



### **Illiana Christian High School Concussion Management Plan**

In accordance with the IHSA and IL State Concussion Law the following Concussion Management Plan has been developed for the management of concussions at Illiana Christian High School. It is based off of the current international consensus statements and professional position statements. Illiana Christian has developed a Concussion Oversight Team to ensure the proper care and management of concussions is followed throughout the course of a concussion sustained by our student-athletes.

**CONCUSSION OVERSIGHT TEAM:** The Concussion Oversight Team at Illiana Christian High School consists of the following individuals: Melissa Vargas, Dr. Leda Ghannad, Darren DeBoer, Deb Kamp, Peter Boonstra, and AJ Turkstra. Along with the Concussion Oversight Team, the athletic trainer acts as a "point person" at the affiliate for dealing with athletic injuries. This includes the care and management of concussions. The Athletic Trainer (AT) will provide initial evaluation of the injury, and see to it that the athlete is properly managed and attended to during the extent of the injury.

**EVALUATION AND BASELINE TESTING:** Proper evaluation of a concussion entails monitoring symptoms, as well as basic sideline screenings. This includes, but is not limited to use of the Graded Symptoms Checklist and SCAT 3 tests. At the beginning of the sports season all student-athletes will take an ImPact Baseline Test. ImPact Baseline Tests are good for 2 years. Upon a sustained concussion, the student-athlete will retake a Post-Concussion ImPact Test that will help to show deficits as well as progression in the healing process of the brain.

**REFERRAL:** All concussions will be referred on to a physician for further evaluation and management. It is the AT's discretion if the athlete should be sent to the Emergency Room for closer evaluation. Signs such as abnormal pupil response, abnormal cognition, decreasing vital signs, or a sudden increase in amount and/or severity of symptoms should warrant immediate referral to the Emergency Department of a near hospital. Before seeing a physician for a sustained concussion, the athletic trainer will send all concussion paperwork and testing to the rendering physician to allow for the most up to date assessment of the injury and best Return to Learn/Play Plan for that individual student-athlete.

**RETURN TO PARTICIPATION:** Once it has been determined that an athlete has sustained a concussion, they must be removed from athletic participation immediately. The athlete should remain removed from participation until they are symptom free at rest. Upon being symptom free at rest, the student-athlete may begin a progression back to sports participation. Illiana Christian High School will be using the B.R.A.I.N.-G return to participation model.

**RETURN TO LEARN:** Once a concussion is sustained, a student-athlete may also need adaptations in the classroom as part of the healing process of the brain. These restrictions and recommendations will be provided by a licensed physician and then passed along to the Illiana Christian Administration as well as the student-athlete's teachers.

***This guideline is for information purposes only and does not constitute medical advice.***

***For more information on concussions, go to our website at [www.athletico.com/concussion](http://www.athletico.com/concussion)***

# ATHLETICO

PHYSICAL THERAPY

## CONCUSSION INFORMATION SHEET

**What is a concussion?** A concussion is defined as a complex pathophysiological process affecting the brain, induced by traumatic biomechanical forces.

### Concussion Signs and Symptoms:

- |   |  |
|---|--|
| <input type="checkbox"/> Headache               | <input type="checkbox"/> Difficulty falling asleep         |
| <input type="checkbox"/> Blurred Vision         | <input type="checkbox"/> Difficulty focusing/concentrating |
| <input type="checkbox"/> Nausea/Vomiting        | <input type="checkbox"/> Feeling like your in a "fog"      |
| <input type="checkbox"/> Loss of appetite       | <input type="checkbox"/> Ringing in the ears               |
| <input type="checkbox"/> Fatigue/Sleepiness     | <input type="checkbox"/> Sensitivity to light or noises    |
| <input type="checkbox"/> Irritability/Emotional | <input type="checkbox"/> Temporary loss of memory          |

**\* If any signs/symptoms worsen severely, take your child to the ER immediately.**

**\*\* Symptoms may linger for several days.**

### Concussion Facts:

1. Symptoms can be subtle, such as a headache or feeling sluggish.
2. Some symptoms may not surface until 24 to 48 hours after the injury.
3. Recovery from a concussion is different from person to person. Recovery time cannot and should not be pre-determined until after medical evaluation and post-concussion evaluation by a licensed medical professional.

### Concussion Myths:

1. You have to have loss of consciousness to have sustained a concussion.
  - Studies show that less than 10% of concussions result in loss of consciousness.
2. Concussions are only a result of a direct blow to the head.
  - A concussion can be sustained by a sudden, violent movement of the head caused by an unexpected external impact to the body.
3. You need to check pupils with a flash light to see if they are dilated or un-even.
  - Unequally sized pupils or pupils that do not constrict to light are rarely present in conscious patients.

### Management of a Concussion:

When a concussion is suspected, it should be brought to the attention of an athletic trainer and/or a physician for further evaluation. Further tests may be recommended by your physician to rule out any more serious head injury.

### When a concussion is suspected:

- Relative rest is the recommended course of treatment for concussed athletes. Strenuous activity should be avoided, or limited when possible.
- Limit any loud noises ( Music, TV, Band practices, or listening to an iPod)
- Limit texting, reading, video games, typing, or internet use.
- Avoid any over-the-counter medications (Advil, Motrin, Ibuprofen, Aleve) unless otherwise directed by a physician
- If studying is needed to be done for a quiz or test the next day or that week, the school nurse, athletic director, administrator and/or guidance counselor should be contacted and made aware that a concussion is suspected and postponement of any quizzes or exams may be warranted.
- Staying home from school may be recommended by your physician if concussed individual wakes up or begins to experience headaches right away.

### Return to Participation:

It is recommended that your child be cleared by a physician prior to their return to sport participation. Even after a medical release, a graduated return to play protocol must be performed with an athletic trainer, physical therapist, or other licensed healthcare professional. Athlete may feel fine at rest, but symptoms may be exacerbated with physical exertion. Other tests that may be performed include neuro-cognitive tests, balance tests, or neural activity tests.

**AT Name: Melissa Vargas, ATC      AT Contact Info: 219-902-4822      melissa.vargas@athletico.com**

*This guideline is for information purposes only and does not constitute medical advice.*

*For more information on concussions, go to our website at [www.athletico.com/concussion](http://www.athletico.com/concussion)*

# ATHLETICO

PHYSICAL THERAPY

## Return to Learn Restrictions

Patient Name: \_\_\_\_\_

Diagnosis: Concussion

- Attendance**  No School until symptoms improve  Half-day attendance as tolerated  
 Attend every other class as tolerated,  Full day attendance as tolerated  
rest in media center between classes

\*\*\*If the student develops symptoms please allow him/her to rest in the media center/office, if symptoms persist or worsen please allow the student to be dismissed home.

**Breaks**  Please allow the student to rest in the media center/office if symptoms develop.

**Visual Stimulus**  No screen time such as the use of desktops, laptops, projectors, smart boards, or tablets until symptoms improve.

Please provide pre-printed notes, in-class assignments, and homework

**Audible Stimulus**  Avoid noisy environments such as band practice or school assemblies

**Workload/Multi-tasking**  No homework  Limit homework to 15 minutes a day

Extended due dates for homework/work assignments

\*\*\*Please decrease the student's overall workload, limit material to only what is necessary to demonstrate understanding of key concepts until symptoms resolve.

**Testing**  No testing until symptoms decrease  No more than one test per day

Please allow the student to take a break during longer testing periods.

**Physical Exertion**  No physical education or athletics until symptom free and completed return to play protocol outlined in the Illiana Christian Concussion Policy.

\_\_\_ Agree with treatment plan stated above \_\_\_ Modify proposed treatment plan as described below

Physician Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Illiana Christian High School Protocol for Return to Play After a Head Injury

After an athlete has been evaluated by an athletic trainer or physician and it has been determined that the athlete has sustained a concussion, the following protocol will be used to safely progress their return to play. Under no circumstances will this protocol be accelerated.

**There should be approximately 24 hours (or longer) for each stage, and the athlete should return to previous stages if symptoms recur. Resistance training should only be added in later stages.**

Rehabilitation Stage	Functional Exercise at Each Stage of Rehabilitation	Success Goal of Each Stage
1. No activity	Complete physical and mental rest	Recovery (symptom free at rest)
2. Biking	Stationary cycling keeping intensity <70% maximum predicted heart rate (30 min. max)	Increase heart rate without symptoms
3. Running	Running while keeping intensity <70% maximum predicted heart rate (30 min. max)	Add movement without symptoms
4. Agility Exercises	Sport-specific exercises. No head-impact activities.	Add coordination and cognition without symptoms
5. Non-contact practice	Full practice without contact	Increase exercise, coordination, and cognitive load without symptoms
	May start progressive resistance training	
6. Full contact practice	Following medical clearance participate in normal training activities	Restore confidence and assess functional skills by coaching staff without symptoms
7. Return to play	Normal game play	

Protocol established from: "Consensus statement on concussion in sport – The 3rd International Conference on concussion in sport, held in Zurich, November 2008." *Journal of Clinical Neuroscience*. (2009) 16:755–763

**Return to Participation:** It is determined that an athlete is able to return to play when they are symptom free at rest and at exertion, and have returned to a baseline state of any of the tests they were administered. **An athlete will not return to participation the same day as a concussive event. When returning athletes to play, they will follow the stepwise symptom-limited program outlined above.** Once the athlete has received clearance from a physician licensed in all branches, and/or the athletic trainer, they may return to play. If an athlete receives clearance from a physician, the athletic trainer still reserves the right to hold the athlete out of participation. A parent's consent is not a sufficient means for an athlete to return to participation.

Athletes who have not been cleared to participate cannot be in uniform for any games.

This protocol is implemented to promote compliance with: IHSA Return to Play Policy, IHSA Protocol for Implementation of NFHS Sports Playing Rule for Concussions, Illinois HB 0200, and City of Chicago Ordinance – Concussion Injuries in Student Athletes in Chicago Schools (Ch. 7-22 Municipal Code of Chicago) which outline that athletes exhibiting symptoms of a concussion cannot return to play until cleared by an appropriate health care professional.

By signing this, I as a parent understand and will comply with Illiana Christian High School's Head Injury Protocol and Policy.

\_\_\_\_\_  
Athlete's Name

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

# **ATHLETICO**

## **PHYSICAL THERAPY**

Below is the B.R.A.I.N.-G. Graduated Return to Play (RTP) protocol that you must successfully accomplish before returning from a concussion. You must successfully complete this program before returning to any competitions. The first stage (B) will not start until you have been asymptomatic for 24 hours continuously, and not taking any pain medications. Each step should be separated by a minimum of 24 hours. Return to game play must be consistent and in line with school/organization protocol, respective state law, and physician's order.

		Functional Exercise at each stage of RTP	Success goal of each stage
<b>No Activity</b>		Relative physical and cognitive rest	Recovery (Symptom free at rest for 24 continuous hours)
<b>B</b>	Light Aerobic Exercise	Stationary cycling keeping heart rate <70% maximum predicted heart rate. No resistance training	Increase heart rate without the onset of symptoms.
<b>R</b>	Heavier Aerobic exercise	Running >70% maximum predicted heart rate. Still no resistance training	Increase heart rate without the onset of symptoms.
<b>A</b>	Sport specific exercise	Resistance training may commence. Agility drills. Sports specific drills. (No heading) Drills with a rotation component	Add more advanced movements without the onset of symptoms
<b>I</b>	Non-contact training drills	Progression to more complex training drills in a non-contact environment. Plyometrics, aggressive strengthening	Exercise, coordination, and cognitive load without symptoms
<b>N</b>	Full contact practice	Following medical clearance, participate in normal training and practice activities	Restore confidence and assess functional skills by coaching staff. Complete without symptoms
<b>G</b>	Return to game play	Normal Game Play	

For more information on concussion, please visit Athletico's concussion website at [www.athletico.com/concussion](http://www.athletico.com/concussion).