step, the athlete will continue with the next step on the next day. However, if the athlete shows any signs/symptoms of concussion during the exertional Return-to-Play progression, the activity should be immediately stopped, and must go back to the first step of the Return-to-Play progression. Those athletes with returned symptoms must report to athletic training staff daily for appropriate follow-up care.

Athletic training staff, coaching staff, and athletes shall understand the risk of Second-impact syndrome. Second-impact syndrome occurs when the concussed athlete get another concussion before the symptoms of previous brain injury have resolved. The concussed athlete could get a second-impact syndrome by even a blow to the chest or back which creates enough force to snap patient's head. This force will result in rapid swelling and herniation of the brain, and it is a life-threatening situation. Second-impact syndrome has a mortality rate of approximately 50%.

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Student-Athlete Concussion Statement

After reading the Concussion Fact Sheet, I am aware of the following information:

- _____ A concussion is a serious brain injury which I am responsible for reporting to athletic training staff.
- _____ A concussion can affect my ability to perform everyday activities, affect reaction time, balance, sleep, vision, concentration and classroom performance.
- _____ If I suspect a teammate has a concussion, I am responsible for reporting the injury to athletic training staff.
- _____ I will not return to play in a game or practice if I have received a blow to the head or body that results in concussion-related symptoms.
- _____ I understand that the brain needs time to heal after a concussion. I am at risk to sustain second impact syndrome if I return to play before my symptoms resolve.
- _____ In rare cases, repeat concussion can cause permanent brain damage in the future, or even death.

- I understand that it is my responsibility to report all concussion symptoms to my athletic training staff and/or team physician.
- I have read and understand the Concussion Fact Sheet.

Signature of Student-Athlete Date

Printed name of Student-Athlete

Neosho County Community College

Coaches Concussion Statement

After reading the Concussion Fact sheet and Neosho Concussion Management Policy, I am aware of the following information:

_____ A concussion is a serious brain injury which athlete should report to the medical staff.

_____ A concussion can affect the athlete's ability to perform everyday activities, affect reaction time, balance, sleep, and classroom performance. Some symptoms can show up hours or days after the initial injury.

_____ I will not knowingly allow the athlete to return to play in a game or practice if he/she has received a blow to the head or body that results in concussion-related symptoms.

_____ I understand that a concussed athlete should not return to play in a game or practice on the same day of suspected concussion.

_____ If I suspect one of my athletes has a concussion, it is my responsibility to have that athlete report to the athletic training staff.

_____ I will encourage my athletes to report any suspected injury to the athletic training staff, including signs and symptoms of concussions.

_____ I understand that diagnosis of a concussion can only be made by physicians or athletic training staff. I will follow the instruction and decision by those medical staff.

_____ I understand that a concussed athlete cannot return to play until he/she is medically cleared by physicians and/or athletic training staff.

I have read and understand the Concussion Fact Sheet.

I have been trained and certified by ConcussionWise PRO.

I have read and understand the Neosho Athletic Department Concussion Management Policy.

Signature of Coach

Date

Printed name of Coach



CONCUSSION SAFETY

WHAT COACHES NEED TO KNOW

What is a concussion?

A concussion is a type of traumatic brain injury. It follows a force to the head or body and leads to a change in brain function. It is not typically accompanied by loss of consciousness.

How can I tell if an athlete has a concussion?

You may notice the athlete ...

- Appears dazed or stunned
- Forgets an instruction
- Is confused about an assignment or position
- Is unsure of the game, score or opponent
- Appears less coordinated
- Answers questions slowly
- Loses consciousness

Note that no two concussions are the same. All possible concussions must be evaluated by an athletic trainer or team physician.

The athlete may tell you he or she is experiencing ...

- A headache, head pressure or that he or she doesn't feel right following a blow to the head
- Nausea
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light or noise
- Feeling sluggish, hazy or foggy
- Confusion, concentration or memory problems

What can I do to keep student-athletes safe?

	Preseason	In-Season	Time of Injury	Recovery
What can I do?	Create a culture in which concussion reporting is encouraged and promoted.	Know the signs and symptoms of concussions.	Remove athletes from play immediately if you think they have a concussion and refer them to the team physician or athletic trainer.	Follow the recovery and return-to-play protocol established by team physicians and athletic trainers.
Why does it matter?	Athletes who don't immediately seek care for a suspected concussion take longer to recover.	The more people who know what to look for in a concussed athlete, the more likely a concussion will be identified.	Early removal from play can mean a quicker recovery and help avoid serious consequences.	Team physicians and athletic trainers have the training to follow best practices related to the concussion recovery process.
Tips and strategies	Be present when your team physician or athletic trainer provides concussion education material to your team. Tell your team that this matters to you.	Check in with your team physician or athletic trainer if you want to learn more about concussion safety.	Provide positive reinforcement when an athlete reports a suspected concussion.	Tell athletes that decisions related to their return to play and health are entirely in the hands of the team physician and athletic trainer.

You play a powerful role in setting the tone for concussion safety on your team. Let your team know that you take concussion seriously and reporting the symptoms of a suspected concussion is an important part of your team's values.

What happens if an athlete gets a concussion and keeps practicing or competing?

- Due to brain vulnerability after a concussion, an athlete may be more likely to suffer another concussion while symptomatic from the first one.
- In rare cases, repeat head trauma can result in brain swelling, permanent brain damage or even death.
- Continuing to play after a concussion increases the chance of sustaining other injuries too, not just concussion.
- Athletes with a concussion have reduced concentration and slowed reaction time. This means they won't be performing at their best.
- Athletes who delay reporting concussion may take longer to recover fully.

What are the long-term effects of a concussion?

- We don't fully understand the long-term effects of a concussion, but ongoing studies raise concerns.
- Athletes who have had multiple concussions *may* have an increased risk of degenerative brain disease, and cognitive and emotional difficulties later in life.

What do I need to know about repetitive head impacts?

- Repetitive head impacts mean that an individual has been exposed to repeated impact forces to the head. These forces may or may not meet the threshold of a concussion.
- Research is ongoing but emerging data suggest that repetitive head impact also may be harmful and place a student-athlete at an increased risk of neurological complications later in life.

Did you know?

- Most contact or collision teams have at least one student-athlete diagnosed with a concussion every season.
- Your school has a concussion management plan, and team physicians and athletic trainers are expected to follow that plan during a student-athlete's recovery.
- NCAA rules require that team physicians and athletic trainers have the unchallengeable authority to make all medical management and return-to-play decisions for student-athletes.
- We're learning more about concussion every day. To find out more about the largest concussion study ever conducted, which is being led by the NCAA and U.S. Department of Defense, visit ncaa.org/concussion.



For more information, visit ncaa.org/concussion.

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CONCUSSION SAFETY

WHAT STUDENT-ATHLETES
NEED TO KNOW

What is a concussion?

A concussion is a type of traumatic brain injury. It follows a force to the head or body and leads to a change in brain function. It is not typically accompanied by loss of consciousness.

How can I keep myself safe?

1. Know the symptoms.

You may experience ...

- Headache or head pressure
- Nausea
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light or noise
- Feeling sluggish, hazy or foggy
- Confusion, concentration or memory problems

2. Speak up.

- If you think you have a concussion, stop playing and talk to your coach, athletic trainer or team physician immediately.

3. Take time to recover.

- Follow your team physician and athletic trainer's directions during concussion recovery. If left unmanaged, there may be serious consequences.
- Once you've recovered from a concussion, talk with your physician about the risks and benefits of continuing to participate in your sport.

How can I be a good teammate?

You may notice that a teammate ...

- Appears dazed or stunned
- Forgets an instruction
- Is confused about an assignment or position
- Is unsure of the game, score or opponent
- Appears less coordinated
- Answers questions slowly
- Loses consciousness

- If you think one of your teammates has a concussion, tell your coach, athletic trainer or team physician immediately.
- Help create a culture of safety by encouraging your teammates to report any concussion symptoms.
- If one of your teammates has a concussion, let him or her know you and the team support playing it safe and following medical advice during recovery.
- Being unable to practice or join team activities can be isolating. Make sure your teammates know they're not alone.

No two concussions are the same. New symptoms can appear hours or days after the initial impact. If you are unsure if you have a concussion, talk to your athletic trainer or team physician immediately.

What happens if I get a concussion and keep practicing or competing?

- Due to brain vulnerability after a concussion, an athlete may be more likely to suffer another concussion while symptomatic from the first one.
- In rare cases, repeat head trauma can result in brain swelling, permanent brain damage or even death.
- Continuing to play after a concussion increases the chance of sustaining other injuries too, not just concussion.
- Athletes with concussion have reduced concentration and slowed reaction time. This means that you won't be performing at your best.
- Athletes who delay reporting concussion take longer to recover fully.

What are the long-term effects of a concussion?

- We don't fully understand the long-term effects of a concussion, but ongoing studies raise concerns.
- Athletes who have had multiple concussions *may* have an increased risk of degenerative brain disease and cognitive and emotional difficulties later in life.

What do I need to know about repetitive head impacts?

- Repetitive head impacts mean that an individual has been exposed to repeated impact forces to the head. These forces may or may not meet the threshold of a concussion.
- Research is ongoing but emerging data suggest that repetitive head impact also may be harmful and place a student-athlete at an increased risk of neurological complications later in life.

Did you know?

- NCAA rules require that team physicians and athletic trainers manage your concussion and injury recovery independent of coaching staff, or other non-medical, influence.
- We're learning more about concussion every day. To find out more about the largest concussion study ever conducted, which is being led by the NCAA and U.S. Department of Defense, visit ncaa.org/concussion.

CONCUSSION TIMELINE



Baseline Testing

Balance, cognitive and neurological tests that help medical staff manage and diagnose a concussion.



Concussion

If you show signs of a concussion, NCAA rules require that you be removed from play and medically evaluated.



Recovery

Your school has a concussion management plan, and team physicians and athletic trainers are required to follow that plan during your recovery.



Return to Learn

Return to school should be done in a step-by-step progression in which adjustments are made as needed to manage your symptoms.



Return to Play

Return to play only happens after you have returned to your preconcussion baseline and you've gone through a step-by-step progression of increasing activity.

For more information, visit ncaa.org/concussion.

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