
Procedures for Concussion Management

Objectives

1. To educate members of the school district and community regarding potential effects and complications of concussion, especially Second Impact Syndrome;
2. To promote early recognition of concussion in students and referral for medical assessment should a head injury occur in school;
3. To facilitate collaboration between school staff, students' physicians, and families; and
4. To ensure safe and consistent management of students who have sustained a concussion.

Concussion Management: Medical

1. Staff will immediately: (1) exclude from physical education and recess activities, as well as intramural sports, any student who sustains trauma to the head and/or symptoms of a concussion and (2) refer the student to the school nurse for assessment. If the trauma occurs after regular school hours, the coach or athletic trainer will notify the school nurse about the injury as soon thereafter as possible.
2. School staff members will notify the school nurse as soon as they become aware of a student who has sustained a head injury or concussion outside of school.
3. The school nurse will: obtain injury details; assess the student, utilize the SCAT II tool if indicated; notify the parent/guardian and provide the Acute Concussion Care Plan and exchange of information form to take to his/her physician; refer for medical evaluation, as indicated; and exclude from further physical education, intramurals, interscholastic sports and recess any student who has sustained a head injury and is suspected of having a concussion until such time as the student is medically cleared to return to such activities.
4. The school nurse will return students to contact activities only with the written medical authorization of the student's physician¹ verifying that it is safe for the student to return to full participation in physical education, intramural or interscholastic sports and recess activities.
5. The school nurse will consult with the student's counselor and administrator before processing a physician's authorization for return to all physical education, recess and intramural or interscholastic activities to ensure consistency between academic and athletic management of the student's follow up care.
6. If the school nurse questions whether it is safe for a student to return to participation in contact activities according to the medical authorization, the school nurse will consult with the health services supervisor and school medical advisor, as appropriate, and action will be taken accordingly.
7. Staff will never, under any circumstance, override the decision of the school nurse regarding a student's participation in high risk activities during school, sports, or school related events.

¹The term "physician" includes doctors of medicine and osteopathy, advance practice nurses, physician assistants

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1. Assessment results and recommendations for participation in educational and physical activities in school, including classes, related academic work, physical education, recess, extracurricular activities, and intramural or interscholastic sports will be provided to the school nurse by the family and/or student’s physician.
2. Authorization for exchange of information will be provided to parents/guardians for signature.
3. Physician notes requesting academic adjustments of any type related to the diagnosis of concussion will be shared with the school academic team which will review the adjustments and implement reasonable short term accommodations.
4. When a student requires educational adjustments beyond three weeks, the school nurse will advise the parents of the possibility of the school district’s request for an assessment by a qualified neurologist or concussion specialist.
5. When the student is requiring educational adjustments beyond three weeks as determined by recommendations from the student’s physician after a follow –up appointment and receipt of recommendations, a team meeting with the academic team will be convened to develop an IHCP to address appropriate health services/educational supports and accommodations and to review the ‘return to learn’ process.
6. As appropriate, the school nurse will obtain data from the academic team and report follow-up data including school attendance, academic performance and symptom assessment to the physician prior to the medical evaluation.
7. When a student is receiving adjustments beyond three weeks, medical updates including updated accommodations will be required at least monthly for review by the team.
8. Once a student has been medically cleared to return to sports, and other high risk activities the individualized health care plan and academic adjustments related to concussion will be terminated.
9. Only after a student has been cleared to fully participate in academics can the student be cleared to return to interscholastic and intramural sports.
10. In the event that a student is unable to attend school and requirements for Home Bound instruction are met, procedures for initiating Home Bound instruction will be initiated.
11. In the event that a student’s concussion symptoms are continuing over an extended period of time and a student is referred for consideration of a disability under Section 504, the Section 504 team will meet to determine if concussion-related accommodations are appropriate.
12. The Health Services Supervisor, School Medical Advisor and Pupil Services Director will be consulted by the school team as appropriate throughout the above process.