



## YOUTH SPORTS CONCUSSION AND INJURY POLICY

### DEFINITIONS

- A **concussion** is a brain injury that is characterized by an onset of impairment of Cognitive and/or physical functioning, and is caused by a blow to the head, face or neck, or a blow to the body that causes a sudden jarring of the head. A concussion typically results in the rapid onset of short-lived impairment of neurologic function that resolves spontaneously. A concussion may result in neuropathological changes, but the acute clinical symptoms largely reflect a functional disturbance rather than structural injury. A concussion can occur with or without a loss of consciousness, and proper management is essential to the immediate safety and long-term future of the injured individual.

- An **appropriate licensed health care provider** means a licensed physician or another licensed individual under the supervision of a licensed physician, such as a nurse practitioner, physician assistant, or certified athletic trainer who has received training in concussion evaluation and management.

- **Return to play** means to participate in a non-medically supervised practice or athletic competition.

- **Cleared to participate** means that the youth athlete has been symptom free for 48 hours, or more, and has been released to return to play by an appropriate licensed healthcare provider as defined above. Such release to return to play **MUST** be in writing.

## **SIGNS / SYMPTOMS OF A CONCUSSION**

The common **signs / symptoms of a concussion** include, but are not limited to, the following:

- Appears dazed or stunned; - Confusion about an assignment / position;
- Headache or pressure in head; - Is unsure of games, score or opponent;
- Nausea or vomiting; - Balance problems or dizziness;
- Double or blurry vision; - Feeling sluggish, hazy, foggy, or groggy;
- Sensitivity to light; - Concentration or memory problems;
- Sensitivity to noise; - Answers questions slowly;
- Forgets an instruction; - Moves clumsily;
- Loss of consciousness; - Mood, behavior, personality changes; and
- Loss of memory; - Inability to recall events before/after injury.

## **RECOMMENDED COURSE OF ACTION**

The following recommended course of action shall apply to all sports competitions and sports related activities occurring in association with the Skating Club of Jackson Hole.

1. SCJH encourages baseline ImPACT testing of your child. Cost is approximately \$20-25 dollars and is done by a licensed professional with experience in concussions. ImPACT Baseline Test is a series of game-like activities that measure reaction time, memory, and processing speed. They give your doctor an accurate picture of your healthy brain function.
2. If a youth athlete experiences or exhibits any of the above **signs / symptoms of a concussion** following an injury, contact event, or blow to the head, face, neck or a blow to the body that causes a sudden jarring of the head, he or she shall be immediately removed from the athletic event, game, practice or contest and shall not return to play until he or she is cleared to participate by an appropriate licensed healthcare professional. Or waiver signed by parent/guardian (see below) (**WHEN IN DOUBT, KEEP THEM OUT!**)
3. The youth athlete's parent or guardian shall be notified that: (a) He or she experienced an injury, contact event, or blow to the head, face, neck or a blow to the body that causes a sudden jarring of the head, and/or that he or she exhibited one or more **signs / symptoms of a concussion**; (b) That he or she was immediately removed from the athletic event, game, practice or contest; and (c) That he or she may not return to play until he or she is cleared to participate by an appropriate licensed health care professional. \*Or waiver signed by parent/guardian; See statement below.

Any youth athlete suspected of having a concussion should be evaluated by an appropriate licensed health care professional **within 24 hours of the injury**, contact event, or blow to the head, face, neck or a blow to the body that causes a sudden jarring of the head. \* Or waiver signed by parent/guardian; See statement below.

4. No youth athlete shall be permitted to return to play until he or she has not exhibited the **signs / symptoms of a concussion** for 48 hours, or more, and is medically cleared to participate by an appropriate licensed health care professional. The coach must receive written permission from an appropriate licensed health care professional before the youth athlete may return to play. \* Or waiver signed by parent/guardian; See statement below.
5. You can't "see" a concussion on a radiological evaluation, although sometimes ER doctors will order a head CT to look for bleeding in or around the skull.

Concussions or suspected concussions should always be evaluated as soon as possible. Waiting to evaluate a concussion can result in increased severity and a longer time needed for the athlete to return to full activity.

Be aware that concussion symptoms often take **hours or days to fully manifest**.

Concerned parents can take an athlete to the ER or other licensed healthcare professional qualified to evaluate concussions, have them evaluated and discharged, and consider them "cleared" when, in reality, concussion symptoms and issues will continue to develop and can cause serious issues if the athlete immediately returns to skating. If the athlete is evaluated in the ER, the athlete should also have subsequent follow up with a neurologist or sports doc experienced in working with concussed athletes. At the very minimum, an athlete with a concussion or suspected concussion should follow an incremental return to play plan that will take a minimum of **seven to 10 days to return to full training and activity**.

**Bottom line: A concussion evaluation from the ER or other licensed healthcare professional qualified to evaluate concussions is the first step in a return to play progression for the figure skater. \* Or waiver signed by parent/guardian; See statement below.**

**Example Timeline that may be suggested by a physician after a head injury:**

Phase 1: Cognitive rest (including limited screen time, homework, etc.)

Phase 2: Permission to stretch and work on balance, watch practice or skating on video

Phase 3: Permission to do aerobic activity that elevates the heart rate submaximally for 30 minutes or less

Phase 4: Permission to get on the ice for one session of forward and backward stroking with limited turns and twisting and no spins or jumps. Total time should be one session.

Phase 5: Permission to execute choreography (with or without music) with turns but with no spins or jumps. Total ice time can be increased slightly.

Phase 6: Permission to execute choreography and do program run-throughs marking jumps and spins.

Phase 7: Permission to do basic spins and single jumps.

Phase 8: Permission to do advanced spins and double jumps.

Phases 9-10: Permission to do all spins and triple jumps.

#### IV. RECOMMENDED TRAINING FOR ALL COACHES

All coaches (head and assistant) need to be knowledgeable regarding the **signs / symptoms of a concussion**, appropriate strategies to reduce the risk of concussions, how to seek proper medical treatment for a youth athlete suspected of having a concussion, and when the athlete may safely return to play. Accordingly, all coaches shall review the Center for Disease Control's *Heads Up-Concussion in Youth Sports* video training course, which is available at [http://www.cdc.gov/concussion/HeadsUp/online\\_training.html](http://www.cdc.gov/concussion/HeadsUp/online_training.html), in advance of their participation in youth athletic coaching, practice events, or show. *Heads Up: Concussion in Youth Sports* is a free, online course available to coaches, parents, and others helping to keep athletes safe from concussion. It features interviews with leading experts, dynamic graphics and interactive exercises, and compelling storytelling to help one recognize a concussion and know how to respond if an athlete is believed to have suffered a concussion. (Parents and guardians of youth athletes are also urged to visit The Center for Disease Control's website and view the video training.)

#### V. ROLE OF COACHING STAFF / GAME OFFICIALS / COMPLIANCE

Coaches (head and assistant) and their staff will NOT be expected to “diagnose” a concussion, as that is the job of an appropriate licensed health care professional. Coaches/Coaching Staffs shall use their best judgment in observing the **signs / symptoms of a concussion**, and in taking the action mandated by this Policy in the event that a youth athlete experiences or exhibits any of the **signs / symptoms of a concussion** following an injury, contact event, or blow to the head, face, neck or body.

#### ImPACT TESTING

Hayden Hilke, MSR,DPT  
Peak Physical Therapy Wilson Wy  
Phone: (307) 699-7667

## **NON-CONCUSSION INJURY AND RETURN TO PLAY POLICY**

1. The youth athlete's parent or guardian shall be notified that: (a) He or she experienced an injury compromising the athlete's safety to continue practicing or performing the sport (b) That he or she was immediately removed from the athletic event, game, practice or contest; and (c) That he or she may not return to play until he or she is cleared to participate by an appropriate licensed health care professional. \* Or waiver signed by parent/guardian; See statement below.

**\*If a parent or guardian chooses not to follow SCJH Concussion and Injury Policy recommendations to obtain clearance for return to play from a licensed healthcare professional trained to evaluate such injuries, the following waiver must be signed by the parent or guardian:**

### **Waiver of Healthcare Professional's Visit and Return to Play Note**

**"I \_\_\_\_\_ parent/guardian of \_\_\_\_\_ hereby decline to provide a note from a licensed healthcare professional trained to evaluate concussions and/or non-concussion injuries for return to play clearance.**

**I understand I have been advised by SCJH to seek recommended care and evaluation."**

**Parent/Guardian education has been provided.**

**Signed \_\_\_\_\_**

**Date \_\_\_\_\_**