## **Students**

## Administrative Procedure - Program for Managing Student Concussions and Head Injuries

This administrative procedure implements Board Policy 7:305, Student Concussions and Head Injuries.

## **Definitions**

**Concussion** - A type of traumatic brain injury caused by a bump, blow, or jolt to the head that alters the way the brain normally functions. A concussion can also occur from a blow to the body that causes the head to move rapidly back and forth. These injuries may or may not cause a loss of consciousness.

**School-related activity** – Any activity that is operated and/or sponsored by the District. This includes, but is not limited, to interscholastic athletic practices and competitions.

Actor	Action
Superintendent or designee	Identify the staff members who are primarily responsible for implementing this procedure at school.
	Identify the staff members who are primarily responsible implementing this procedure at school-related activities.
	Select appropriate training or educational materials to be used to inform staff members, coaches, students, and parents/guardians about the nature and risk of concussions and head injuries.
Building Principal <del>s</del> or designee	Ensure school compliance with IHSA concussion protocols, policies, and by- laws, including its <i>Protocol for NFHS Concussion Playing Rules</i> , and its <i>Return to Play Policy</i> . Available at: <u>www.ihsa.org/Resources/SportsMedicine/ConcussionManagement/SchoolResources</u> <u>.aspx.</u>
	Use selected training/educational materials to educate staff members, coaches, and activity sponsors/volunteers about the nature and risk of concussions and head injuries. Instruct coaches, trainers, and other staff members who are responsible for students who participate in interscholastic athletics or physical activity to review and abide by the IHSA protocols, polices, and by-laws regarding concussions and head injuries.
	Require that:
	1. A student who exhibits signs, symptoms, or behaviors consistent with a concussion (e.g., loss of consciousness, headache, dizziness, confusion, or balance problems) during a school-related activity is removed from participation-immediately. This includes, but is not limited to, interscholastic athletic practices, games, and competitions.
	2. A student who has been removed from a school-related activity for a possible concussion or head injury is not allowed to return to that

Actor	Action
	activity unless cleared to do so in writing by a physician licensed to practice medicine in all its branches in Illinois or a certified athletic trainer working in conjunction with a physician licensed to practice medicine in all its branches in Illinois.
	3. If not cleared to return to that school-related activity, a student is not allowed to return to play, practice, or otherwise participate until the student receives the proper written clearance.
	4. Staff members place all written information concerning an injury to a student, including without limitation, a clearance from a student's physician or a certified athletic trainer, in the student's school student record.
	5. Temporarily excuse a student from attending all or a portion of the school day due a student's concussion or head injury. An excused absence will be issued per a parent/guardian request only where the parent/guardian provides the school with a written statement providing that the student has a concussion or head injury by a physician licensed to practice medicine in all its branches in Illinois or a certified athletic trainer working in conjunction with a physician licensed to practice medicine in all its branches in Illinois.
	6. Inform students and their parents/guardians in writing about Board Policy 7:305, <i>Student Concussions and Head Injuries</i> by referring to it in the Parent-Student Handbook or other annual notice.
	7. Assure a staff member informs the student's parent/guardian about a possible concussion or head injury when a student exhibits signs, symptoms, or behaviors consistent with a concussion or head injury (e.g., loss of consciousness, headache, dizziness, confusion, or balance problems) at school.
All School	Comply with the requirements of this procedure.
Personnel	Refer a student who, while at school, exhibits signs, symptoms, or behaviors consistent with a concussion or head injury (e.g., loss of consciousness, headache, dizziness, confusion, or balance problems) to the Building Principal or a registered nurse.
Coaches, Trainers, (and other staff members who are responsible for school-related activities)	Inform students and their parents/guardians in writing about Board Policy 7:305, <i>Student Concussions and Head Injuries</i> by referring to it in, an <i>Agreement to Participate</i> , or other written statement (handbook) that a student and his or her parent/guardian are required to sign before the student is allowed to participate in a school-related activity.
	Inform students and their parents/guardians about concussions and head injuries by:
	• Giving them a copy of the IHSA's <i>Concussion Information Sheet</i> . The <i>Concussion Information Sheet</i> .
	Using selected educational materials to educate students-and parents/guardians about the nature and risk of concussions and head injuries, including the risks inherent in continuing to play a sport to do an activity

Actor	Action
	after a concussion or head injury.
	Assure a student who exhibits signs, symptoms, or behaviors consistent with a concussion (e.g., loss of consciousness, headache, dizziness, confusion, or balance problems) in a practice or activity shall be removed from participation or competition at that time.
	Assures that a student who has been removed from an activity for a possible concussion or head injury may not return to that activity unless cleared to do so by a physician licensed to practice medicine in all its branches in Illinois or a certified athletic trainer.
	Assures If not cleared to return to that contest, a student may not return to play or practice until the student has provided his or her school with written clearance from a physician licensed to practice medicine in all its branches in Illinois or a certified athletic trainer working in conjunction with a physician licensed to practice medicine in all its branches in Illinois.
	Before a school-related activity begins, learn concussion symptoms and danger signs-and how to respond if a student exhibits signs, symptoms, or behaviors consistent with a concussion (e.g., loss of consciousness, headache, dizziness, confusion, or balance problems) in a practice or game.
	Do not assess a head injury; instead, remove the student from participation in the activity and seek the advice of a physician licensed to practice medicine in all its branches in Illinois, a certified athletic trainer, or another District- approved health care professional.
	Inform the student's parent/guardian about a possible concussion or head injury and give the parent/guardian a fact sheet on concussions.

APPROVED: October 9, 2012