



CONCUSSION AWARENESS

EDUCATIONAL MATERIAL ACKNOWLEDGEMENT

By my name and signature below, I acknowledge in accordance with Public Acts 342 and 343 of 2012 that I have received and reviewed the Concussion Fact Sheet for Parents and Students provided by

School/Parish

Student Name Printed

Parent or Guardian Name Printed

Student Name Signature

Parent or Guardian Signature

Date

Date

Return this signed form to the School/Parish. The School/Parish must keep this on file for the duration of enrollment/participation and until age 25.

Students and parents should review and keep the educational materials available for future reference.



Catholic Schools
Teaching Minds. Reaching Hearts.



TO: Principals
FROM: Vic Michaels, Director
DATE: May 1, 2013
SUBJECT: Action under Public Acts 342 and 343 of 2012 (Concussion Law)

The above laws become effective June 30, 2013 and require schools and youth sports organizations to educate, train and collect forms for **non MHSAA** activities including physical education classes, intramural and out-of-season camps or clinics. You may wish to share this information with youth sports groups in your community, including all CYO programs.

It should be understood that for MHSAA sports the existing rules meeting completion requirement and concussion removal and return to play protocols, first begun in 2010, remain in effect. This includes that each school shall designate the person who shall evaluate suspected concussions. If a student is withheld from athletic activities due to a suspected concussion, he or she may not return at all on that day and only on a subsequent day with the written clearance of **an MD or DO**. This is more stringent than the new law and must be followed for MHSAA competition and practices. Not adhering to this protocol results in ineligibility of the student and forfeiture of contests.

Compliance with other aspects of the new concussion law is accomplished through a website of the Michigan Department of Community Health (MDCH) michigan.gov/sportsconcussion.

Below is a brief summary of what the new law requires youth sports organizations and schools do for **non-MHSAA sport activities** such as physical education, intramurals and out-of-season or summer camps and clinics:

1. Adult coaches (paid or volunteer) and teachers of Physical Education class, must complete the established free online training course. There are two options on the MDCH website, one through the Center for Disease Control - CDC and one through the National Federation of State High School Associations (NFHS.org). These courses are the only options to fulfill the adult training requirement. Schools should collect and file the certificate of completion for each adult.
2. Schools/Parishes must provide educational training materials to students and parents and collect and maintain their signed statement of receipt of that information for the duration of the student's involvement and until age 25, whichever is later. The chsl.com web site has "Information for Parents & Students." The website also links to an "Acknowledgement Form". This form can be used as the signed statement or schools/parishes may create their own form provided the content is similar or more stringent. Schools should include concussion information and signed statements with school registration and handbook materials; at first for all students and in subsequent years for new students.
3. Schools/Parishes must follow the same concussion protocols for **non-MHSAA** events as is currently done for MHSAA sports when a student is suspected of a concussion. Sit them out, find out and do not allow them to return to athletic activities, P. E. class, practice or competition until cleared in writing. The new law requires schools to maintain a copy of any written clearance until the student is 25 years of age.

Some common symptoms

UNDERSTANDING Information for parents and students (Content meets MDCH requirements)

CONCUSSION

- Headache
- Pressure in the head
- Nausea/vomiting
- Dizziness
- Balance problems
- Double vision
- Blurry vision
- Sensitivity to light
- Sensitivity to noise
- Sluggishness
- Hazy
- Foggy
- Grogginess
- Poor concentration
- Memory problems
- Confusion
- "Feeling down"
- Not "feeling right"
- Feeling irritable
- Slow reaction time
- Sleep problems
- Appears dazed and stunned
- Disoriented or confused
- Forgets an instruction

What is a concussion?

A concussion is a type of traumatic brain injury that changes the way the brain normally works. A concussion is caused by a bump, blow, or jolt to the head or body that causes the head and brain to move quickly back and forth. It can also be caused by the shaking or spinning of the head or body. Even a "ding," "getting your bell rung," or what seems to be a mild bump or blow to the head can be serious.

You can't see a concussion. Signs and symptoms of concussions can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If the student reports any symptoms of a concussion, or if you notice symptoms yourself, seek medical attention right away.

If you suspect a concussion

1. SEEK MEDICAL ATTENTION RIGHT AWAY A health care professional will be able to decide how serious the concussion is and when it is safe for the student to return to regular activities, including sports.

2. KEEP YOUR STUDENT OUT OF PLAY

Concussions take time to heal. Don't let the student return to play the day of the injury and until a health care professional says it's OK. Students who return to play too soon-while the brain is still healing-risk a greater chance of having a second concussion. Repeat or second concussions can be very serious. They can cause permanent brain damage, affecting the student for a lifetime.

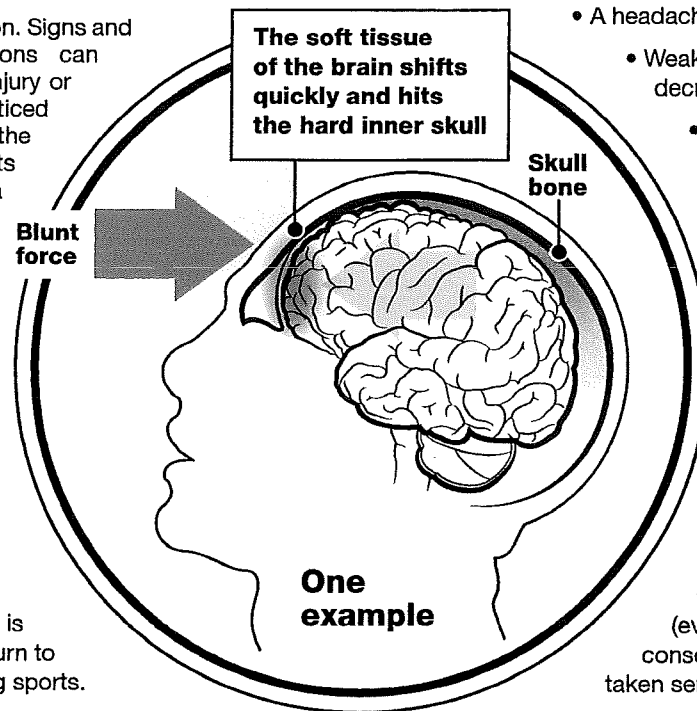
3. TELL THE SCHOOL ABOUT ANY PREVIOUS CONCUSSION

Schools should know if a student had a previous concussion. A student's school may not know about a concussion received in another sport or activity unless you notify them.

Concussion danger signs

In rare cases, a dangerous blood clot may form on the brain in a person with a concussion and crowd the brain against the skull. A student should receive immediate medical attention if after a bump, blow, or jolt to the head or body s/he exhibits any of the following danger signs:

- One pupil larger than the other
- Is drowsy or cannot be awakened
- A headache that gets worse
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Cannot recognize people or places
- Becomes increasingly confused, restless, or agitated
- Has unusual behavior
- Loses consciousness (even a brief loss of consciousness should be taken seriously)



How to respond to a report of a concussion

If a student reports one or more symptoms of a concussion after a bump, blow, or jolt to the head or body, s/he should be kept out of athletic play the day of the injury. The student should only return to play with permission from a health care professional experienced in evaluating for concussion.

During recovery, exercising or activities that involve a lot of concentration (such as studying, working on the computer, or playing video games) may cause concussion symptoms to reappear or get worse.

Sources: Michigan Department of Community Health and the National Operating Committee on Standards for Athletic Equipment (NOCSAE)

!!! WHEN IN DOUBT...SIT OUT !!!



**MHSAA PROTOCOL FOR IMPLEMENTATION OF NATIONAL
FEDERATION SPORTS PLAYING RULES FOR CONCUSSIONS**

“Any athlete who exhibits signs, symptoms, or behaviors consistent with a concussion (such as loss of consciousness, headache, dizziness, confusion, or balance problems) shall be immediately removed from the contest and shall not return to play until cleared by an appropriate health care professional.”

The language above, which will appear in all National Federation sports rule books for the 2010-11 school year, reflects a strengthening of rules regarding the safety of athletes suspected of having a concussion. For 2009-10, some sports rules required officials to remove from play any athlete who was “unconscious or apparently unconscious.” This new language reflects an increasing focus on safety, given that the vast majority of concussions do not involve a loss of consciousness.

This protocol is intended to provide the mechanics to follow during the course of contests when an athlete sustains an apparent concussion.

- 1) The officials will have no role in determining concussion other than the obvious one where a player is either unconscious or apparently unconscious as is provided for under the current rule. Officials will merely point out to a coach that a player is apparently injured and advise that the player should be examined by a health care provider for an exact determination of the extent of injury.
- 2) If it is confirmed by the school’s designated health care professional that the student did not sustain a concussion, the head coach may so advise the officials during an appropriate stoppage of play and the athlete may reenter competition pursuant to the contest rules.
- 3) Otherwise, if competition continues while the athlete is withheld for an apparent concussion, that athlete may not be returned to competition that day but is subject to the return to play protocol.
 - a) Only an MD or DO may clear the individual to return to competition.
 - b) The clearance must be in writing.
 - c) The clearance may not be on the same date on which the athlete was removed from play.
- 4) Following the contest, an Officials Report shall be filed with a removed player’s school and the MHSAA.
- 5) In cases where an assigned MHSAA tournament physician (MD/DO) is present, his or her decision to not allow an athlete to return to competition may not be overruled.

(OVER)



**SANCTIONS FOR NON-COMPLIANCE WITH
CONCUSSION MANAGEMENT POLICY**

Following are the consequences for not complying with National Federation and MHSAA rules when players are removed from play for exhibiting concussion-like symptoms and are not cleared by the school's designated medical authority to return to that contest:

If a student is returned to competition in a subsequent meet or contest (on the same day* or a subsequent day) without the written authorization of an MD or DO –

That student is considered an ineligible player and any meet or contest in which that student has participated without the proper authorization is forfeited.

In addition, that program is placed on probation through that sport season of the following school year.

For a second offense in that sport during the probationary period – that program is continued on probation through that sport season of the following school year and not permitted to participate in the MHSAA tournament in that sport during the original and extended probationary period.

* Note: This means that a student who is removed from the first game of a multi-game day (e.g., baseball, softball, lacrosse, soccer, volleyball) may not under any circumstances return to a subsequent game that day.

REVISION OF SAMPLE FORM



RETURN TO COMPETITION

This form is to be used after an athlete is removed from and not returned to competition after exhibiting concussion symptoms. MHSAA rules require written authorization from a physician (MD/DO) before an athlete may return to play after exhibiting concussion symptoms that caused that athlete to be removed for the duration of a contest.

In cases where an assigned MHSAA Tournament physician (MD/DO) is present, his or her decision to not allow a student to return to competition may not be overruled.

Athlete: _____ School: _____

Event/Sport: _____ Date of Injury: _____

REASON FOR ATHLETE'S INCAPACITY

PHYSICIAN'S ACTION

I have examined the named student-athlete following this episode and determined the following:

Permission is granted for the athlete to return to competition (may **not** return to practice or competition on the same day as the injury).

COMMENT: _____

_____ **DATE** _____

PHYSICIAN'S SIGNATURE (MUST BE MD OR DO)

PHYSICIAN'S NAME (Printed): _____

**Copies to: Team Coach, Athletic Director, MHSAA
Duplicate as Needed**