

# Policies and Programs on Concussions for Public Schools and Youth Sport Programs

# **Introduction**

In accordance with SB 771 and HB858 which amended sections 7-432 and 14-501 of the Annotated Code of Maryland, the Maryland State Department of Education (MSDE) has developed policies and provided recommendations for the implementation of concussion awareness programs throughout the state of Maryland for student-athletes, their parents or guardians, and their coaches. The Department has also developed recommendations on the management and treatment of student-athletes suspected or diagnosed with having sustained a concussion. These recommendations, in addition to the accompanying recommended forms, provide guidance for both the student-athlete's exclusion from play as well as their return to the classroom. Finally, the Department addresses the concussion education and tracking requirements of non-school related athletic programs and provides guidance and suggestions for those programs.

The provisions of the policies and plan call for training of every public high school coach as well as providing awareness to all student-athletes and their parents or guardians on:

- The nature and risk of a concussion or head injury
- The criteria for removal from and return-to-play
- The risk of not reporting injury
- Appropriate academic accommodations

The provisions also mandate written verification of:

- The coach receiving concussion awareness training
- The student-athlete and parent or guardian acknowledging receipt of concussion awareness information

In addition, schools shall extend appropriate procedures for academic accommodations to student-athletes who have been diagnosed with a concussion.

Finally, non-school youth athletic activities conducted on school property must provide assurances that concussion information has been provided to all participants and their parents or guardians.

This document has been formulated in conjunction with the Maryland Department of Health and Mental Hygiene, Local County Departments of Education, Maryland Public Secondary Schools Athletic Association, Maryland Athletic-Trainers' Association, Brain Injury Association of Maryland and Health Care Providers who treat concussions.

# **Definitions**

<u>Concussion</u> is a type of traumatic brain injury, or TBI, caused by a bump, blow, or jolt to the head that can change the way the brain normally works. Concussions can also occur from a blow to the body that causes the head to move rapidly back and forth. Even a "ding," or what seems to be a mild bump or blow to the head can result in a concussion.

<u>Licensed health care provider</u> means a licensed physician or physician assistant, a licensed psychologist with specialty training in neuropsychology (neuropsychologist); or a licensed nurse practitioner.

<u>Return to play</u> means participation in a non-medically supervised practice or athletic competition after a period of exclusion.

Student-athlete means a student participating in any try-out, practice or contest of a school team.

<u>School personnel</u> means those directly responsible for administrating or coaching interscholastic athletic programs within a school or county and those employees of the school or school system with overall responsibility for student-athletes' academic performance and medical well-being.

<u>Youth sports program</u> means a program organized for recreational athletic competition or instruction for participants who are under the age of 19 years.

# **Coach's Education**

The Maryland State Department of Education will alert each local school system of its responsibility to assure that each coach is trained in concussion risk and management. At a minimum, the coach's training shall include:

- The nature of the risk of a brain injury
- The risk of not reporting a brain injury
- Criteria for removal and return to play

One of the following programs is recommended to be used for coach's concussion awareness training:

The National Federation of State High School Associations' (NFHS) online coach education course, *Concussion in Sports-What You Need to Know*. This Center for Disease Control's (CDC)-endorsed program provides a guide to understanding,

recognizing and properly managing concussions in high school sports. It is available at <u>www.nfhslearn.com</u>.

The Center for Disease Control's (CDC) tools for youth and high school sports coaches, parents, athletes, and health care professionals provide important information on preventing, recognizing, and responding to a concussion, and are available at <a href="http://www.cdc.gov/concussion/HeadsUp/online\_training.html">http://www.cdc.gov/concussion/HeadsUp/online\_training.html</a>. These include *Heads Up to Schools: Know Your Concussion ABCs; Heads Up: Concussion in Youth Sports;* and *Heads UP: Concussion in High School Sports.* 

Funded by the National Institutes of Health, developed by leading researchers, and validated in a clinical trial, the Oregon Center for Applied Science (ORCAS) ACTive® course, provides an online training and certification program that gives sports coaches the tools and information to protect players from sports concussions. Information about the course is available at:

http://www.orcasinc.com/wp-content/uploads/2011/03/concussion.pdf.

If the above mentioned programs are not used, at a minimum, the concussion awareness training programs shall include the following components:

- Understanding Concussions
- Recognizing Concussions
- Signs & Symptoms
- Responses and Action Plan

#### Proof of Completion

Presentation of a certificate of completion from a coaches training course as a condition of coaching employment provides a simple and clear mechanism for local school systems to assure compliance. (Figure 1)

#### **Best Practices**

The following are a list of resources that should be at every practice or competition where a student-athlete could possibly sustain a concussion.

- On field quick reference guide kept in team medical kit or other accessible area
- A CDC clipboard or CDC clipboard sticker (<u>http://www.cdc.gov/concussion/pdf/Clipboard\_Sticker~a.pdf</u>) or a clipboard sticker containing the same information
- Copies of the "MSDE Notification of Probable Head Injury" form

# <u>Concussion Awareness for Student-Athletes, Parents or Guardians</u> <u>and School Personnel</u>

Each Maryland public school district shall develop policies that assure student-athletes, parents or guardians, and school personnel receive an informational sheet describing:

- The nature and risk of a concussion or head injury
- The criteria for removal from play and return to play
- The risks of not reporting injury and continuing to play
- Appropriate academic accommodations for diagnosed concussion victims

Informational materials used shall emanate from programs such as, but not limited to:

The Center for Disease Control's (CDC) tools for youth and high school sports coaches, parents, athletes, and health care professionals provide important information on preventing, recognizing, and responding to a concussion, and are available at <a href="http://www.cdc.gov/concussion/HeadsUp/online\_training.html">http://www.cdc.gov/concussion/HeadsUp/online\_training.html</a>. These include *Heads Up to Schools: Know Your Concussion ABCs; Heads Up: Concussion in Youth Sports;* and *Heads UP: Concussion in High School Sports.* 

The Maryland Public Secondary Schools Athletic Association (MPSSAA) has posted parent and student-athlete information sheets as well as other CDC material on its website: <a href="https://www.mpssaa.org">www.mpssaa.org</a>. (Figures 2 and 3)

#### **Best Practices**

Suggested opportunities to provide concussion information include but are not limited to:

- In-service training
- Team meetings or practice segment
- Team pre-participation documents
- Student-athlete/Parent orientation
- Coach/Parent preseason meeting
- Athletic trainer tips
- Formal/informal seminars

#### Required Acknowledgement

Every student-athlete and at least one parent or guardian must verify in writing that they have received information on concussion and sign a statement acknowledging receipt of the information. A recommended verification sheet follows. (Figure 4)

#### Removal and Return-to Play

After an appropriate medical assessment, any student-athlete suspected of sustaining a concussion shall immediately be removed from practice or play. The student-athlete shall not return until cleared by a licensed health care provider authorized to provide sports physical examinations and trained in the evaluation and management of concussions.

To assist student-athletes, parents and school personnel the following sample forms are provided on the MPSSAA website: <u>www.mpssaa.org</u>.

- Notification of possible head injury (Figure 5)
- Medical clearance for gradual return to sports participation Following concussion (Figure 6)
- Graduated return to play protocols (Figures 7, 8, 9)

Note: As of this writing, there are no formally approved or licensed certifications of concussion management. As a result, and until such time as a certification exists, each medical professional authorizing return to play must determine whether they are aware of current medical guidelines on concussions evaluation and if concussion evaluation and management fall within their own scope of practice. Any medical professional's concussion education should include at least the following:

- 2010 AAP Sport Related Concussion in Children and Adolescents http://aappolicy.aappublications.org/cgi/reprint/pediatrics;126/3/597.pdf
- 2008 Zurich Concussion in Sport Group Consensus
   <u>http://sportconcussions.com/html/Zurich%20Statement.pdf</u>

#### Youth Sports Programs use of School Property

Youth sports programs seeking to use school facilities must verify distribution of concussion information to parents or guardians and receive verifiable acknowledgement of receipt. In addition, each youth sports program will annually affirm to the local school system of their intention to comply with the concussion information procedures. Materials for use for youth sports are available on the CDC website: http:// www.cdc.gov. (Figure 10)



# Your Name

# Concussion in Sports -What You Need To Know

6/9/2010 Date of completion

Maryland State of completion

Robert B Markon

**NFHS Executive Director** 

**Completion code** 

This course cannot be used for NFHS Coach Certification



A FACT SHEET FOR ATHLETES

#### What is a concussion?

A concussion is a brain injury that:

- Is caused by a bump, blow, or jolt to the head or body.
- Can change the way your brain normally works.
- Can occur during practices or games in any sport or recreational activity.
- Can happen even if you haven't been knocked out.
- Can be serious even if you've just been "dinged" or "had your bell rung."

All concussions are serious. A concussion can affect your ability to do schoolwork and other activities (such as playing video games, working on a computer, studying, driving, or exercising). Most people with a concussion get better, but it is important to give your brain time to heal.

#### What are the symptoms of a concussion?

You can't see a concussion, but you might notice **one or more** of the symptoms listed below or that you "don't feel right" soon after, a few days after, or even weeks after the injury.

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Bothered by light or noise
- Feeling sluggish, hazy, foggy, or groggy
- Difficulty paying attention
- Memory problems
- Confusion

#### What should I do if I think I have a concussion?

- **Tell your coaches and your parents.** Never ignore a bump or blow to the head even if you feel fine. Also, tell your coach right away if you think you have a concussion or if one of your teammates might have a concussion.
- **Get a medical check-up.** A doctor or other health care professional can tell if you have a concussion and when it is OK to return to play.
- Give yourself time to get better. If you have a concussion, your brain needs time to heal. While your brain is still healing, you are much more likely to have another concussion. Repeat concussions can increase the time it takes for you to recover and may cause more damage to your brain. It is important to rest and not return to play until you get the OK from your health care professional that you are symptom-free.

#### How can I prevent a concussion?

Every sport is different, but there are steps you can take to protect yourself.

- Use the proper sports equipment, including personal protective equipment. In order for equipment to protect you, it must be:
  - The right equipment for the game, position, or activity
  - Worn correctly and the correct size and fit
  - Used every time you play or practice
- Follow your coach's rules for safety and the rules of the sport.
- Practice good sportsmanship at all times.

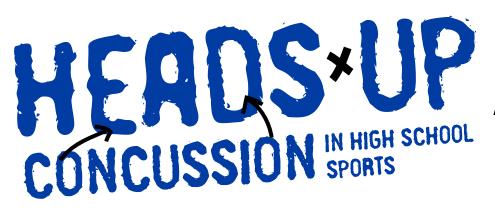
**If you think you have a concussion:** Don't hide it. Report it. Take time to recover.

# It's better to miss one game than the whole season.

For more information and to order additional materials *free-of-charge*, visit: www.cdc.gov/Concussion.



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR DISEASE CONTROL AND PREVENTION



A FACT SHEET FOR PARENTS

#### What is a concussion?

A concussion is a brain injury. Concussions are caused by a bump, blow, or jolt to 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.

#### What are the signs and symptoms?

You can't see a concussion. Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days after the injury. If your teen reports **one or more** symptoms of concussion listed below, or if you notice the symptoms yourself, keep your teen out of play and seek medical attention right away.

Signs Observed	Symptoms Reported
by Parents or Guardians	by Athlete
<ul> <li>Appears dazed or stunned</li> <li>Is confused about</li></ul>	<ul> <li>Headache or "pressure"</li></ul>
assignment or position <li>Forgets an instruction</li> <li>Is unsure of game, score,</li>	in head <li>Nausea or vomiting</li> <li>Balance problems or</li>
or opponent <li>Moves clumsily</li> <li>Answers questions slowly</li> <li>Loses consciousness</li>	dizziness <li>Double or blurry vision</li> <li>Sensitivity to light</li>
(even briefly) <li>Shows mood, behavior,</li>	or noise <li>Feeling sluggish, hazy,</li>
or personality changes <li>Can't recall events prior</li>	foggy, or groggy <li>Concentration or memory</li>
to hit or fall <li>Can't recall events after</li>	problems <li>Confusion</li> <li>Just not "feeling right"</li>
hit or fall	or is "feeling down"

#### How can you help your teen prevent a concussion?

Every sport is different, but there are steps your teens can take to protect themselves from concussion and other injuries.

• Make sure they wear the right protective equipment for their activity. It should fit properly, be well maintained, and be worn consistently and correctly.

- Ensure that they follow their coaches' rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.

# What should you do if you think your teen has a concussion?

- 1. Keep your teen out of play. If your teen has a concussion, her/his brain needs time to heal. Don't let your teen return to play the day of the injury and until a health care professional, experienced in evaluating for concussion, says your teen is symptom-free and it's OK to return to play. A repeat concussion that occurs before the brain recovers from the first—usually within a short period of time (hours, days, or weeks)—can slow recovery or increase the likelihood of having long-term problems. In rare cases, repeat concussions can result in edema (brain swelling), permanent brain damage, and even death.
- 2. Seek medical attention right away. A health care professional experienced in evaluating for concussion will be able to decide how serious the concussion is and when it is safe for your teen to return to sports.
- **3. Teach your teen that it's not smart to play with a concussion.** Rest is key after a concussion. Sometimes athletes wrongly believe that it shows strength and courage to play injured. Discourage others from pressuring injured athletes to play. Don't let your teen convince you that s/he's "just fine."
- 4. Tell all of your teen's coaches and the student's school nurse about ANY concussion. Coaches, school nurses, and other school staff should know if your teen has ever had a concussion. Your teen may need to limit activities while s/he is recovering from a concussion. Things such as studying, driving, working on a computer, playing video games, or exercising may cause concussion symptoms to reappear or get worse. Talk to your health care professional, as well as your teen's coaches, school nurse, and teachers. If needed, they can help adjust your teen's school activities during her/his recovery.

**If you think your teen has a concussion:** Don't assess it yourself. Take him/her out of play. Seek the advice of a health care professional.

# It's better to miss one game than the whole season.

For more information and to order additional materials *free-of-charge*, visit: www.cdc.gov/Concussion.



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR DISEASE CONTROL AND PREVENTION

Figure 4



For official use only: Name of Athlete\_\_\_\_\_ Sport/season\_\_\_\_\_ Date Received\_\_\_\_\_

### Concussion Awareness Parent/Student-Athlete Acknowledgement Statement

I	, the parent/guardian of	,
Parent/Guardian	· · · ·	Name of Student-Athlete

acknowledge that I have received information on all of the following:

- The definition of a concussion
- The signs and symptoms of a concussion to observe for or that may be reported by my athlete
- How to help my athlete prevent a concussion
- What to do if I think my athlete has a concussion, specifically, to seek medical attention right away, keep my athlete out of play, tell the coach about a recent concussion, and report any concussion and/or symptoms to the school nurse.

Parent/Guardian	PRINT NAME	Parent/Guardian	SIGNATURE	Date
Student Athlete	PRINT NAME	Student Athlete	SIGNATURE	_ Date

It's better to miss one game than the whole season.

For more information visit: www.cdc.gov/Concussion.



Student-Athlete
Date of injury
Sport
Parent/guardian name
Home Phone

#### **Notification of Probable Head Injury**

#### **Dear Parent:**

Based on our observations and/or incident described below, we believe your son/daughter exhibited signs and symptoms of a concussion while participating in \_\_\_\_\_\_. Since your son/ daughter has not been evaluated by a physician at school, it is important that you seek a physician's care as soon as possible.

It is important to recognize that blows to the head can cause a variety of injuries other than concussions (e.g., neck injuries, more serious brain injuries). Please be sure to see your doctor as soon as possible for any other medical concerns.

#### Description of Incident/ Injury:

When to Seek Care Urgently. If you observe any of the following signs, call your doctor or go to your emergency department immediately.

Headaches that worsen	Very drowsy, can't be awakened	Can't recognize people or places
Seizures	Repeated vomiting	Increasing confusion
Neck pain	Slurred speech	Weakness/numbness in arms/legs
Unusual behavior change	Significant irritability	Less responsive than usual

**Common Signs & Symptoms.** It is common for a student with a concussion to have one or many symptoms.

Physical		Cognitive	Emotional	Sleep
Headache	Visual Problems	Feeling mentally foggy	Irritability	Drowsiness
Nausea/Vomiting	Fatigue/ Feeling tired	Feeling slowed down	Sadness	Sleeping less than usual
Dizziness	Sensitivity to light/ noise	Difficulty remembering	More emotional	Sleeping more than usual
Balance Problems	Numbness/Tingling	Difficulty concentrating	Nervousness	Trouble falling asleep

Please feel free to contact me if you have any questions. I can be reached at:

Employee Name and Title

Date

#### TO BE COMPLETED BY THE AUTHORIZED HEALTH CARE PROVIDER:

Name: \_\_\_\_\_ Signature \_\_\_\_\_ Date: \_\_\_\_\_

Diagnosis:

Please be advised that your son/daughter will not be allowed to return to play until they have no symptoms and have been cleared in writing by an authorized health care provider (physician, neuropsychologist, nurse practitioner, physician's assistant) for this type of injury.



Student-Athl	ete
	0.0

Date of injury \_\_\_\_\_

Today's Date \_\_\_\_\_

Sport \_\_\_\_\_

## Medical Clearance for Gradual Return to Sports Participation Following Concussion

To be completed by the Licensed Health Care Provider

# The above-named student-athlete sustained a concussion. The purpose of this form is to provide <u>initial</u> <u>medical clearance</u> before starting the Gradual Return to Sports Participation.

#### Criteria for Medical Clearance for Gradual Return to Play (Check each)

The student-athlete must meet all of these criteria to receive medical clearance.

- **1.** No symptoms <u>at rest</u>/ no medication use to manage symptoms (e.g., headaches)
  - 2. No return of symptoms with typical physical and cognitive activities of daily living
  - 3. Neurocognitive functioning at typical baseline
  - 4. Normal balance and coordination
- 5. No other medical/ neurological complaints/ findings

#### Detailed Guidance

**<u>1. Symptom checklist</u>: None of these symptoms should be present. Assessment of symptoms should be broader than athlete report alone. Also consider observational reports from parents, teachers, others.</u>** 

Ph	ysical	Cognitive	Emotional	Sleep
Headaches	Sensitivity to light	Feeling mentally foggy	Irritability	Drowsiness
Nausea	Sensitivity to noise	Problems concentrating	Sadness	Sleeping more than usual
Fatigue	Numbness/ tingling	Problems remembering	Feeling more emotional	Sleeping less than usual
Visual problems	Vomiting	Feeling more slowed down	Nervousness	Trouble falling asleep
Balance Problems	Dizziness			

<u>2. Exertional Assessment (Check)</u>: The student-athlete exhibits no evidence of return of symptoms with:
 Cognitive activity: concentration on school tasks, home activities (e.g. TV, computer, pleasure reading)
 Physical activity: walking, climbing stairs, activities of daily living, endurance across the day

3. Neurocognitive Functioning (Check): The student's cognitive functioning has been determined to have returned to its typical pre-injury level by one or more of the following:

- \_\_\_ Appropriate neurocognitive testing
- \_\_\_ Reports of appropriate school performance/ home functioning (concentration, memory, speed) in the absence of symptoms listed above
- 4. Balance & Coordination Assessment (Check): Student-athlete is able to successfully perform:
- Romberg Test <u>OR</u> SCAT2 (Double leg, single leg, tandem stance, 20 secs, no deviations fr proper stance) 5 successive Finger-to-Nose repetitions < 4 sec</p>

I certify that: I am a Licensed Health Care Provider with training in concussion evaluation and management in accordance with current medical evidence (2010 AAP Sport-Related Concussion in Children and Adolescents, 2008 Zurich Concussion in Sport Group Consensus). The above-named student-athlete has met all the above criteria for medical clearance for his/her recent concussion, and as of this date is ready to return to a progressive Gradual Return to Sports Participation program (typically lasting minimum of 5 days).

Provider Name\_\_\_\_\_

Signature

Date:

Distribution:	Parent	AD	School Health Room
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#### **Graduated Return to Play Protocol**

With no symptoms, a gradual return to play program can be initiated. Follow these gradual progressive steps of the training sequence.

There should be approximately 24 hours (or longer) in between each step. If <u>any</u> symptoms return at any time during these activities, stop the work out. Rest until symptom-free for 24 hours. Return to the previous asymptomatic step. If symptoms return or worsen, seek medical attention.

Step	Date	Activity	Tolerance/Comments
1. <u>Light</u> General Conditioning Exercises (Goal: Increase HR)		Begin with sport specific warm up. Do 15-20 minute workout: stationary bicycle, fast paced walking or light jog, rowing or freestyle swimming.	
2. <u>Moderate</u> General Conditioning and Sport		Sport specific warm-up. Slowly increase intensity and duration of workout to 20-30 minutes.	
Specific Skill Work; Individually (Goal: Add Movement, individual skill work)		- Begin <b>sport specific skill work</b> within the workout. No spins, dives or jumps.	
3. <u>Heavy</u> General conditioning, skill work;		Continue with general conditioning up to 60 minutes. Increase intensity and duration. Begin interval training.	
individually and with team- mate. NO CONTACT (Goal: Add Movement, teammate skill work)		<ul> <li>Continue individual skill work.</li> <li>Begin skill work with a partner but with no contact.</li> <li>Continue with individual skill work as per Step 2.</li> <li>Begin beginner level spins, dives, jumps.</li> </ul>	
4. <u>Heavy</u> General		Resume regular conditioning and duration of practice.	
conditioning, skill work and team drills. No live scrimmages. VERY LIGHT CONTACT. (Goal: Team skill work, light static contact)		<ul> <li>Increase interval training and skill work as required.</li> <li>Gradually increase skill level of spins, dives &amp; jumps.</li> <li>Review team plays with no contact.</li> <li>Very light contact and low intensity on dummies.</li> </ul>	
5. Full Team Practice with Body Contact		<ul> <li>Participate in a full practice.</li> <li>If a full practice is completed with no symptoms, return to competition is appropriate. Discuss with the coach about getting back in the next game.</li> </ul>	

## Step 1: Light General Conditioning Exercises:

- Begin with a sport specific warm up.
- Do a (15-20 minute) workout which can include: stationary bicycle, fast paced walking or light jog, rowing or freestyle swimming.

# Step 2: General Conditioning and Sport Specific Skill Work; Individually:

- Continue with the sport specific warm-up.
- Slowly increase intensity and duration of workout (20-30 minutes).
- Begin sport specific skill work within the workout. No spins, dives, or jumps.

# STEP 3: General conditioning, skill work; individually and with a team-mate:

- NO CONTACT
- Continue with general conditioning (up to 60 minutes). Increase intensity and duration. Begin interval training.
- Continue with individual skill work.
- May begin skill work with a partner.
- May start beginner level spins, dives and jumps.

# STEP 4: General conditioning, skill work and team drills::

- Do not play live scrimmages. NO CONTACT
- Resume regular conditioning, duration of practice, and team drills.
- Increase interval training and skill work as required.
- Gradually increase skill level of spins, dives and jumps.
- Review team plays with no contact.

# Step 5: Full Team Practice with Body Contact:

• Participate in a full practice. If it is completed with no symptoms, you are ready to return to competition. Discuss with the coach about getting back in the game.

#### **Graduated Return to Football Protocol**

With no symptoms, a gradual return to play program can be initiated. Follow these gradual progressive steps of the training sequence.

There should be approximately 24 hours (or longer) in between each step. If <u>any</u> symptoms return at any time during these activities, stop the work out. Rest until symptom-free for 24 hours. Return to the previous asymptomatic step. If symptoms return or worsen, seek medical attention.

Step	Date	Activity	Tolerance/Comments
1. <u>Light</u> General Conditioning Exercises		Begin with sport specific warm up. Do 15-20 minute	
(Goal: Increase HR)		workout: stationary bicycle, fast paced walking or light jog, rowing or freestyle swimming.	
2. Moderate General		Sport specific warm-up. Slowly increase intensity and	
Conditioning and Sport		duration of workout to 20-30 minutes.	
Specific Skill Work;		- Begin skill work within the workout.	
Individually (Goal: Add Movement, individual skill		- Begin footwork drills, running drills, running patterns	
work)		with cones and dummies. - Stationary throwing and catching a football.	
		Continue with general conditioning up to 60 minutes.	
3. <u>Heavy</u> General conditioning, skill work;		Increase intensity and duration. Begin interval training.	
individually and with team-		- Begin drills with a partner but with no contact.	
mate. NO CONTACT (Goal: Add Movement,		Continue with individual skill work as per Step 2.	
teammate skill work)		- Begin dynamic throwing and catching, taking handoffs,	
,		one on one (receiver vs. defensive backs) with no	
		contact. - Begin walk-throughs on offense and defense.	
4. Heavy General		Resume regular conditioning and duration of practice.	
conditioning, skill work and		- Practice <b>passing shell drills</b> (8 or 6) with no contact.	
team drills. No live scrimmages.		- Continue with walk-throughs, skill work (patterns,	
VERY LIGHT CONTACT.		dynamic catching and throwing, handoffs). Review	
(Goal: Team skill work, light		blocking and tackling techniques, focus on skill.	
static contact) 5. Full Team Practice with		- Very light contact and low intensity on dummies.	
Body Contact		- Participate in a <b>full practice</b> . -If a full practice is completed with no symptoms, return	
		to competition is appropriate. Discuss with the coach	
		about getting back in the next game.	

#### Step 1: Light General Conditioning Exercises (Goal: Increase HR)

- Begin with a sport specific warm up.
- Do a (15-20 minute) workout which can include: stationary bicycle, fast paced walking or light jog, rowing or freestyle swimming.

### Step 2: General Conditioning and Sport Specific Skill Work; Individually:

- Continue with the sport specific warm-up.
- Slowly increase intensity and duration of workout (20-30 minutes).
- Begin skill work within the workout.
- Begin footwork drills, running drills, running patterns with cones and dummies.
- Stationary throwing and catching a football.

### STEP 3: General conditioning, skill work; individually and with a team-mate:

- NO CONTACT
- Continue with general conditioning (up to 60 minutes). Increase intensity and duration. Begin interval training.
- Begin drills with a partner but with no contact. Continue with individual skill work as per Step 2.
- Begin dynamic throwing and catching, taking handoffs, one on one (receiver vs. defensive backs) with no contact.
- Begin walk-throughs on offense and defense.

### STEP 4: General conditioning, skill work and team drills::

- Do not play live scrimmages. NO CONTACT
- Resume regular conditioning and duration of practice.
- Practice passing shell drills (8 or 6) with no contact.
- Continue with walk-throughs, skill work (patterns, dynamic catching and throwing, handoffs). Review blocking and tackling techniques, focus on skill, very light contact and low intensity on dummies.

#### Step 5: Full Team Practice with Body Contact:

• Join team in a full practice to get yourself back in the lineup. If a full practice is completed with no symptoms, you are ready to return to competition. Discuss with the coach about getting back in the next game.

#### **Graduated Return to Soccer Protocol**

With no symptoms, a gradual return to play program can be initiated. Follow these gradual progressive steps of the training sequence.

There should be approximately 24 hours (or longer) in between each step. If <u>any</u> symptoms return at any time during these activities, stop the work out. Rest until symptom-free for 24 hours. Return to the previous asymptomatic step. If symptoms return or worsen, seek medical attention.

Step	Date	Activity	Tolerance/Comments
1. <u>Light</u> General Conditioning Exercises (Goal: Increase HR)		Begin with sport specific warm up. Do 15-20 minute workout: stationary bicycle, fast paced walking or light jog, rowing or freestyle swimming.	
2. <u>Moderate</u> General Conditioning and Sport Specific Skill Work; Individually (Goal: Add Movement, individual skill work)		<ul> <li>Sport specific warm-up. Slowly increase intensity and duration of workout to 20-30 minutes.</li> <li>Begin skill work within the workout.</li> <li>Begin running drills, static and dynamic foot dribbling, use cones, individual kicking.</li> </ul>	
3. <u>Heavy</u> General conditioning, skill work; individually and with team- mate. NO CONTACT (Goal: Add Movement, teammate skill work)		<ul> <li>Continue with general conditioning up to 60 minutes.</li> <li>Increase intensity and duration. Begin interval training.</li> <li>Begin drills with a partner but with no contact.</li> <li>Continue with individual skill work as per Step 2.</li> <li>Begin partner passing and kicking on goalie drills.</li> <li>Begin walk-throughs on offense and defense.</li> </ul>	
4. <u>Heavy</u> General conditioning, skill work and team drills. No live scrimmages. VERY LIGHT CONTACT. (Goal: Team skill work, light static contact)		<ul> <li>Resume regular conditioning and duration of practice.</li> <li>Practice passing shell drills (8 or 6) with no contact.</li> <li>Practice team passing and kicking drills, practice offensive, defensive and counter attack tactical schemes with no contact to the player.</li> <li>Review heading the ball techniques. Do a few reps of low intensity with limited height and distance.</li> </ul>	
5. Full Team Practice with Body Contact		<ul> <li>Participate in a full practice.</li> <li>If a full practice is completed with no symptoms, return to competition is appropriate. Discuss with the coach about getting back in the next game.</li> </ul>	

# Step 1: Light General Conditioning Exercises:

- Begin with a sport specific warm up.
- Do a (15-20 minute) workout which can include: stationary bicycle, fast paced walking or light jog, rowing or freestyle swimming.

# Step 2: General Conditioning and Sport Specific Skill Work; Individually:

- Continue with the sport specific warm-up.
- Slowly increase intensity and duration of workout (20-30 minutes).
- Begin skill work within the workout.
- Begin running drills, static and dynamic foot dribbling, use cones, individual kicking.

# STEP 3: General conditioning, skill work; individually and with a team-mate:

- NO CONTACT
- Continue with general conditioning (up to 60 minutes). Increase intensity and duration. Begin interval training.
- Begin drills with a partner but with no contact. Continue with individual skill work as per Step 2.
- Begin partner passing and kicking on goalie drills.
- Begin walk-throughs on offense and defense.

# STEP 4: General conditioning, skill work and team drills::

- Do not play live scrimmages. NO CONTACT
- Resume regular conditioning and duration of practice.
- Practice team passing and kicking drills, practice offensive, defensive and counter attack tactical schemes with no contact to the player.
- Review heading the ball techniques. Do a few reps of low intensity with limited height and distance.

# Step 5: Full Team Practice with Body Contact:

• Join team in a full practice to get yourself back in the lineup. If a full practice is completed with no symptoms, you are ready to return to competition. Discuss with the coach about getting back in the next game.



Centers for Disease Control and Prevention CDC 24/7: Saving Lives, Protecting People, Saving Money Through Prevention.

# Heads Up: Concussion in Youth Sports

Spanish version (/concussion/HeadsUp/spanish/youth.html)

# It's Better to Miss One Game Than the Whole Season

To help ensure the health and safety of young athletes, CDC developed the *Heads Up: Concussion in Youth Sports* initiative to offer information about concussions to coaches, parents, and athletes involved in youth sports. The *Heads Up* initiative provides important information on preventing, recognizing, and responding to a concussion.



# Heads Up Tool Kit for Youth Sports

- <u>Activity Report</u> 1 [PDF 2MG] (/concussion/pdf/Heads Up Activity Report Final-a.pdf)
- See also <u>Heads Up: Concussion in High School Sports</u> <u>(/concussion/headsup/high\_school.html)</u>.

# For additional resources (videos, promotional materials, etc.) and to order free materials, <u>click here (/concussion/sports/resources.html)</u>

# **Information for Coaches**

Online Training Course for Youth Sports (/concussion/HeadsUp/online\_training.html)Fact Sheet T[PDF 206KB] (/concussion/pdf/coaches\_Engl.pdf)Clipboard T[PDF 202KB] (/concussion/pdf/clipboard\_Eng.pdf)Poster T[PDF 328KB] (/concussion/pdf/poster\_Eng.pdf)Quiz T[PDF 170KB] (/concussion/pdf/quiz\_Eng.pdf)

# **Information for Athletes**

Fact Sheet[PDF 201KB] (/concussion/pdf/athletesEng.pdf)Poster[PDF 328KB] (/concussion/pdf/posterEng.pdf)Quiz[PDF 170KB] (/concussion/pdf/quizEng.pdf)

# **Information for Parents**

Fact Sheet[PDF 250KB] (/concussion/pdf/parentsEng.pdf)Magnet[PDF 106KB] (/concussion/pdf/magnetEng.pdf)Quiz[PDF 170KB] (/concussion/pdf/quizEng.pdf)

## If you think your athlete has sustained a concussion...don't assess it yourself.

## Take him/her out of play, and seek the advice of a health care professional.