

CONCUSSION MANAGEMENT

1. Statement of Purpose

The Board of Education recognizes that concussions and head injuries are the most commonly reported injuries in children and adolescents who participate in physical education and recreational activities. Concussions can impact a student's academic success as well as athletic pursuits. The Board adopts this policy to support the proper evaluation and management of concussion injuries in order to support student success.

2. Definition

A concussion is a mild traumatic brain injury (MTBI). A concussion occurs when normal brain functioning is disrupted by a blow or jolt to any portion of the head or body that causes the head and brain to move rapidly back and forth. Recovery from concussion and its symptoms will vary. Avoiding re-injury and over-exertion until fully recovered are the cornerstones of proper concussion management.

3. Staff Training

Questar III physical education teachers and school nurses will complete a course of instruction every two (2) years relating to recognizing the symptoms of concussions or MTBIs and monitoring and seeking proper medical attention for students who suffer from concussion or MTBI.

The course can be completed by any means of instruction as approved by the New York State Education Department including but not limited to courses provided online or by teleconference. Training shall include:

- The definition of MTBI;
- Signs and symptoms of MTBI;
- How MTBIs may occur;
- Practices regarding prevention; and
- Guidelines for the return to school and school activities for a student who has suffered a MTBI, even if the injury occurred outside of school.

4. Identifying Concussion and Removal from Physical Activities

Any student who has sustained, or is suspected of having sustained, a MTBI or concussion shall be removed from organized physical activities during school including but not limited to OT/PT, physical education class, and recess. A student

demonstrating signs, symptoms or behaviors consistent with a concussion while participating in a class or extracurricular activity shall be removed from the class, game, or activity and must be evaluated as soon as possible by a building nurse or other appropriate health care professional.

Students may exhibit concussion symptoms caused by injuries sustained outside of school. Removal from physical activities at school must occur based on display of symptoms or reported symptoms regardless of whether such injury occurred inside or outside of school. If there is doubt as to whether the student has sustained a concussion, it shall be presumed until proven otherwise.

The District Superintendent or his/her designee shall establish protocols for evaluating students who are suspected of having sustained a MTBI or concussion and notifying the student's parents/guardians, emergency providers where appropriate, and the student's home school district's nurse.

5. Return to School Physical Activities

A student shall not return to organized physical activity until he/she has been symptom-free for not less than twenty-four (24) hours and has been evaluated by and received written authorization from a licensed physician. The standards for return to physical activity will also apply to concussion sustained outside of school. In accordance with the Commissioner's regulations, all such authorizations shall be kept on file in the student's permanent health record.

Questar III staff will follow any directives issued by the student's treating physician regarding return to physical activities, with or without limitations or restrictions.

Questar III reserves the ability to direct re-evaluation of the student by the Questar III physician for return to activities upon recommendation of the school nurse.

6. Periodic Review and Regulations

This policy may be reviewed periodically by Questar III staff for continued compliance with NYSED requirements. Amendments may be recommended to the Board.

The District Superintendent may adopt and update regulations to implement the policy as necessary or desirable.

ADOPTED: January 14, 2016

References:

Education Law sections 207; 305(42); 2854

8 NYCRR 135.4 and 135.5

NYSED Guidance Document, *Guidelines for Concussion Management in the School Setting* (June, 2012)

CONCUSSION MANAGEMENT REGULATIONS

1. Questar III staff may become aware that a student has suffered or may have suffered MTBI or concussion in a variety of ways:
 - Staff member observes a student injured during school;
 - Staff member observes a student exhibit signs of concussion;
 - Student reports to staff member that he/she was injured outside of school;
 - Parent/guardian reports to staff that student was injured outside of school; or
 - Student's home school district reports to Questar III staff that student was injured during activities at home school.

Questar III staff shall respond to a student's suspected or known MTBI or concussion in accordance with the Concussion Management policy and protocols in all such instances.

2. In the event a student is injured while at Questar III, a student reports injury outside of school to a staff member, or a student exhibits signs of concussion, the student shall be referred as soon as possible to the school nurse. The school nurse shall complete the "Concussion Checklist Form" during evaluation of student. Where appropriate, the parents/guardians shall be notified and the home school district nurse shall be notified. Where appropriate, emergency responders will be called.
3. Questar III staff who observe a student injured while at Questar III (whether or not there is suspicion of concussion) shall complete the Student Injury form.
4. On occasion a parent/guardian and/or home school district may report to Questar III staff that a student was injured outside of school or during activities at the home school. In such instances, Questar III will still follow the "Return to Physical Activities" protocols set forth in the Questar III Concussion Management Policy.

5. In the event a student returns to school with limitations or restrictions on physical activities, Questar III school nurse and principal will notify the student's assigned staff including but not limited to: classroom teachers and teaching assistants, OT/PT provider, physical education teachers.

CONCUSSION CHECKLIST
(To be completed by Questar III School Nurse)

Name: _____ Age: _____ Grade: _____ Gender: M F
 Date of Injury: _____ Time of Injury: _____
 Activity: _____ Building and Location: _____

On Site Evaluation

Description of Injury:

Has the student ever had a previous concussion?	Yes	No	Date: _____
Was there a loss of consciousness?	Yes	No	Unclear
Does he/she remember the injury?	Yes	No	Unclear
Does he/she have confusion after the injury?	Yes	No	Unclear

Symptoms Observed at Time of Injury **

Dizziness	Yes	No	Headache	Yes	No
Ringing in Ears	Yes	No	Nausea/Vomiting	Yes	No
Drowsy/Sleepy	Yes	No	Fatigue/Low Energy	Yes	No
“Don’t Feel Right”	Yes	No	Feeling “Dazed”	Yes	No
Seizure	Yes	No	Poor Balance/Coord.	Yes	No
Memory Problems	Yes	No	Loss of Orientation	Yes	No
Blurred Vision	Yes	No	Sensitivity to Light	Yes	No
Vacant Stare	Yes	No	Sensitivity to Noise	Yes	No
Glassey Eyed	Yes	No			

****please circle Yes or No for each symptom listed above**

Other Findings/Comments:

Action Taken: Parents Notified Home School Nurse Notified Sent to Hospital

Nurse’s Signature: _____ Title: _____

Location: _____ Date: _____ Phone: _____

Student Injury Report Form Completed By: _____ Title: _____