

Concussion Policy

What is a concussion?

The Center for Disease Control and Prevention (CDC) found the likelihood of an athlete in a contact sport experiencing a concussion may be as high as 19% per season. So what exactly is a concussion? A concussion may not necessarily involve a direct blow to the head or a loss of consciousness. A concussion is considered a traumatic brain injury that may result in a bad headache, altered levels of alertness, or unconsciousness. It temporarily interferes with the way your brain works, and can affect memory, judgment, reflexes, speech, balance, coordination, and sleep patterns.

Symptoms include:

- Headache
- Confusion
- Disorientation
- Vomiting
- Difficulty Awakening

Proposed processes to get healthy and back playing if a concussion has been sustained by an athlete (None of these to be performed by UME Prep Academy)

- <u>Baseline Assessment</u>: Use of IMPACT Testing, a nationally recognized, research-based computer test that establishes a baseline of an athlete's responses.
- <u>Medical Evaluation</u>: Off-field evaluation including a formal neurological and neuropsychological evaluation.
- · After Diagnosis: Treatment options include:
 - Concussion Evaluation and the Six step Return to Play Protocol
 - Neuropsychological Evaluation
 - Follow-up Until Recovery

Injury Prevention: Traumatic Brain Injury

Here are some steps we will take to help prevent concussions and ensure the best outcome for our athletes.

Action Plan

- 1. Pass out concussion fact sheets for athletes and parents at the beginning of the season and again if a concussion occurs.
- 2. Explain concerns about concussion, potential long-term consequences of concussion and our expectations of safe play.
- 3. Ask if an athlete has ever had a concussion and insist that your athletes are medically evaluated and are in good condition to participate.
- 4. Teach and practice safe playing techniques.
- 5. Teach athletes to follow the rules of play and to practice good sportsmanship at all times.
- 6. Teach athletes it's not smart to play with a concussion.
- 7. Teach athletes to strengthen their neck muscles (see below for some examples)
- 8. Teach athletes to tell coaching staff right away if they suspect they have a concussion or that a teammate has a concussion.

An athlete should be kept out of play the day of the injury and until a health care professional, experienced in evaluating for concussion, says they are symptom-free and it's OK to return to play. Parents and athletes should sign the concussion policy statement at the beginning of each sports season.

Rest is crucial after a concussion. Sometimes athletes, parents, and school staff wrongly believe that it shows strength and courage to play injured. UME Prep staff will not pressure injured athletes to play nor will we be simply convinced players are "just fine."

Health care professionals (including school nurses) will monitor any changes in the athlete's behavior that could indicate that they have a concussion. Ask athletes or parents to report concussions that occurred during any sport or recreation activity. This will help in monitoring injured athletes who participate in sports outside of the Academy throughout the year.

Exercises athletes can utilize to help prevent concussion:

- Shrugs: A common resistance exercise which can be performed either with a barbell or dumbbells. The easiest way may be for the athlete to hold a dumbbell of appropriate weight in each hand, with the arms extended at the side, and then raise their shoulders, lifting the weight of the dumbbell, and then slowly relaxing to the starting position.
- 2. Lateral resistance: An athlete places their right hand on the right side of their head. The muscles of the neck are flexed so that the right ear attempts to move downward towards the right shoulder, but because the athlete is resisting that action, the head doesn't actually move. The athlete should hold this position in active resistance for about 5 to 10 seconds. The exercise can then be performed on the left side of the head, front of the head, and back of the head.
- 3. **Rotational resistance:** An athlete places their hand against the side of the forehead and then attempts to rotate the head towards the right or the left while nodding "no." This motion is resisted by the hand so there is no actual movement of the head. Again, the athlete should hold the position in active resistance for about 5 to 10 second and then repeat in the opposite direction.