



<b>SUBJECT</b>  <b>MODEL POLICY AND GUIDANCE FOR PREVENTION AND TREATMENT OF SPORTS RELATED CONCUSSIONS</b>	<b>NUMBER</b> <b>RM501</b>
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This policy is designed to provide guidance to affiliate members in the development, establishment, and implementation of policies, procedures and programs for the prevention, treatment and education of Sports-Related Concussions (SRC) and Traumatic Brain Injuries (TBI).

## PART I

### Background

US Youth Soccer Federation has established the Concussion Procedure and Protocol for US Youth Soccer Events (Appendix A) and published a suggested form to report Concussions and Traumatic Brain Injuries (Appendix B). In consonance with these procedure and protocol Cal South has established the following policy for all affiliate members adults and youth.

The California Legislature and the Governor on July 21, 2014 signed into law an amended youth sports concussion safety law (AB2127, Chapter 165) strengthening the law in several key areas. Even though this bill mostly relates to the Interscholastic sports (California Interscholastic Federation) (CIF), it allows for other entities, such as Cal South, to adopt and enforce rules to provide a higher standard of safety for athletes than the standard established under the bill.

## PART II

### Key Provisions

- **Broad Coverage:** The law, as amended, covers all athletes participating in private organizations which use public facilities.
- **Education :** In order to participate in sports, athletes and parent or guardian must sign and return the US Youth proposed form (Attachment B) each year acknowledging receipt and review of a concussion and traumatic brain injury information sheet.  
 \*\* All Coaches, Assistant coaches, team managers, DOCs, and **certified** athletic trainers must complete a head injury/concussion training program thru CDC certification process. Certificate must be presented to the registrar for posting of the Cal South Registration System. This will be a prerequisite for licensing coaches, assistant coaches & team managers.
- **Immediate removal from play in case of a suspected concussion:** Athletes suspected of having sustained a concussion must be immediately removed from play for the remainder of the day *and must be evaluated by a qualified healthcare professional trained in the management of concussions.*
- **No return to play without written medical clearance:** Athletes who have been removed may not return to play until evaluated and received written clearance from a licensed health care provider trained in management of concussion acting within the scope of his or her practice.
- **Mandated Graduated return-to-play protocol:** If the licensed health care provider determines that an athlete sustained a concussion or head injury, the athlete must complete a graduated return-to-play protocol *once cleared to return to physical activity.* The graduated return-to-play protocol is no less than 7 days in duration and under the supervision of a licensed health care provider.
- **Physical & Cognitive Rest:** Athletes with concussion should get both physical and cognitive rest until their symptoms have cleared both at rest and with exertion.

## Part III

### Model Concussion Protocol for the Prevention and Treatment of Sports-Related Concussion and Head Injuries



#### **Prevention**

1. Pre-Season Baseline Testing and Education
2. Concussion is Suspected
3. Post-Injury Testing and Treatment Plan
4. Is Athlete Ready for Non-Contact Activity
5. Determining Safe Return-to-Play
  - Athletes who are exhibiting the signs or symptoms of a sports-related concussion or other head injury during practice or competition shall be removed from play and may not return to play that day.

**Part IV**  
**Implementation of Sports-Related Concussion and Head Injury Policy**

The affiliate member clubs are required to monitor the above by ensuring the coaches complete the Head Injury Training program such as the National Federation of State High Schools Association online, "Concussion in Sports" or a comparable program which meets the mandated criteria and includes but is not limited to:

1. The recognition of the symptoms of head and neck injuries, concussions, and injuries related to second-impact syndrome.
  2. Includes the appropriate criteria to delay the return to sports practice or competition of an athlete who has sustained a concussion or other head injury.
- \*Additional head injury training programs that meet the mandated criteria may be completed by professionals of different levels of medical knowledge and training. Guidance for these additional training programs will be provided to each affiliate.
1. The affiliate clubs coaches shall distribute the educational fact sheet annually to the parents or guardians of student-athletes and shall obtain a signed acknowledgement of the receipt of the fact sheet by the athlete and his parent or guardian.
  2. Each affiliate member club shall develop a written policy concerning the prevention and treatment of sports-related concussions and other head injuries among athletes. The policy shall include, but need not be limited to, the procedure followed when it is suspected that athlete has sustained a concussion or other head injury. Each affiliate member shall implement the policy by the 2015-2016 seasonal year.
  3. Each athlete participating in a sports program that are suspected of sustaining a concussion or other head injury in practice or competition shall be immediately removed from the sports competition or practice. Athletes who are removed from competition or practice shall not participate in further sports activity until they are evaluated by a physician or other licensed healthcare provider trained in the evaluation and management of concussions, and receive written clearance from a physician trained in the evaluation and management of concussions to return to competition or practice.

**Part V**  
**Resources on Sports Related Concussions and Head Injuries**

Internet Resources

Centers for Disease Control and Prevention – Concussion Toolkit

[http://www.cdc.gov/concussion/HeadsUp/physicians\\_tool\\_kit.html](http://www.cdc.gov/concussion/HeadsUp/physicians_tool_kit.html)

<http://www.cdc.gov/concussion/headsup/pdf/ACE-a.pdf>

[http://www.cdc.gov/concussion/headsup/pdf/ACE\\_care\\_plan\\_school\\_version\\_a.pdf](http://www.cdc.gov/concussion/headsup/pdf/ACE_care_plan_school_version_a.pdf)

[http://www.cdc.gov/concussion/headsup/pdf/Concussion\\_in\\_Sports\\_palm\\_card-a.pdf](http://www.cdc.gov/concussion/headsup/pdf/Concussion_in_Sports_palm_card-a.pdf)

National Federation of State High Schools Association- Online "Concussion in Sports" training program.

[www.nfhs.org](http://www.nfhs.org)

[www.sportsconcussion.com](http://www.sportsconcussion.com)

National Collegiate Athletic Association

[www.NCAA.org/health-safety](http://www.NCAA.org/health-safety)

Articles

"Consensus Statement on Concussion in Sport: 3<sup>rd</sup> International Conference on Concussion in Sport held in Zurich, November 2008". Clinical Journal of Sports Medicine, Volume 19, May 2009, pp.185-200

Clinical Report:

# Concussion Procedure and Protocol For US Youth Soccer Events

## Appendix A

**Concussion:** a Traumatic Brain Injury (TBI) that interferes with normal brain function. Medically, a concussion is a complex, pathophysiological event to the brain that is induced by trauma which may or may not involve a loss of consciousness (LOC). Concussion results in a constellation of physical, cognitive, emotional, and sleep-related symptoms. Signs or symptoms may last from several minutes to days, weeks, months or even longer in some cases. *Most concussion cases do not include loss of consciousness.*

### CONCUSSION SIGNS, SYMPTOMS, AND MANAGEMENT AT TRAINING AND COMPETITIONS

#### Step 1:

Possible signs of a concussion:

(Could Be observed by Coaches, Licensed Athletic Trainer, Physician)

- 1) Appears dazed, stunned, or disoriented
- 2) forgets play, or demonstrates short term memory difficulty
- 3) Exhibits difficulties with balance or coordination
- 4) Answers questions slowly or inaccurately
- 5) Loses consciousness

Possible Symptoms of Concussion

(Reported by the athlete to coaches, Licensed Athletic Trainer, Physician, Parent/Guardian)

- 1) Headache
- 2) Nausea/Vomiting
- 3) Balance Problems or dizziness
- 4) Double Vision or Changes in Vision
- 5) Sensitivity to light or sound/noise
- 6) Feeling sluggish or foggy
- 7) Difficulty with concentration and short term memory
- 8) Sleep disturbance
- 9) *Increased irritability, sadness, anxiety or nervousness*

#### Step 2:

Is emergency treatment needed?

This would include the following scenarios:

- (1) Spine or neck injury or pain.
- (2) Behavior patterns change, unable to recognize people/places, less responsive than usual.
- (3) Loss of consciousness.
- (4) Headaches that worsen
- (5) Seizures
- (6) Very drowsy, can't be awakened
- (7) Repeated vomiting
- (8) Increasing confusion or irritability
- (9) Weakness, numbness in arms and legs

### **Step 3:**

If a possible concussion occurred, but no emergency treatment is needed, what should be done?

Focus on these areas every 5-10 min for the next 1 - 2 hours, without returning to any activities:

- (1) Balance, movement.
- (2) Speech.
- (3) Memory, instructions, and responses.
- (4) Attention on topics, details, confusion, ability to concentrate.
- (5) State of consciousness
- (6) Mood, behavior, and personality
- (7) Headache or “pressure” in head
- (8) Nausea or vomiting
- (9) Sensitivity to light and noise

Players shall not re-enter competition, training, or partake in any activities for at least 24 hours. Even if there are no signs or symptoms after 15-20 min, activity should not be taken by the player.

### **Step 4:**

A player diagnosed with a possible concussion may return to US Youth Soccer play ONLY after release from a medical doctor (MD) or doctor of osteopathy (DO) specializing in concussion treatment and management.

### **Step 5:**

If there is a possibility of a concussion, do the following:

- (1) The attached Concussion Notification Form (Appendix B) is to be filled out in duplicate and signed by a team official of the player’s team.
- (2) If the player is able to do so, have the player sign and date the Form. If the player is not able to sign, note on the player’s signature line “unavailable”.
- (3) If a parent/legal guardian of the player is present, have the parent/legal guardian sign and date the Form, and give the parent/legal guardian one of the copies of the completed Form. If the parent/legal guardian is not present, then the team official is responsible for notifying the parent/legal guardian ASAP by phone or email and then submitting the Form to the parent/legal guardian by email or mail. When the parent/legal guardian is not present, the team official must make a record of how and when the parent/legal guardian was notified. The notification will include a request for the parent/legal guardian to provide confirmation and completion of the Concussion Notification Form whether in writing or electronically.
- (4) The team official must also get the player’s pass from the referee, and attach it to the copy of the Form retained by the team.

#### References:

Kissick MD, James and Karen M. Johnston MD, PhD. “Return to Play After Concussion.” Collegiate Sports Medical Foundation. Volume 15, Number 6, November 2005.

[http://www.csmfoundation.org/Kissick - return to play after concussion - CJSM 2005.pdf](http://www.csmfoundation.org/Kissick%20-%20return%20to%20play%20after%20concussion%20-%20CJSM%202005.pdf).  
April 22, 2011.

National Federation of State High School Associations. "Suggested Guidelines for Management of Concussion in Sports". 2008 NFHS Sports Medicine Handbook (Third Edition). 2008 77-82.  
<http://www.nfhs.org>. April 21, 2011.

National Athletic Training Association ([www.nata.org](http://www.nata.org)).

Possible Concussion or TBI Notification Form
For Cal South Soccer Events

Dear Parent/Guardian,

Today, \_\_\_\_\_, 2\_\_\_\_, at the \_\_\_\_\_ [insert name of event], \_\_\_\_\_ [insert player's name] received a possible concussion during practice or competition. \_\_\_\_\_ want to make you aware of this possibility and signs and symptoms that may arise which may require further evaluation and/or treatment.

It is common for a concussed child or young adult to have one or many concussion symptoms. There are four types of symptoms: physical, cognitive, emotional, and sleep.

If your daughter or son starts to show signs of these symptoms, or there any other symptoms you notice about the behavior or conduct of your son or daughter, you should consider seeking immediate medical attention:

- Memory difficulties
- Neck pain
- Delicate to light or noise
- Headaches that worsen
- Odd behavior
- Repeats the same answer or question
- Vomiting
- Fatigued
- Slow reactions
- Focus issues
- Irregular sleep
- Irritability
- Seizures
- Patterns
- Less responsive than usual
- Weakness/numbness in arms/legs
- Slurred speech

Please take the necessary precautions and seek a professional medical opinion before allowing your daughter or son to participate further. Until a professional medical opinion is provided, please consider the following guidelines:

- refraining from participation in any activities the day of, and the day after, the occurrence.
• refraining from taking any medicine unless (1) current medicine, prescribed or authorized, is permitted to be continued to be taken, and (2) any other medicine is prescribed by a licensed health care professional.
• refraining from cognitive activities requiring concentration cognitive activities such as TV, video games, computer work, and text messaging if they are causing symptoms.

If you are unclear and have questions about the above symptoms, please contact a medical doctor or doctor of osteopathy who specializes in concussion treatment and management. Please be advised that a player who suffers a concussion may not return to play until there is provided a signed clearance from a medical doctor or doctor of osteopathy who specializes in concussion treatment and management.

Player's Team: \_\_\_\_\_
Age Group: \_\_\_\_\_
Player Name: \_\_\_\_\_ Gender: \_\_\_\_\_
Player Signature: \_\_\_\_\_ Date: \_\_\_\_\_
Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_
Team Official Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*By inserting my name and date and returning this Notification Form, I confirm that I have been provided with, and acknowledge that, I have read the information contained in the Form. If returning the signed Form by mail, send it to the following address:*

**1029 s. Placentia Ave. Fullerton, CA.**

*If returning this Form by email, send it to the following address:* **concussion@calsouth.com**  
*Coach/ affiliate/club registrar/President Notification:    Yes        No    If yes, method and recipient: \_\_\_\_\_*

References:

- Kissick MD, James and Karen M. Johnston MD, PhD. “Return to Play After Concussion.” Collegiate Sports Medical Foundation. Volume 15, Number 6, November 2005.  
[http://www.csmfoundation.org/Kissick\\_-\\_return\\_to\\_play\\_after\\_concussion\\_-\\_CJSM\\_2005.pdf](http://www.csmfoundation.org/Kissick_-_return_to_play_after_concussion_-_CJSM_2005.pdf).  
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- National Federation of State High School Associations. “Suggested Guidelines for Management of Concussion in Sports”. 2008 NFHS Sports Medicine Handbook (Third Edition). 2008 77-82.  
<http://www.nfhs.org>.  
April 21, 2011.
- Children's National Medical Center. “Safe Concussion Outcome, Recovery & Education (SCORE) Program.” Adapted by Gerard Gioia, PhD; Micky Collins, PhD; Shireen Atabaki, MD, MPH; Noel Zuckerbraun, MD, MPH. [http:// www.childrensnational.org/score](http://www.childrensnational.org/score).  
June 27, 2011.