

HOMER CENTRAL SCHOOL DISTRICT'S STUDENT

Return to play/activity Protocol Following a Concussion

The following protocol has been established in accordance to the National Federation of State High School Associations and the International Conference on Concussion in Sport, Prague 2004 and Zurich 2008. In addition it has been fabricated in a collaborative effort with concussive experts within the greater Central New York area and the Homer Central School District's Supervising Medical Officers and concussion management team. As such it is imperative to remember the safety of the student is the primary concern of Homer Central School District and its medical personnel.

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 shows signs or symptoms of a concussion or is suspected to have sustained a brain injury after an evaluation by medical personnel or athletic trainer at the time of the incident:

1. The student **will not** be allowed to return to play/activity in the current game or practice.
2. The student should not be left alone, and regular monitoring for deterioration is essential over the initial few hours following injury.
3. Following the initial injury, the student **must follow up** with their primary Care Physician or by an Emergency Department within the first 24 hours.
4. The student **must have** the "initial Concussion Checklist by Athletic Trainer or Coach/Nurse" and the "Concussion Checklist Physician Evaluation" signed and dated by #3 above. These forms must be returned to either Athletic Trainer or School Nurse at Homer Central Schools.
5. Return to play **must follow** a medical clearance and successful completion of the "return to Play Protocol". IMPACT testing may also be used to determine a return to activity.
6. The athletic trainer will supervise and document the Zurich "Return to Play Protocol." The CMT has the final determination for the student's return to play status. The CMT includes the school doctor, school nurses, athletic trainer and Director of Athletics.

The cornerstone of proper concussion management is rest until all symptoms resolve and then a graded program of **exertion** before return to sport/activity. The program is broken down into six steps in which only one step is covered per one 24 hour period. The six steps involved with the Return to Play Protocol are:

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

If any post-concussion symptoms recur, the athlete should drop back to the previous level and try to progress after 24 hours of rest. 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 taking a test.