

Action Plan: Handling a Suspected Concussion of a Student-Athlete

If a student is suspected to have suffered a concussion, coaches are directed to:

1. Remove student from participation or do not allow return to play.
2. Evaluate for signs and symptoms, documenting on the “**Head Injury Home Care & Education for Parent/Guardian**” form. This is to be given to parent when handing student over to their care.
 - Utilize pre-downloaded Concussion recognition smartphone app.
3. Seek out assistance from the Athletic Trainer (AT) whenever possible, home or away.
4. Monitor for change or worsening of signs and symptoms every 20 minutes until handing over to parent or guardian. *Assign another coach, as needed.*

Call 9-1-1 in event of the presence of the following Danger Signs:

- ✓ Loss of consciousness
 - ✓ Unequal pupils
 - ✓ Worsening headache
 - ✓ Neck pain or suspected spinal injury
 - ✓ Repeated vomiting or severe nausea
 - ✓ Slurred speech
 - ✓ Convulsions or seizures
 - ✓ Numbness or tingling in arms or legs
 - ✓ Increasing confusion, restlessness, or agitation
 - ✓ Excessive drowsiness
 - ✓ Weakness or decreased coordination
 - ✓ Unusual behavior change
5. Access Athlete’s Emergency Form for parent contact information and notify of situation. Ask parent to come for athlete if situation is stable. The student is NOT to drive or go home alone.
 6. Review information on **Head Injury** Handout with parent. Parent is to contact the child’s pediatrician’s office to report the incident, get advice, and to schedule an appointment. The AT is to screen student-athlete in the Training Room the student’s first day back, as available after school.
 7. Notify Athletic Director (AD) and Athletic Trainer within 2-hours via text or email. **Call Laura Jaeger, AD (503-969-5942) immediately if student is being transported by EMS.**
 8. Document incident using [Archdiocese of Portland Student Accident Report Form](#) and submit to Athletic Director within 48-hours, or by following Monday. *Forms available on Coaches Resource Page.*

First 24-48 Hours

- **Parent/guardian** is to monitor student closely for first 24-48 hours and note change in signs and symptoms.
 - Communicate the student’s symptom status with the physician, the attendance office, the counselor, and the Athletic Trainer, as applicable.
- **Paperwork** from physician’s visit shall be provided to the counselor or to the AT. The student’s counselor will notify teachers of student’s status and any accommodations needed.
- *The treating physician likely will have the student return for a follow-up appointment to verify recovery and to sign a release to resume sports participation beyond basic light aerobic activity (“Step 2”).*

Recovery Period

The school-based Concussion Management Team (CMT) is comprised of the Athletic Trainer, the four personal counselors, the support services coordinator, the Athletic Director, the assistant principal, and the principal. The role of the CMT is to provide support to the recovering student through ongoing communication with the student, his or her parents, teachers, and the treating physician. The student's counselor will serve as school-hours point of contact, checking in daily or weekly to monitor changes in symptoms as a result of being back at school.

The student's return to the classroom may be staged, including modifications (e.g., half-days or no testing). We refer to this as the Return to Academics Progression. Once the student has returned to school full-time and no longer needs modifications, the student-athlete will need to secure medical clearance to resume sports participation. The student is not to attend after-school activities until attending school full-time, including watching film, standing on the sidelines for practice or games.

The AT will arrange for the student to be re-tested using the ImpACT™ test once symptoms have subsided, case by case. The report will be communicated with parents and the physician. The AT will oversee the stepwise Return to Participation Progression (RTP), which may take several days for the athlete to reach unrestricted participation status. **During this timeframe, the AT will communicate to the coach the athlete's level of participation.**

Once the student-athlete has returned to school full-time and no longer requires modifications or medications, and has secured written medical clearance by an approved medical provider, *sports participation may resume using the following guidelines:

Graduated, Step-wise Return-to-Participation Progression*

1. No activity: Complete rest, both physical and cognitive. This may include staying home from school or limiting school hours and/or homework as activities requiring concentration and attention may worsen symptoms and delay recovery.
2. Light aerobic exercise: Walking, jogging, or riding stationary bike at low intensity for 10-15 minutes. No weight lifting or resistance training.
 - Performed under parent oversight, not at school.
3. ***Sport-specific exercise:** Low risk activities for 20-30 minutes: sprinting, dribbling basketball or soccer ball; no helmet or equipment, low risk/no head impact activities.
 - Considered first day back to organized practice setting.
4. Non-contact training: Progression to more complex training drills in full equipment, as applicable. Run and jump as tolerated. Weight training may resume.
5. Full contact practice: Participate in normal training activities.
6. Unrestricted Return-to-Participation/full competition.

The student should spend a minimum of one day at each step. If symptoms re-occur, the student must stop the activity and contact the athletic trainer or the treating health care professional. Depending upon the specific type and severity of the symptoms, the student may be told to rest for 24 hours and then resume activity one step below where he or she was when the symptoms occurred. **Graduated return applies to all activities including sports and PE classes. The student-athlete's clearance for full participation shall be a medical decision.**

****Sport-specific Protocols available for Boys' Lacrosse, Girls' Lacrosse, Baseball/Softball, Basketball, Cheerleading, Gymnastics, and Football.***