

## **Lamesa ISD Concussion Management Policy**

The following policy has been developed by Lamesa ISD in conjunction with the concussion management oversight team to fulfill the requirements of the HB 2038. (Natasha's Law) The goal of this policy is to assist parents, faculty, and students in the understanding the dangers of a concussion and outline the steps to return to play following a concussion. It also serves as a reference for the evaluation methods and management protocols of any student-athlete who suffers a concussion while involved in athletics within Lamesa ISD.

### **CONCUSSION OVERSIGHT TEAM**

The concussion oversight team consists of the following members:

1. Yvette Bustamonte - Head Athletic Trainer
2. Mark Key, MD
3. Michael Sprys, D.O.
4. Lubbock Sports Medicine Team

**The superintendent, or superintendent's designee will be responsible for making sure a concussion oversight team is formed, a policy with return to play guidelines is developed, and be responsible for the implementation and documentation required for this policy.**

## I. BACKGROUND

Medical management and understanding of sports-related concussions is evolving. Lamesa ISD has established this policy to provide education about concussion for the athletic department staff, faculty, parents, and student-athletes. This policy outlines procedures for staff to follow in managing concussion as it pertains to return to play issues after a concussion.

Lamesa ISD seeks to provide a safe return to play procedure for all athletes after a concussion. In order to effectively and consistently manage these injuries, procedures have been developed to aid in ensuring the concussed student-athletes are properly identified, treated, referred appropriately, and receive the appropriate follow-up medical care prior to returning to activity.

## II. PARENT CONSENT

Each year prior to participation in practice or competition, the student-athlete and the student-athlete's parent or guardian or other person with legal authority to make medical decisions for the student-athlete, must sign a consent acknowledging the risk of a concussion and the Lamesa ISD Concussion Management Policy. **This UIL Form will be included in the Athletics Forms Packet required by every student to complete before they are allowed to participate in athletics.**

### III. DEFINITION AND COMMON SIGNS AND SYMPTOMS

A concussion is an injury caused by traumatic force or impact that causes a complex pathophysiological process affecting the brain which may include temporary or prolonged altered brain function resulting in physical, cognitive, and/or emotional symptoms or altered sleep patterns. It may or may not include loss of consciousness.

Common signs and symptoms include:

|                          |                          |
|--------------------------|--------------------------|
| Headache                 | Sensitivity to light     |
| Balance Problems         | Sadness                  |
| Trouble falling asleep   | Numbness or tingling     |
| Drowsiness               | Difficulty concentrating |
| Irritability             | Vomiting                 |
| Feeling more emotional   | Fatigue                  |
| Feeling mentally foggy   | Sleeping less than usual |
| Visual problems          | Sensitivity to noise     |
| Nausea                   | Nervousness              |
| Dizziness                | Feeling slowed down      |
| Sleeping more than usual | Difficulty remembering   |

### IV. RESPONSE TO SUSPECTED CONCUSSION

A. A student-athlete shall be removed from practice or competition immediately if one of the following person believes the student-athlete might have sustained a concussion.

- Athletic trainer/ Licensed Health Care Provider

- Coach
  - Physician
  - Student-athlete's parent/guardian/another person with legal authority to make medical decisions for the student-athlete
- B. The student-athlete will not be allowed to return to practice or competition that day, must be evaluated by a licensed health care provider, and will require a physician's clearance before returning to activity.
- C. The student-athlete's parent/guardian/another person with legal authority to make medical decisions for the student-athlete, will be notified by a coach or the athletic trainer that a suspected concussion has occurred.
- D. Immediate referral to an emergency medical center will be made if the student-athlete: (1) has had loss of consciousness, (2) has a declining mental and/or physical functioning, (3) has any signs of an associated injury to head and/or neck
- E. The student-athlete should not be left alone and should be serially monitored and may only be released to a parent/guardian/another person with legal authority to make medical decisions for the student-athlete.
- F. If the parent/guardian/another person with legal authority to make medical decisions for the student-athlete chooses so, they have the right to seek emergency medical care at any time.

## V. RETURNING TO PRACTICE OR COMPETITION

A student removed from practice or competition under the suspicion of having a concussion may not be permitted to return to practice or competition until:

- A. The student-athlete has been evaluated using: established medical protocols based on peer-reviewed scientific evidence and by a treating physician chosen by the student-athlete's parent/guardian/another person with legal authority to make medical decisions for the student-athlete.
- B. The treating physician has provided a written statement indicating that, in the physician's professional judgment, it is safe for the student to return to participation.
- C. The student has successfully completed each requirement of the return to play protocol.
- D. Both the student-athlete and the student-athlete's parent/guardian/another person with legal authority to make medical decisions for the student-athlete have:
  - a. Acknowledged that the student-athlete has completed the requirements of the return to play protocol.
  - b. Provided the treating physician's written release to the athletic trainer
  - c. Signed the UIL Return to Play Form stating they:
    - i. Have been informed concerning and consents to the student-athlete participating in returning to play in accordance with the return to play protocol established by the concussion oversight team,

- ii. Understand the risks associated with the student returning to play and will comply with any ongoing requirements in the return to play protocol,
- iii. Consents to the disclosure to appropriate persons, consistent with the Health Insurance Portability and accountability Act of the 1996, of the treating physician's written statements under Subdivision (3) and, if any, the return to play recommendations of treating physician,
- iv. Understands the immunity provisions under Section 38.159 of the Texas Education Code.

## VI. ACADEMIC ACCOMMODATIONS

It may be necessary for student-athletes with a concussion to have cognitive rest as well as physical rest in order to achieve maximum recovery in the shortest period of time. Cognitive rest may include not using cell phones, computers, video games, TV's, and school modifications. Lamesa ISD will work in conjunction with the physician and staff for recommendations to make the appropriate accommodations.

## VII. RETURN TO PLAY PROTOCOL

In accordance with the latest research and recommendations the following return to play protocol will be used:

Phase 1: no external physical activity until student-athlete is symptom free for 24 hours and receives a written release from a physician to begin Concussion Return to Play Protocol.

Phase 2: each phase of will last 24 hours and the student-athlete must remain asymptomatic to progress to each additional phase. If the student-athlete becomes symptomatic during any phase, the will NOT progress to the next phase until they are able to complete asymptotically. If symptoms persist, the student-athlete must be re-evaluated by a physician.

Step 1:

Symptom-limited activity

Daily activities that do not provide symptoms: reintroduction to work/school

10 minutes

Step 2:

Light aerobic exercise

May include: walking or stationary cycling at slow to medium pace.

20 minutes

Step 3:

Sport-specific exercise

May include: Simple movement activities such as running drills.

30 minutes

Step 4:

Non-contact training drills

May include: Harder training drills, passing drills. Begin progressive resistance training.

60 minutes

Step 5:

Full contact practice

May include: Participation in normal training activities

Step 6:

Return to sport

#### VIII. SUBSEQUENT CONCUSSION

Any subsequent concussion requires further medical evaluation and strict adherence to the provisions of this policy with consideration for disqualification of a student with multiple concussions based on physical recommendations.

#### IX. EDUCATION

Lamesa ISD will ensure that all appropriate staff is trained in accordance with HB2038.