Concussion Policy
Grades 6 – 12

Purpose
This policy provides for the implementation of MA 105 CMR 201.000, Head Injuries and Concussions in Extracurricular Athletic Activities. The purpose of this policy is to provide information and standardized procedures for persons involved in the prevention, training management and return to activity decisions regarding students who incur head injuries while involved in extracurricular athletic activities including but not limited to, interscholastic sports, in order to protect their health and safety as required by Massachusetts law and regulations. The requirements of the law apply to all public middle and high schools, however configured, serving grades six through high school graduation. In addition to any training required by law, the following persons shall complete one of the head injury safety training programs approved by the Massachusetts Department of Public Health (DPH) as found on its website: coaches; certified athletic trainers; trainers; volunteers; school and team physicians; school nurses; athletic directors; directors responsible for a school marching band; employees or volunteers; and students who participate in an extracurricular activity and their parents. This policy provides the procedures and protocols for the Braintree Public Schools (BPS) in the management of and prevention of sports-related head injuries within the district or school.

Upon the adoption of this policy by the School Committee, the Superintendent shall ensure that the Department of Public Health receives and affirmation on school district letterhead that the district has developed policies and the School Committee has adopted a final policy in accordance with law. This affirmation shall be updated by September 30, 2013 and every two years thereafter upon review or revision of its policies.

Record Maintenance
The BPS Athletic Director or designee shall maintain the following record for three years or, at a minimum, until the student graduates, unless state or federal law requires a longer retention period:
- Verifications of completion of annual trainings;
- All on-line Registration/Permission/Medical Forms and Pre-participation Head Injury/Concussion reporting forms;
- Annual physical exams;

1 Extracurricular Athletic Activity means an organized school sponsored athletic activity generally occurring outside of school instructional hours under the direction of a coach, athletic director, or marching band leader including, but not limited to, Alpine and Nordic skiing and snowboarding, baseball, basketball, cheer leading, cross country track, fencing, field hockey, football, golf, gymnastics, horseback riding, ice hockey, marching band, rifle, rugby, soccer, skating, softball, squash, swimming and diving, tennis, track (indoor and outdoor), ultimate frisbee, volleyball, water polo, and wrestling. All interscholastic athletics are deemed to be extracurricular athletic activities.

LEGAL REFS: M.G.L. 111:222; 105 CMR 201.000
• Report of Head Injury During a Sports Season forms;
• Post Sports Related Head Injury Clearance and Return to Play Protocols.
• Physician Head Injury Notification and Academic Accommodations Forms

These records will be made available to the Department of Public Health and DESE upon request or in connection with any inspection or program review. This policy also applies to volunteers who assist with extracurricular athletic activities. Such volunteers shall not be liable for civil damages arising out of any act or omission relating to the requirements of law, unless such volunteer is willfully or intentionally negligent in his act or omission.

Most student athletes who sustain a concussion can fully recover as long as their brain has time to heal before sustaining another hit; however, relying only on an athlete’s self-report of symptoms to determine injury recovery is inadequate as many high school athletes are not aware of the signs and symptoms or the severity concussive injuries pose, or they may feel pressure from coaches, parents and/or teammates to return to play as quickly as possible. One or more of these factors will likely result in under diagnosing the injury and a premature return to play. Massachusetts General Laws and Department of Public Health regulations make it imperative to accurately assess and treat student athletes when concussions are suspected.

Student athletes who receive concussions may appear to be “fine” on the outside, when in actuality they have a brain injury and are not able to return to play. Incurring a second concussion can prove to be devastating to a student athlete. Research has shown that young concussed athletes who return to play before their brain has healed are highly vulnerable to more prolonged post-concussion syndrome or, in rare cases, a catastrophic neurological injury known as Second Impact Syndrome.

The following protocol will discuss and outline what a concussion is, the mechanism of injury, signs and symptoms, management and return to play requirements, as well as information on Second Impact Syndrome and past concussion syndrome. Lastly, this policy will discuss the importance of education for our athletes, coaches and parents and other persons required by law.

This protocol should be reviewed on a yearly basis with all staff to discuss the procedures to be followed to manage sports-related concussions. This protocol will also be reviewed on a yearly basis by the athletic department as well as by nursing staff. Any changes in this document will be approved by the School Committee and given to athletic staff, including coaches and other school personnel in writing. An accurate synopsis of this policy shall be placed in the student and faculty handbooks.
Athletic Concussion Regulations

Section I. What is a concussion?:
A concussion is defined as a transient alteration in brain function without structural damage, but with other potentially serious long-term ramifications. In the event of a concussion, the brain sustains damage at a microscopic level in which cells and cell membranes are torn and stretched. The damage to these cells also disrupts the brain at a chemical level, as well as causing restricted blood flow to the damaged areas of the brain, thereby disrupting brain function. A concussion, therefore, is a disruption in how the brain works; it is not a structural injury. Concussions are difficult to diagnose because the damage cannot be seen. A MRI or CT scan cannot diagnose a concussion, but they can help rule out a more serious brain injury to a student athlete. Because concussions are difficult to detect, student athletes must obtain medical approval before returning to athletics following a concussion.

Section II. Mechanism of Injury:
A concussion is caused by a bump, blow or jolt to the head or body. Any force that causes the brain to bounce around or twist within the skull can cause a concussion. A bump, blow or jolt to the head or body can be caused by either indirect or direct trauma. The two direct mechanisms of injury are coup-type and contrecoup-type. Coup-type injury is when the head is stationary and struck by a moving object such as another player’s helmet, a ball, or sport implement, causing brain injury at the location of impact. Contrecoup-type injury occurs when the head is moving and makes contact with an immovable or slowing moving object as a result of deceleration, causing brain injury away from the sign of impact. Indirect forces are transmitted through the spine and jaw or blows to the thorax that whip the head while the neck muscles are relaxed. Understanding the way in which an injury occurred is vital in understanding and having a watchful eye for athletes who may exhibit symptoms of a concussion so these student athletes can receive the appropriate care.

Section III. Signs and Symptoms:
Signs (what you can see):
- Confusion
- Forgets plays
- Unsure about game, score, opponent
- Altered coordination
- Balance problems
- Personality change
- Slow response to questions
- Forgets events prior to injury (retrograde amnesia)
- Forgets events after injury (anterograde amnesia)
- Loss of consciousness (any duration)

Symptoms (reported by athlete):
- Headache
- Fatigue
- Nausea or vomiting
- Double vision/blurry vision
- Sensitivity to light (photophobia)
• Sensitivity to noise (tinnitus)
• Feels sluggish
• Feels foggy
• Problems concentrating
• Problems remembering
• Trouble with sleeping/excel sleep
• Dizziness
• Sadness
• Seeing stars
• Vacant stare/glassy eyed
• Nervousness
• Irritability
• Inappropriate emotions

If any of the above signs or symptoms are observed after a suspected blow to the head, jaw, spine or body, they may be indicative of a concussion and the student athlete must be removed from play immediately and not allowed to return until cleared by an appropriate allied health professional.

Protocol
Section IV. Pre-participation Requirements and Training:
Concussion training is a pre-participation requirement and must be completed prior to practice or competition. The following persons annually shall complete one of the head injury safety training programs approved by Braintree Public Schools (BPS):
• Coaches;
• Assistant Coaches;
• Certified Athletic Trainer;
• School Physician;
• School Nurses;
• Guidance Counselors;
• Middle and High School classroom teachers and specialists;
• Athletic Director;
• Person responsible for a school marching band, whether employed by a school or school district or serving in such capacity as a volunteer;
• Employees or Volunteers assisting with athletics;
• Students participating in extracurricular athletic activity;
• Parents/Guardians of a student who participates in an extracurricular athletic activity.
This requirement may be met by:

- Completing an approved free online program. The on-line courses can be found at:


- Training provided by the school district

- The training must be repeated every subsequent year.

- Students and parents must complete the Pre-participation Head Injury/Concussion Reporting Form, as well as sign that they have completed one of the above on-line courses and [attach a copy of the certificate](#) and return to the Athletic Director.

- Coaches/Assistant Coaches must provide a certificate of completion of one of the on-line courses to the athletic director.

- The athletic director will maintain all certificates of annual training or training session rosters and all on-line registration forms including the Interscholastic Registration/Permission/Medical Forms and Pre-participation Head Injury/Concussion reporting forms for three years at a minimum or until the student graduates, unless state or federal law requires a longer retention period. The school nurse shall maintain all Physical Exams, Report of Head Injury forms, Medical Clearance forms and any other pertinent medical information in the individual student health record for a minimum of three years or until the student graduates unless state or federal law requires a longer retention period.

- Game officials must also complete an approved training annually and provide BPS with verification of completion upon request.

Additionally, students who plan to participate in extracurricular athletic activities, as well as their parents, must complete the on-line registration process prior to participation. Access to the on-line registration process will be distributed through the athletic department. **Annually**, students are also required to provide a physical exam to the school nurses’ office and the school nurse will report clearance to the athletic director. If the physical exam expires during a sports season, a new physical exam is required for continued participation. Additionally, no student shall be medically cleared for extracurricular athletic activities until the athletic trainer and school nurse have reviewed the Pre-participation Head Injury/Concussion Reporting Form. This form must be completed prior to participation in each sports season. Clearance will be reported to the athletic director.

Braintree Public Schools may use a student’s history of head injury or concussion as a factor to
determine whether to allow the student to participate in an extracurricular athletic activity or whether to allow such participation under specific conditions or modifications.

Additional parental requirement:
If a student sustains a head injury or concussion during the season, but not while participating in an extracurricular athletic activity, the parent shall complete the Report of Head Injury During a Sports Season form and submit it to the athletic trainer who will review it with the school nurse.

Section V. Exclusion from Play:
- Any student, who during a practice or competition, sustains a head injury or suspected concussion, or exhibits signs and symptoms of a concussion or loses consciousness, even briefly, shall be removed from the practice or competition immediately and may not return to the practice or competition until medically cleared by a duly licensed physician, a duly licensed certified athletic trainer in consultation with a licensed physician, a duly licensed nurse practitioner on consultation with a licensed physician, or a duly licensed neuropsychologist in coordination with the physician managing the student’s recovery.

- If an EMT is covering a sporting event, and an athlete sustains a head injury or suspected concussion they shall be removed from practice or competition immediately and may not return to practice or competition until medically cleared by a duly licensed physician, a duly licensed certified athletic trainer in consultation with a licensed physician, a duly licensed nurse practitioner on consultation with a licensed physician, or a duly licensed neuropsychologist in coordination with the physician managing the student’s recovery.

- The coach/assistant coach shall communicate the nature of the injury directly to the parent in person or by phone immediately during or after the practice or competition in which a student has been removed from play due to a head injury, suspected concussion signs and symptoms of a concussion, or loss of consciousness. The coach/assistant coach must also provide parents/guardians with the following forms:
  1. Head Injury Notification and Home Instruction Form
  2. Physician Head Injury Notification and Request for Academic Accommodations Form
  3. Post Sports Related Head Injury Medical Clearance and Return to Play Authorization Form

- The coach/assistant coach or his or her designee shall communicate, by the end of the next business day, with the Athletic Director and the Athletic Trainer that the student has been removed from practice or competition for a head injury, suspected concussion, signs and symptoms of a concussion, or loss of consciousness. The coach/assistant coach must also complete the Report of Head Injury During a Sports Season Form and give it to the Athletic Trainer by the end of the next business day. The Athletic Trainer will then
communicate this information to the School Nurse who will make contact with the student’s guidance counselor.

- The student shall not return to practice or competition unless and until the student provides medical clearance. The coach/assistant coach or athletic trainer shall provide the necessary forms for the student to take to their medical provider. This includes a letter explaining the need for the medical clearance from the primary healthcare provider, academic accommodations, and gradual return to play protocol.

**Section VI. Return to Play:**
A BPS multidisciplinary team will develop a plan for the student’s academics and return to play. This team may consist of athletic trainer, school nurse, teaching staff, guidance counselor, primary care physician or physician managing the student’s recovery, and parent.

The plan shall include the academic recovery plan recommendations from the physician and multidisciplinary team and the return to play protocol of the athletic trainer.

Students must be symptom free and medically cleared in order to return to play. The following individuals may authorize a return to play:

- A duly licensed physician,
- A duly licensed certified athletic trainer in consultation with a licensed physician;
- A duly licensed nurse practitioner in consultation with a licensed physician, or
- A duly licensed neuropsychologist in coordination with the physician managing the student’s recovery.

- By September 2013, physicians, nurse practitioners, certified athletic trainers, and neuropsychologists providing medical clearance for return to play shall verify that they have received Department-approved training in post traumatic head injury assessment and management or have received equivalent training as part of their licensure or continuing education. This MDPH approved Clinical Training can be found at: [www.mass.gov/dph/sports concussion.](http://www.mass.gov/dph/sports concussion)

**Gradual Return-to-Play Protocol**

- **Stage 1:** No activity
- **Stage 2:** Light aerobic exercise (walking, swimming, or stationary cycling) keeping intensity to 70% of maximum predicted heart rate; no resistance training
- **Stage 3:** Sport-specific exercise (skating drills in ice hockey, running drills in soccer); no head impact activities
- **Stage 4:** Non-contact training drills, progression to more complex training drills, eg, Passing drills in football and ice hockey; may start progressive resistance
Stage 5: Full-contact practice following medical clearance, participate in normal training activities
Stage 6: Return to play

Final return to play in the Braintree Public Schools requires the approval of the athletic trainer.

Section VII. Athletic Director Responsibilities:
- The Athletic Director completes an annual Concussion training.
- The Athletic Director participates in the biannual review and revision of the policy.
- The Athletic Director shall:
  - Ensure the annual training of coaches, staff, parents/guardians, volunteers and students;
  - Maintain records of annual trainings, certificates, affidavits, and/or attendance rosters for three years;
  - Ensure that all online Interscholastic Registration/Permission/Medical Forms and Pre-participation Head Injury/Concussion reporting forms are completed and submitted prior to participation in any extracurricular athletic activity;
  - Review all pre-participation forms and forward to the athletic trainer and school nurse those forms indicating a history of head injury.
  - Ensure that all students meet the physical exam requirements consistent with 105 CMR 2000.000 prior to participation in any extracurricular athletic activity;
  - Ensure that the medically cleared list is provided to all coaches, assistants, and volunteers and that no student participates without this clearance;
  - Ensure that Report of Head Injury During a Sports Season forms are completed by parents/guardians or coaches and reviewed by the athletic trainer and school nurse;
  - Ensure that athletes are prohibited from engaging in any unreasonably dangerous athletic technique that endangers the health or safety of an athlete, including using a helmet or any other sports equipment as a weapon;
  - Ensure that Braintree Public School issued athletic equipment is properly maintained, reconditioned and certified in accordance with National Operating Committee for Standards for Athletic Equipment (NOCSAE);
  - Maintain all online Interscholastic Registration Forms for three years.;
  - Inform parent/guardian that, if all necessary forms are not completed, their child will not participate in extracurricular athletic activities;
  - Include concussion information in student athletic handbook;
  - Develop a plan to communicate and provide language-appropriate educational materials to parents with limited English proficiency;
• Report annual statistics to the Department of Public Health:
  o The total number of Head Injury Reports received from both coaches and parents;
  o The total number of students who incur head injuries and suspected concussions when engaged in any extracurricular athletic activities.

Section VIII. Athletic Trainer Responsibilities:
• The athletic trainer shall complete the annual Concussion training.
• The athletic trainer shall participate in the biannual review and revision of the policy.
• The athletic trainer shall:
  • Review in collaboration with the school nurse the Pre-participation Questionnaire and Report of Head Injury Report forms;
  • In the case of multiple concussion reported on the pre-participation form, collaborate with the school nurse to contact the parents/guardians and the students primary care provider regarding the decision to allow a player with repeat concussions to participate in a sports season;
  • Identify students with a suspected head injury or concussion that occur in practice or competition and complete a side line evaluation consisting of the Standardized Assessment of Concussion (SAC) test and Signs and Symptoms check list;
  • Refer students with a report of a head injury to their physician for further evaluation;
  • Monitor the symptoms of students with head injuries and maintain written documentation of such monitoring;
  • Will administer the ImPACT Test within 24-72 hours following the suspected head injury;
  • Determine Gradual Return- to- Play schedule based on receiving a physician signed Post Sports Head Injury Clearance and Authorization Form and completed Physician Head Injury Notification and Academic Accommodations Form and ImPACT Test scores are back to baseline score;
  • Implement the Gradual Return-to-Play Protocol;
  • Collaborate with coaches to ensure that the Concussion Return-to-Play protocol is being followed;
  • Notify the athletic director and school nurse of any student athlete diagnosed with a concussion or head injury;
  • All Concussion Return-to-Play protocols for students with head injury or concussion will be sent to the School Nurse for placement in the student’s health record folder.

Section IX. Coach/Assistant Coach and Band Instructor Responsibilities:
• The coach/assistant coach and band instructor completes the annual Concussion training and provides the athletic director with a certificate of completion.
• The coach/assistant coach reviews the pre-participation information provided by the school nurse regarding a student’s history and/or risk of head injury.
• The coach/assistant coach shall:
  • Ensure that all student athletes have completed ImPACT baseline testing prior to participation;
  • Ensure that all student athletes are on the medically cleared list prior to participation;
  • Identify athletes with head injuries or suspected concussions that occur in practice or competition and remove them from play;
  • Communicate the nature of the injury directly to the parent/guardian in person or by phone immediately during or after the practice or competition in which a student has been removed from play due to a head injury, suspected concussion signs and symptoms of a concussion, or loss of consciousness;
  • Provide parents/guardians with the following forms:
    1. Head Injury Notification and Home Instruction Form
    2. Physician Head Injury Notification and Academic Accommodations Form
    3. Post Sports Related Head Injury Medical Clearance and Return to Play Authorization Form
  • Promptly notify the Athletic Director and Athletic Trainer of any student removed from practice or competition;
  • Complete the Report of Head Injury Form for any student with a head injury or suspected concussion that occurs during practice or competition and give to the Athletic Trainer;
  • Ensure that no student athlete returns to play until cleared by a physician and the athletic trainer and you have received this notification in writing from the athletic trainer;
  • Teach techniques aimed at minimizing sports-related head injury;
  • Discourage and prohibit athletes from engaging in any unreasonably dangerous athletic technique that endangers the health or safety of an athlete, including using a musical instrument, helmet or any other sports equipment as a weapon;
  • Ensure that Braintree Public School issued athletic equipment is properly maintained, reconditioned and certified in accordance with NOCSAE.

Section X. School Nurse Responsibilities:
• The School Nurse completes the annual Concussion training and provides the athletic director with a certificate of completion.
• The School Nurse shall participate in the biannual review and revision of the policy.
• The School Nurse shall:
  • Review all Physical Examination forms and Pre-participation Head Injury/Concussion Reporting forms;
  • In the case of multiple concussion reported on the pre-participation form, collaborate with the athletic trainer to contact the parents/guardians and the students primary care provider regarding the decision to allow a player with repeat concussions to participate in a sports season;
  • Review all annual physical exams and record in computerized health record program;
  • Review all Report of Head Injury forms in conjunction with the Athletic Trainer;
  • Maintain all physical exams, Report of Head Injury forms, Medical Clearance forms and any other pertinent medical information in the individual student health record;
  • Share on a need to know basis any head injury information regarding a student that may impact their ability to participate in extracurricular athletic activities or places a student at greater risk for repeated head injuries;
  • Complete symptom assessment when student athlete enters Health Office with questionable concussion during school hours. Repeat in 15 minutes;
  • Observe students with a concussion for a minimum of 30 minutes;
  • If symptoms are present, notify parent(s)/guardian(s) and instruct parent(s)/guardian(s) that student must be evaluated by an MD:
    (a) If symptoms are not present, the student may return to class;
    (b) If symptoms appear after a negative assessment, MD referral is necessary;
  • School nurse will notify teaches and guidance counselors of any students or student athletes who have academic accommodations or modifications related to their concussion;
  • Participate in the reentry planning for students to discuss any necessary accommodations or modifications with respect to academics, course requirements, homework, testing scheduling and other aspects of school activities consistent with a graduated reentry plan for return to full academic and extracurricular athletic activities after a head injury and revising the health care plan as needed;
  • Monitor recuperating students with head injuries and collaborate with teachers to ensure that the graduated reentry plan is being followed;
  • Allow students who are in recovery to rest in Health Office when needed;
  • Develop plan for students regarding pain management;
  • Yearly provide educational materials on head injury and concussion to teachers and support staff.
Section XI. Guidance Counselor Responsibilities:
- Guidance Counselors will complete the annual Concussion training and provides the athletic director with a certificate of completion.
- One Guidance Counselor will be appointed to participate in the biannual review and revision of the policy.
- The Guidance Counselor shall:
  - Be designated as the contact or “point person” once informed by the school nurse that a student has been diagnosed with a concussion;
  - Will work with the student on organizing work assignments, making up work and giving extra time for assignments, tests/quizzes and plans in terms of MCAS participation;
  - Assist teachers in following the recovery stage and academic accommodations for student;
  - Convene meeting and develop rehabilitative plan as needed;
  - Notify teachers to decrease workload if symptoms reappear;
  - Recognize and educate teachers that depending on the severity of the concussion, the student’s ability for cognitive thinking, coordination and memory may be variable by subject matter; Educate staff on the educational impact concussions may have on students;
  - Communicate with school nurse and athletic trainer any concerns or report of students progress and give any medical reports to school nurse.

Section XII. Classroom Teacher/Specialist Responsibilities:
- Every classroom teacher/specialist grade six through twelve will complete the annual Concussion training and provide the athletic director with a certificate of completion.
- The Classroom Teacher/Specialist shall:
  - Follow the academic guidelines set forth in the Braintree Public Schools “Academic Expectations During Post Concussion Recovery Plan”;
  - Work in conjunction with the guidance counselor to implement the recommendations and accommodations set forth for the individual student;
  - Communicate with the guidance counselor and/or school nurse regarding the student’s progress, academic needs, and/or any additional issues or concerns.

Section XIII. Parent/Guardian Responsibilities:
- Parent/Guardian will complete the annual Concussion training and provides the athletic director with a certificate of completion.
The Parent/Guardian shall:
- Complete the online registration process and deliver the annual physical form to the school nurse;
- Inform the Athletic Director if your child sustains a concussion outside of school hours and complete the Report of Head Injury During a Sports Season form and give to athletic director;
- Watch for changes in your child that may indicate that your child does have a concussion or that your child’s concussion may be worsening. Report to a physician:
  a. Loss of consciousness
  b. Headache
  c. Dizziness
  d. Lethargy
  e. Difficulty concentrating
  f. Balance problems
  g. Answering questions slowly
  h. Difficulty recalling events
  i. Repeating questions
  j. Irritability
  k. Sadness
  l. Emotionality
  m. Nervousness
  n. Difficulty with sleeping
- Encourage your child to follow concussion protocol;
- Enforce restrictions on rest, electronics and screen time;
- Reinforce academic accommodations and gradual return to play plan;
- Communicate about your child’s progress, academic needs or concerns with guidance counselor;
- Observe and monitor your child for any physical or emotional changes;
- Recognize that your child will be excluded from participation in any extracurricular athletic event if all forms are not completed and on file with the athletic department.

Section XIV. Student and Student Athlete Responsibilities:
- Student Athletes or students participating in the Marching Band will complete the annual Concussion training and provide the athletic director or band director with a certificate of completion.
- Student Athlete shall:
  - Make sure the on-line registration process is completed and turn in annual physical form prior to participation in athletics; Complete Baseline ImPACT Test prior to participation in athletics;
  - Report all symptoms to athletic trainer and/or school nurse;
  - Follow academic accommodations and return to play recovery plan;
  - Rest;
• No athletics;
• Be Honest;
• Keep strict limits on screen time and electronics;
• Don’t carry books or backpacks that are too heavy;
• Tell your teachers and guidance counselor if you are having difficulty with your class work;
• See the school nurse for pain management;
• Return medical clearance form to athletic trainer prior to beginning gradual return to play protocol;
• Return to sports only when cleared by physician and the athletic trainer;
• Report any symptoms to the athletic trainer and/or school nurse and parent(s)/guardian(s) if any occur after return to play;
• Students who do not complete and return all required trainings, testing and forms will not be allowed to participate in sports.

Section XV. Post Concussion Syndrome:
Post Concussion Syndrome is a poorly understood condition that occurs after a student athlete receives a concussion. Student athletes who receive concussions can have symptoms that last a few days to a few months, and even up to a full year, until their neurocognitive function returns to normal. Therefore, all school personnel must pay attention to and closely observe all student athletes for post concussion syndrome and its symptoms. Student athletes who are still suffering from concussion symptoms are not ready to return to play. The signs and symptoms of post concussion syndrome are:
  • Dizziness
  • Headache with exertion
  • Tinnitus (ringing in the ears)
  • Fatigue
  • Irritability
  • Frustration
  • Difficulty in coping with daily stress
  • Impaired memory or concentration
  • Eating and sleeping disorders
  • Behavioral changes
  • Alcohol intolerance
  • Decreases in academic performance
  • Depression
  • Visual disturbances

Section XVI. Second Impact Syndrome:
Second impact syndrome is a serious medical emergency and a result of an athlete returning to play and competition too soon following a concussion. Second impact syndrome occurs because of rapid brain swelling and herniation of the brain after a second head injury that occurs before the symptoms of a previous head injury have been resolved. The second impact that a student athlete may receive may only be a minor blow to the head or it may not even involve a hit to the head. A blow to the chest or back may create enough force to snap the athlete’s head and send
acceleration/deceleration forces to an already compromised brain. The resulting symptoms occur because of a disruption of the brain’s blood autoregulatory system which leads to swelling of the brain, increasing intracranial pressure and herniation.

After a second impact a student athlete usually does not become unconscious, but appears to be dazed. The student athlete may remain standing and be able to leave the field under his/her own power. Within fifteen seconds to several minutes, the athlete’s condition worsens rapidly, with dilated pupils, loss of eye movement, loss of consciousness leading to coma and respiratory failure. The best way to handle second impact syndrome is to prevent it from occurring altogether. All student athletes who incur a concussion must not return to play until they are asymptomatic and cleared by an appropriate health care professional.

Section XVII. Concussion Education:
It is extremely important to educate coaches, athletes and the community about concussions. On a yearly basis, all coaches must complete the online course called “Concussion In Sports: What you Need to Know”. This course is offered by the National Federation of State High School Associations (NFHS). Student athletes also need to understand the importance of reporting a concussion to their coaches, parents, athletic trainer and other school personnel. Every year student athletes and parents/guardians will participate in educational training on concussions and complete a certificate of completion. This training may include:

- CDC Concussion Training at: http://www.cdc.gov/concussion/HeadsUp/online_training.html


- Training provided by the school district

The school district may also offer seminars, speakers, and discussion panels on the topic of concussions. Seminars offer an opportunity for the certified athletic trainer, athletic director and nurse leader to speak about concussions on the field at practices and games and to discuss the protocol and policy that the district has enacted. Providing education within the community will offer the residents and parents of athletes an opportunity to ask questions and voice their concerns on the topic of brain injury and concussions. When it comes to concussions, everyone needs to be aware of the potential dangers and remember that a concussion is a brain injury. Whenever anyone has a doubt about a student athlete with a concussion, sit them out and have them see the appropriate healthcare professional.

The Braintree Public School system takes the safety of student athletes seriously. All members of the school staff are expected to follow these policies and protocols to support the health and safety of student athletes. Failure to comply with the letter or spirit of this policy could result in progressive discipline for staff and or forfeiture of games. If students or parents have concern that the policy is being violated, they should contact the athletic director.