



HEAD STRONG

Guidance for Implementing
the Massachusetts Regulations on
Head Injuries and Concussions
in School Athletics



JANUARY 2012

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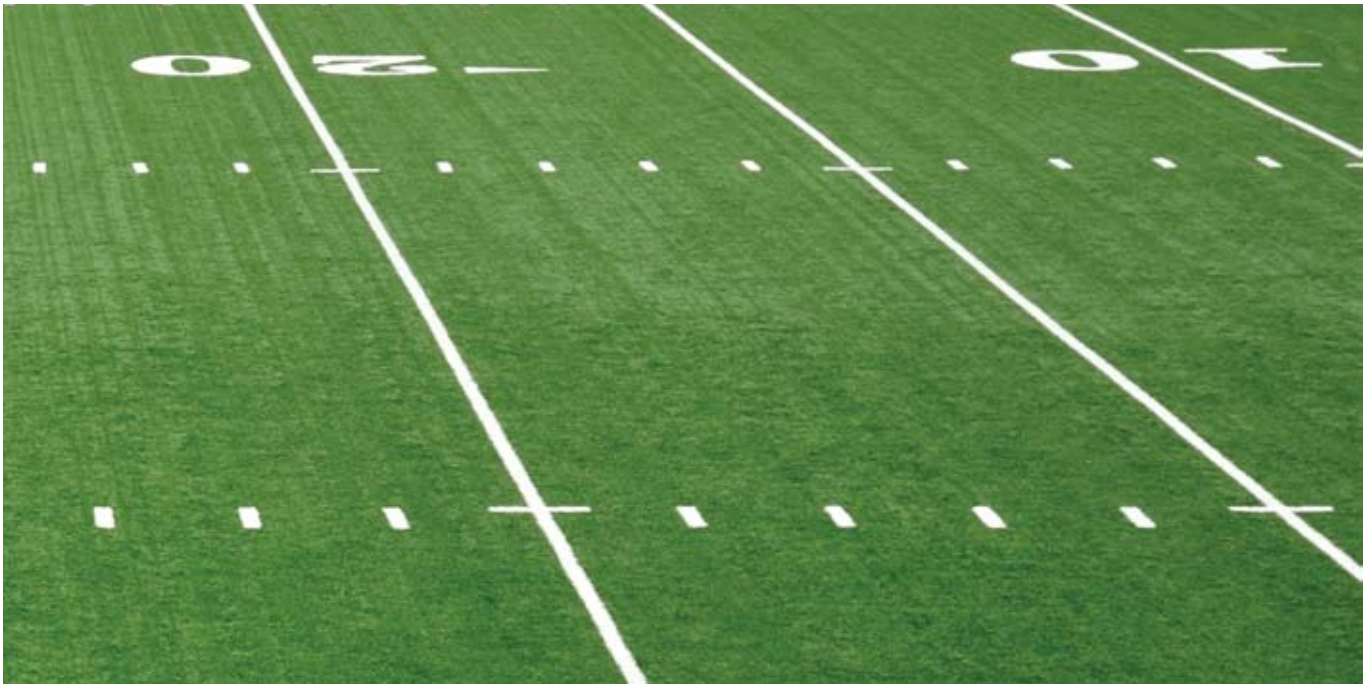


Developed by the Massachusetts Department of Public Health
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Marshfield Public Schools
Dexter and Southfield Schools
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Minnechaug Regional High School
Foxboro School District
Archbishop Williams High School
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The Department of Public Health also wishes to acknowledge the tremendous work of school coaches, athletic directors, school nurses, athletic trainers, administrators, teachers and others in promoting the health and safety of all the Commonwealth's student athletes.

Foreword by the Massachusetts Department of Public Health



A survey of middle and high school students has shown that 18% report having symptoms associated with a concussion after a blow to the head during extracurricular athletics, annually.¹ Given that there are approximately 200,000 Massachusetts students involved in athletics (MIAA), there are an estimated 36,000 student athletes a year experiencing a possible concussion. A growing body of scientific literature demonstrates the short- and long-term risks of concussions. Returning a student athlete to play after a known or suspected concussion places the student at risk for long-term health consequences, including serious injury or even death. The risk of substantial injury is particularly high if the athlete suffers a subsequent concussion before completely recovering from the prior one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences.

In 2010, the Massachusetts Department of Public Health (MDPH) issued the new regulation 105 CMR 201.000 *Head Injuries and Concussions in Extracurricular Athletic Activities*, mandated by *Chapter 166 of the Acts of 2010, An Act Relative to Safety Regulations for School Athletes* (See the **Additional Resources** section for a link to this statute). This regulation requires all public middle and high schools (serving grades 6 through high school graduation) and those non-public schools that are members of the Massachusetts Interscholastic Athletic Association (MIAA) to have policies and procedures governing the prevention and management of sport-related head injuries. The section in the regulations on School Policies (105 CMR 201.006) states that these policies will be developed by January 1, 2012² and will be reviewed and revised “as needed but at least every two years.” Furthermore, the regulation outlines

¹ Youth Health Survey, 2009, Massachusetts Department of Public Health.

² In a Frequently Asked Questions document posted on the MDPH website, MDPH has indicated that schools should confirm that they have interim policies in place as of January 1, 2012 and then may finalize their policies by March 1, 2012 and confirm to the Department that they have done so.

the 17 topic areas, at a minimum, that school policies should address. This document is organized in 17 sections to provide guidance for each of the areas identified in the regulations. Each section cites the relevant subsection of the regulation, provides clarifying comments and includes sample policies. MDPH sought to build in flexibility wherever possible to allow schools to incorporate the required head injury policies into existing policies and approaches to make implementation simpler. We have attempted to highlight these areas of flexibility throughout the document by including multiple approaches that will satisfy the requirement.

These regulations and the resulting school policies are meant to prevent concussions and minimize the health consequences should a concussion occur. The regulations also emphasize a team approach, bringing together all those in the school community responsible for student athletes' safety to understand the risks of concussions so they can respond appropriately. Schools and school districts are encouraged to use this document and the model policies that have been shared by many schools across the Commonwealth as a starting point as they develop their own school policies that fit local circumstances and reflect the district's unique characteristics. Each school district or private school is responsible for developing policies that are consistent with the regulations and include all required information.

MPDH looks forward to working with schools, school districts and other key partners to implement these regulations in order to promote the health and safety of our student athletes.

Sample Introductions to School Policies on Head Injuries and Concussions in Extracurricular Athletic Activities



Sample 1:

_____ School/School District is committed to the safety of all our student athletes. The purpose of this policy is to educate our coaches, parents, administrators, school personnel, volunteers and student athletes on the seriousness of brain injuries and concussions.³

A team of school staff consisting of our school nurse, athletic department director, certified athletic trainer, coach, and school administrator has developed these policies for _____ Public Schools and they have been adopted by the _____ School Committee and Board of Trustees in consultation with the _____ Board of Health.

We have been informed by the Massachusetts Department of Public Health (MDPH) that while these policies are not subject to MDPH review, they must be in accordance with MDPH regulations. (See **Additional Resources** at the back of this guide for a link to these regulations.) _____ School will be submitting affirmations on our school letterhead to MDPH documenting that we have complied with the regulatory requirement to develop appropriate head injury policies. We will then update and submit this affirmation by September 30, 2013 and every two years thereafter.

³ Adapted from Ludlow High School

Sample 2:⁴

_____ Public Schools seeks to prevent concussion and provide a safe return to activity for all students after an injury, particularly after a head injury. In order to effectively and consistently manage these injuries, the Athletic Department abides by the following procedures that have been developed to aid in ensuring that concussed athletes are identified, treated and referred appropriately, receive appropriate follow-up medical care during the school day, including academic assistance, and are fully recovered prior to returning to athletic activity.

⁴ Adapted from Lewis S. Mills High School, Connecticut

Section 1: Persons Responsible for Implementation of School Policy and Procedures



Regulation 105 CMR 201.006(A)(1):
Designation, by the superintendent or head master, principal or school leader, of the person responsible for the implementation of these policies and protocols, either the Athletic Director or other school personnel with administrative authority.

Overview:

The regulations specify that each school or school district must adopt policies concerning the prevention and management of sports-related head injuries. The superintendent must designate the person responsible for the development, implementation and revision of these policies. This person may be the Athletic Director or other administrator. The regulations specify that these policies should be developed by a team consisting of: a school administrator, school nurse, school or team physician (if on staff), athletic director, certified athletic trainer (if on staff), neuropsychologist (if available), guidance counselor, and teacher in consultation with any existing school health/wellness advisory committee. The regulations further specify that the regulations should be revised by September 30, 2013 and every two years thereafter.

Person Responsible Sample Policy 1:⁵

The _____ Public School has designated its principal (and his/her staff) who has administrative authority to oversee the implementation of these policies and protocols governing the prevention and management of sports-related head injuries. In addition, the Principal will be responsible for:

(1) Supporting and enforcing the protocols, documentation, training and reporting outlined in this policy;

⁵ Adapted from Boston Public Schools

- (2) Supervising and reviewing that all documentation is in place;
- (3) Reviewing, updating and implementing policy every two years and including updates in annual training and student and parent handbooks.

Person Responsible Sample Policy 2:

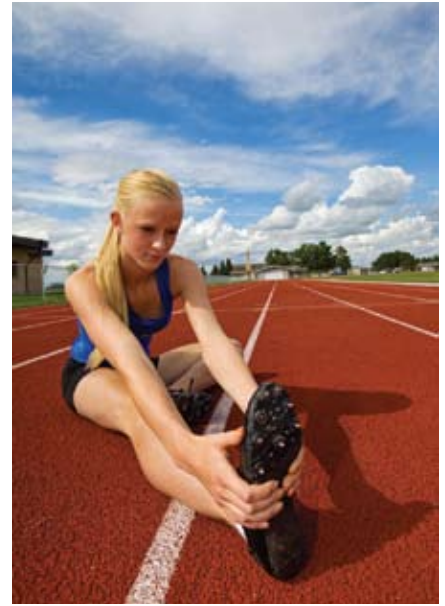
The _____ School District has designated its Athletic Director to oversee the implementation of policies and protocols governing the prevention and management of sports-related head injuries. In addition, the AD will be responsible for:

- (1) Supporting and enforcing the protocols, documentation, required training and reporting;
- (2) Assuring that all documentation is in place;
- (3) Reviewing, updating and implementing policy every two years and including updates in annual training and student and parent handbooks.

Section 2: Annual Training Requirement

Regulation 105 CMR 201.006(A)(2):

Annual training of persons specified in 105 CMR 201.007 in the prevention and recognition of sports-related head injury, and associated health risks including second impact syndrome, utilizing Department-approved training materials or program, and documentation of each person's completion of such training.



Overview:

MDPH has specified that the following persons must receive MDPH-approved annual training in sports-related concussion: coaches, certified athletic trainers, trainers, volunteers, school and team physicians, school nurses, athletic directors, marching band directors, parents of student athletes and student athletes.

To comply with the regulations, this section of the school's policy must: include the annual training requirement, confirm the use of MDPH-approved materials, specify how the training requirement will be met and how it will be documented for each category of individual, and whether any other categories of staff (such as guidance counselors or teachers) are also covered by the school's policy on the training requirement.

There is, however, flexibility in how these training requirements may be met, as shown by the three sample policies below.

A link to MDPH-approved training opportunities and training materials is available in the [Additional Resources section](#).

Training Requirement Sample Policy 1:⁶

It is extremely important to educate our coaches, school personnel, athletes and the community about concussions. On a yearly basis, all coaches, certified athletic trainers, trainers, and volunteers with the _____ Athletic Program must complete the online course "Concussion In Sports: What You Need to Know."

⁶ Adapted from Ludlow High School policy

This course is offered by the National Federation of State High School Associations (NFHS). A certificate of completion must be submitted to the Athletic Director annually. Our student athletes also need to know the importance of reporting a concussion to their coaches, parents, athletic trainer and other school personnel. Every year, student athletes and their parents will participate in an educational training on concussions and submit a certificate of completion to the Athletic Director prior to participating. One of two trainings must be completed:

- CDC Heads-Up Video Training or
- An in-person training provided by _____ Public Schools and approved by the Department of Public Health

These trainings will also be completed by school nurses and the team physician and their certificates of completion provided to the Athletic Director.

_____ Public Schools also offers seminars, speakers, and discussion panels on the topic of concussions. Seminars offer a chance for the certified athletic trainer, athletic director and nurse leader at the school to speak about concussions and to discuss the protocol and policy that the School has enacted. Providing education within the community will offer the residents and parents of athletes in the City/Town of _____ the opportunity to ask questions and voice their concerns on the topic of brain injury and concussions. When it comes to concussions, everyone should 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 brain injury, **SIT THEM OUT and have them see the appropriate healthcare professional!**

Training Requirement Sample Policy 2:

The Commonwealth of Massachusetts requires annual safety training on prevention, identification and management of a sports-related injury including head trauma and second impact syndrome for designated school personnel as well as parents or legal guardians of children who participate in any extracurricular athletic activity. This annual safety training shall be required for _____ School's coaches, certified athletic trainers, trainers, volunteers, school nurses, school and team physicians, athletic directors, directors responsible for a school marching band whether employed by a school or school

district or serving as a volunteer, parent or legal guardian of a child who participates in an extracurricular athletic activity and student who participates in an extracurricular athletic activity.⁷

This training effort shall be in collaboration with _____ School's Principal and central office administration team and documentation of such training will be provided to the Principal for maintenance in a central file.

While not required by MDPH, _____ School also offers this training to guidance counselors, physical education teachers, and other school personnel. In addition, our school's Game officials shall complete one of the training programs approved by the Department of Public Health.

The trainings available for _____ School for school staff, parents/guardians and student athletes are MDPH Approved Online Training courses listed below. They are available free of charge and last only about 30 minutes.

- Centers for Disease Control and Prevention Heads Up Concussion in Youth Sports On-Line Training Program (www.cdc.gov/concussion/HeadsUp/online_training.html)
- National Federation of State High School Associations Concussion in Sports - What You Need to Know (www.nfhslearn.com/electiveDetail.aspx?courseID=15000)

The training materials are available at _____ School's athletic department website (xxx.xxxxxx.edu), and hard copies are available in the athletic department office, the school nurse office and the athletic handbook.

_____ School's athletic director is responsible for ensuring that the training requirements for staff, parents, volunteers, coaches and students are met, recorded, and records are maintained.⁸

The written verification of completion of the annual training (either the certificate of completion from the on-line courses or a signed verification that written materials have been read and understood) will be kept on file by the following Department Heads:

- Nurse Leader: all school nurses and the School Physician Consultant

⁷ Adapted from Marshfield Public Schools

⁸ In accord with 105 CMR 201.016

- Athletic Director: all members of the athletic staff, volunteers at any extra-curricular athletic activity, and parents or legal guardians of children who participate in any extracurricular athletic activity
- Director of Health Education: all members of the physical education staff
- Director of Music: Director of Marching Band

Training Requirement Sample Policy 3:

The Commonwealth of Massachusetts requires annual safety training on sports-related concussion, including second impact syndrome, for coaches, certified athletic trainers, trainers, volunteers, school nurses, school and team physicians, athletic directors, directors responsible for a school marching band whether employed by a school or school district or serving as a volunteer, parent or legal guardian of a child who participates in an extra-curricular athletic activity and student who participates in an extracurricular athletic activity. At _____ Public School, school personnel are required to complete free, on-line training (either the National Federation of High Schools or the CDC's Heads Up Concussion training) or attend a training event organized by the athletic department and approved by the Department of Public Health. For student athletes and their parents, this training can be provided in the regular pre-season meetings where written materials are also available. Attendance can be taken at such meetings and the attendance roster serves as a record of verification for participants who are trained. If parents or students are unable to attend this training, they must complete one of the approved on-line trainings and submit a certificate of completion to the athletic director to meet this participation requirement. Alternatively, parents may review MDPH-approved written materials (provided by the athletic department) and sign a verification form that they have read and understood these materials.

See the Additional Resources section for links to additional training materials about Sports-Related Concussion.

Section 3:

Documentation of Physical Exam



Regulation 105 CMR 201.006(A)(3):
Documentation of physical examination prior to a student's participation in extracurricular athletic activities on an annual basis, consistent with 105 CMR 200.100(B)(3) and information for students participating in multiple sports seasons that documentation of one physical examination each year is sufficient.

Overview:

Students must have an annual physical examination to assure that they are sufficiently healthy for athletic activity. Ideally, the physical examination should be done by the primary care provider in the student's medical home. To comply with the regulations, this policy section must include the requirement of an exam "on an annual basis" and the school's interpretation of how often such exams will be required, where physical examination forms will be kept, who will be responsible for assuring that students are notified when physical exams expire, and consequences of athletes not meeting annual physical exam requirements.

Physical Examination Sample Policy 1:⁹

Every student in _____ School must be separately and carefully examined by a duly licensed physician, nurse practitioner or physician assistant, prior to a student's participation in competitive athletics, on an annual basis. The completed and signed copy of the medical clearance form should be mailed, faxed or hand-delivered to either the school nurse or athletic office. No student athlete will be allowed to participate in athletic activities until all forms, including annual physical examinations, are signed and submitted.

⁹ Adapted from Massachusetts Department of Public Health Comprehensive School Health Manual, 2007, Weston Public Schools and 105 CMR 200.100 Physical Examination of School Children

Frequency of Exam: As a matter of school policy, _____ School accepts physical examinations completed within 13 months to allow for insurance coverage that would be not be possible if examinations are within a 12 month period. This medical examination should be completed by a physician, nurse practitioner, etc. and should authorize the student athlete who participates in multiple sports seasons during the following 13 months that the student is medically cleared to do so.

Where Forms Are Kept: The current annual medical examination form should be submitted to the school nurse. It should also be kept in the student's medical record. The school nurse and/or athletic director should ensure that all student athletes that are participating in extracurricular school sports have been medically cleared annually.

A student athlete at _____ School cannot participate in an extracurricular sports activity if she/he has not had a physical examination within the last 13 months.

Physical Examination Sample Policy 2:

Each student athlete must have a physical examination on an annual basis, i.e. within 12 or 13 months of the student's last physical examination (to allow for insurance coverage of the examination). Any student athlete who does not have a current physical on file with the nurse, prior to the first day of try-outs/practice, is not eligible until a new/updated physical is turned in. If the student's physical examination expires during the sports season, he/she must have an updated physical examination to continue to participate in the sports season. All physicals are to be turned in to the nurse, not the coach. A new sports physical form must be filled out every fall or prior to participating in the student's first sport of the season and submitted to the school nurse even if the information has not changed.

Section 4:

Pre-Participation Head Injury Reporting Forms, Submission and Review



Regulation 105 CMR 201.006(A)(4):
Procedure for the school to obtain and ensure review, prior to each sports season, of current information regarding an athlete's history of head injuries and concussion using either the Department Pre-participation Health Injury/Concussion Reporting Form For Extracurricular Activities, or school-based equivalent.

Overview:

Both the law and regulations require student athletes and their parents to provide an accurate history of head injury to the school prior to each athletic season. The Department has developed a pre-participation reporting form that may be found in the **Additional Resources** section, as well as on the Department's website. Schools may utilize this form or a "school-based equivalent" form which contains all of the same information as the Department's form, but could be part of another form or contain additional information the school wishes to collect. The following elements should be included in the school-based equivalent of the Pre-participation form:

- Instructions stating this form should be completed by student's parent(s) or legal guardian and submitted to the Athletic Director or official designated by the school, prior to the start of each season a student plans to participate in an extracurricular athletic activity.
- Student's Name, Sex, Date of Birth, Grade
- School Name and Sport(s)
- Home Address and Telephone #
- Has student ever experienced a traumatic head injury (a blow to the head)? (If yes, when?)
- Has student ever received medical attention for a head injury? (If yes, when?)
- Was student diagnosed with a concussion? (If yes, when?)
- Durations of symptoms for most recent concussion
- Parent or guardian's printed name, signature and date
- Student athlete's printed name, signature and date

To comply with the regulations, this section of the school's policy must include: the method for collection of pre-participation forms, who will receive the forms and the consequences for failure to provide the forms prior to the start of the sports season.

Concussion History Form Submission and Review Sample Policy:¹⁰

The Massachusetts concussion law requires athletes and their parents to inform coaches about prior head injuries at the beginning of each sports season. This reporting is done via the **Pre-participation Head Injury/Concussion Reporting Form** and should be completed by the student's parent(s) or legal guardian(s) and the student. It must be submitted to the _____ School's Athletic Director, **prior to the start of each season a student plans to participate in an extracurricular athletic activity.** This form provides a comprehensive history with up-to-date information relative to concussion history. This form is designed to ensure that particular attention is paid to identifying athletes with a history of brain or spinal injuries. For example, it asks such questions as:

- Has student ever experienced a traumatic head injury (a blow to the head)? (If yes, when?)
- Has student ever received medical attention for a head injury? (If yes, when?)
- Was student diagnosed with a concussion? (If yes, when?)
- Durations of symptoms for most recent concussion.

Until the pre-participation form (or school-based equivalent) is completed and signed by the parent/guardian and student and returned to the school prior to the start of every sports season, the student cannot participate in the extracurricular sports activity.

History of Multiple Concussions on Pre-participation Form: The decision to allow a player who reported a history of multiple concussions on her/his pre-participation form should be made only after consultation with the student's physician or primary care provider; the sports medicine or concussion specialist, if involved; the neuropsychologist, if involved, and the appropriate school athletic staff and the parent. Current evidence indicates that youth who have suffered one or more concussions are more likely to suffer a

¹⁰ Adapted from Marshfield Public Schools, MDPH Sports-related Head Injury Regulations FAQs, and 105 CMR 201.008(A)

subsequent one. Options may include switching positions, limiting contact in practices, or changing sports altogether to minimize the risk of re-injury. The focus of _____ School will always be on protecting the health and safety of the student and avoiding long-term consequences that can occur from repeated concussions.

Collection/Distribution of Pre-participation Forms: _____

School has the pre-participation forms available electronically at the School's website under the Athletic Department folder at xxx.xxx.edu. Hard copies of these forms are also available at the Athletic Department and School Nursing office.

The parent/student can fax, mail, or hand-deliver the completed and signed pre-participation form to the _____ School's athletic department which will forward a copy to the school nurse. In addition, during the months of July and August, coordination between the athletic and school nursing departments is particularly important when the school nurse is on vacation. The pre-participation forms should be submitted to the coaches or athletic directors who will then follow-up with the school nurse when s/he returns to work in September.

See the Additional Resources section for a link to MDPH Pre-participation Head Injury/Concussion Reporting Form for Extracurricular Activities and other School-based equivalents.



Section 5:

Medical/Nursing Review of Pre-Participation Forms

Regulation 105 CMR 201.006(A)(5):
Procedure for medical or nursing review of all Pre-participation Forms indicating a history of head injury.

Overview:

In order to assure that students who have experienced a concussion/head injury in the past are safe to play, the school must ensure timely review by either the school nurse or the school physician of all pre-participation forms that indicate a history of head injury.

To comply with the regulations, this section of the policy must specify how this review will take place as well as how a student's history of head injury/concussion may factor into the decision of whether to allow continued participation in athletics or whether to modify the specific conditions of such participation.

Medical Review of Pre-Participation Form Sample Policy:¹¹

At the start of each sports season, the Athletic Director will review all pre-participation forms and forward to the school nurse those forms indicating a history of head injury. The school nurse will be responsible for:

- Reviewing or having the school physician review completed pre-participation forms
- Addressing any questions raised by the Athletic Director
- Communicating with the coach regarding the student's concussion history and discussing concerns
- Following up with parents and students as needed prior to the student's participation in extracurricular athletic activities.

¹¹ Excerpted from Boston Public Schools and 105 CMR 201.015

Section 6:

Medical/Nursing Review of Reports of Head Injury During the Season



Regulation 105 CMR 201.006(A)(6):
Procedure for the school to obtain and ensure timely medical or nursing review of a Department Report of a Head Injury During Sports Season Form, or school-based equivalent, in the event of a head injury or suspected concussion that takes place during the extracurricular activity season.

Overview:

As with Section 5, in order to assure that students who experience concussion/head injury are safe to play, the school must ensure timely review of all report of head injury forms by either the school nurse or the school physician. The Department has developed a **Report of Head Injury During the Sports Season Form**. A link to this form may be found in the **Additional Resources** section as well as on the Department's website. Schools may utilize this form or a "school-based equivalent" form which must contain all of the same information as the Department's form, but could be part of another form or contain additional information the school wishes to collect. The following elements should be included in the school-based equivalent of the **Report of Head Injury Form**:

- Instructions to Coaches to fill out the form immediately after the game or practice for head injuries that result in student being removed from play due to a possible concussion. Coaches should also follow-up with the Certified Athletic Trainer as well as parent/guardian the same day/night of the injury.
- Instructions to Parents/Guardians to fill out the form if the injury occurs outside of an athletic practice or game and return to school nurse.
- Student's Name, Sex, Date of Birth, Grade
- School Name and Sport(s)
- Home Address and Telephone #
- Date of Injury
- Did the incident take place during an extracurricular activity? If so, where did the incident take place?
- Describe the nature and extent of injuries to the student.

- Ask Parent/Guardians if the student received medical attention and if yes, was a concussion diagnosed?
- Name of person completing the form

To comply with the regulations, this section of the policy must: specify how the report of head injury forms will be completed if the injury occurs during an extracurricular athletic activity, how parents will be made aware of this reporting requirement if the injury occurs outside of extracurricular athletics, who will be designated to receive these forms when completed and how they will be provided to the school nurse for medical review.

Medical/Nursing Review Sample Policy 1:

Collaboration and sharing of this information is crucial to management and coordination of student's care after a head injury.

_____ School requires that the completed **"Report of Head Injury During Sports Season Form"** should be submitted to the athletic director, and a copy should be forwarded to the school nurse who is responsible for reviewing the form. The school nurse will forward this form to the physician if medically indicated. The school nurse should also maintain documentation of the Head Injury Assessments in the student's health record.¹²

Blank Copies of the **"Report of Head Injury During Sports Season Forms"** (or school-based equivalent) are kept in the _____ School nurse's office and athletic director's office.

These forms are also available in the school's athletic handbook and on line at the school or athletic department website. Parents are made aware of their responsibility for completing the form in the event of a head injury occurring outside of extracurricular athletic activity through written materials at the start of the sports season. Such forms will be submitted to the athletic director, coach or school nurse.

As instructed on the **"Report of Head Injury During Sports Season Form"** the coach will complete this form immediately (day of injury) after the game or practice for head injuries that result in the student being removed from play due to a suspected concussion and submit it to the school nurse department and/or school physician (if appropriate), athletic department or other designee and parent/guardian.

¹² Excerpted from Boston Public Schools and CDC Head Up to Schools: Know Your Concussion ABCs, A Fact Sheet for Nurses

Medical/Nursing Review Sample Policy 2:¹³

The following procedures will be followed when an athlete receives a head injury:

- Athlete is removed from the contest or practice.
- The certified athletic trainer conducts a *Standardized Assessment of Concussion* and completes the **“Report of Head Injury During Sports Season Form”**.
- If certified athletic trainer is not available, coach completes the **“Report of Head Injury During Sports Season Form”**
- The certified athletic trainer/coach will give **“Report of Head Injury During Sports Season Form”** to Director of Athletics.
- Director of Athletics will notify school nurse and/or school physician (if appropriate) who will review the Report of Head Injury form.
- School nurse will contact athlete’s teachers and guidance counselor.

See the Additional Resources section for a link to the MDPH Report of Head Injury During Sports Season form and school-based equivalent forms.

¹³ Adapted from Northampton High School



Section 7: Procedure for Reporting Head Injuries to School Nurse and/or Certified Athletic Trainer

Regulation 105 CMR 201.006(A)(7):

Procedure for reporting head injuries or suspected concussions sustained during extracurricular athletic activities to the school nurse and certified athletic trainer, if on staff.

Overview:

Because medical evaluation and ongoing monitoring of a student's recovery from concussion is so important for a student's safety, schools should have in place a procedure for assuring that head injuries or concussion sustained during play or practice are reported to the school nurse and certified athletic trainer.

To comply with the regulations, this section of the school policy must include: specifics regarding how the school nurse and certified athletic trainer will be notified, what information about the head injury will be shared, and their role in evaluation and monitoring of the head injury. Many schools have combined policies required by Sections 6 and 7 and there is flexibility in how these requirements may be met as demonstrated by the multiple sample policies below.

Reporting Head Injury Sample Policy 1:¹⁴

At _____ School head injuries or suspected concussions (after a bump, blow or jolt to the head or body) sustained during extracurricular athletic activities must be reported by the coach as soon as possible to the school nurse and the certified athletic trainer. **Athletes who experience signs or symptoms of a concussion should not be allowed to return to play.**

¹⁴ Adapted from Marshfield Public Schools and 105 CMR 201.010(A)

Reporting Head Injury Sample Policy 2:¹⁵

Coaches will report all head injuries to the Certified Athletic Trainer as soon as possible for medical assessment and management and coordination of home instructions and follow-up care. The Certified Athletic Trainer can be reached at xxx-xxx-xxxx. The athletic trainer will notify the school nurse of the student's injury, prior to the next school day, so that the school nurse can initiate appropriate follow-up in school immediately upon the athlete's return to school. (Note that the coach will be responsible for communicating the student's injury with parents/guardians.)

Reporting Head Injury Sample Policy 3:¹⁶

When a student athlete obtains a head injury during an extracurricular athletic activity, the following steps must be followed:

- Physician or certified athletic trainer evaluates the student.
- Coach completes **Report of Head Injury Form** and sends copy to school nurse.
- School nurse notifies athletic director, guidance, and student's teachers of injury and any modifications ordered by MD.
- Coaches assure that student athlete adheres to the protocol.
- Physician notifies school nurse of student's progression.
- School nurse notifies all necessary staff of progression, recovery and return-to-play.

¹⁵ Adapted from Paramus Public Schools

¹⁶ Adapted from Ashburnham Westminster Regional School District



Section 8: Removing Athletes from Play and Medical Evaluation

Regulation 105 CMR 201.006(A)(8):
Procedure for identifying a head injury or suspected concussion, removing an athlete from practice or competition and referring for medical evaluation.

Overview:

Because continuing athletic activity after sustaining a concussion can be dangerous, and can result in both short- and long-term consequences up to and including death, removing an athlete from play who has sustained a head injury or suspected concussion is crucial. Diagnosing a concussion on the sidelines is not safe or acceptable practice, nor is returning an athlete to play a few minutes after a blow to the head if symptoms appear to “resolve”. Research has demonstrated that what have previously been considered “dings” or “bell ringers” can be serious events. The law and the regulations require that players who have symptoms consistent with a suspected concussion must be removed from play, and may not return to play or practice that same day.

Although the regulations specifically assign responsibility to coaches and certified athletic trainers to remove athletes from play for head injuries or suspected concussions, the Department of Public Health expects that there will be a shared understanding of the symptoms and risks of concussion among athletes and other adults who are present during practice or competition. If there is any disagreement among responsible personnel regarding whether the student has sustained a head injury or has symptoms suggestive of a concussion, the student should be removed from play, as that is the safest option for the student. Following a concussion, communication between families, educational personnel, athletic staff and health care providers is crucial to facilitate a student’s healthy return to school and physical activity following a concussion.¹⁷

¹⁷ Adapted from Marshfield Public Schools

To comply with the regulations, this section of a school’s policies must include: clarity regarding removal from play for any athlete with a head injury or suspected concussion, a statement that head injured athletes will not be returned to play/practice that day (even if symptoms appear to “resolve”), any procedures for documenting signs and symptoms of concussion, procedure for notifying school medical personnel and initiating emergency medical services when needed, and procedure for notification of parents.

Different schools/school districts have developed compliant policies and protocols appropriate to their needs and resources. Samples are included below.

Note: The Additional Resources section contains a link to a Fact Sheet on Signs and Symptoms of Concussion.

Identifying Head Injury or Suspected Head Injury and Removing from Play Sample Policy 1:¹⁸

In the event that a student athlete receives a head injury, or is suspected of having a head injury, the student will be removed from play and will not be returned to play or practice that day. The coach should report the head injury to the certified athletic trainer or school nurse/physician as soon as possible, for medical assessment and management and for coordination of home instructions and follow-up care. The certified athletic trainer or school nurse/physician will be responsible for contacting the athlete’s parents and providing follow-up instructions. If the athlete is injured at an away event or if the certified athletic trainer is unavailable, the coaching staff are responsible for notifying the athlete’s parents of the injury and, if warranted, calling for emergency care. Coaches should seek assistance from the host site athletic trainer, coach or school nurse if at an away event.

If the athlete is able to be sent home (rather than directly to MD): a) the coach or athletic trainer will ensure that the athlete will be with a responsible adult, who is capable of monitoring the athlete and understanding the home care instructions, before allowing the athlete to go home; b) the coach or athletic trainer will continue efforts to reach the parents; c) if there is any question about the status of the athlete, or if the athlete is not able to be monitored appropriately, the athlete will be referred to the emergency department for evaluation. A coach or athletic trainer will accompany the athlete and remain with the athlete until the parents arrive and d) athletes with suspected head injuries will not be permitted to drive home.

¹⁸ Adapted from Paramus High School Policy

Identifying Head Injury or Suspected Head Injury and Removing from Play Sample Policy 2:¹⁹

If a student athlete receives a blow to the head and *any* signs or symptoms are present – or if the student is suspected of having a head injury – the coach or athletic trainer must remove the student from play/practice and the student will not return to play/practice that day. The student will be referred to the school nurse who should: a) Refer student immediately to their primary care physician or if unavailable, emergency room, b) Send copy of the symptom checklist with the student for review by medical personnel. The coach will also be responsible for notification of parents/legal guardians.

Identifying Head Injury or Suspected Head Injury and Removing from Play Sample Policy 3:²⁰

In the event that a student athlete receives a head injury, the certified athletic trainer will use the Standardized Assessment for Concussion (SAC) Form A (Standardized Assessment of Concussion) to assess and document the student athlete's concussion. The athletic trainer will also report on the student athlete's signs and symptoms of a concussion by using the Signs and Symptoms Check-List. The athletic trainer will also check pulse and blood pressure of each student athlete with a suspected concussion. After the initial evaluation of a concussion, all signs and symptoms will be tracked on the computer using the ImpACT Test.

Any athlete who is symptomatic but stable is allowed to go home with their parent(s) or legal guardian(s) following the head injury.

- If the head injury occurs at practice, a parent(s) or legal guardian(s) will immediately be notified and must come and pick-up the student athlete and talk to the certified athletic trainer in person.
- If the injury occurs at a game or event they may go home with their parent(s) or legal guardian(s) after talking with the certified athletic trainer.
- Parent(s) or legal guardian(s) will receive important information regarding signs and symptoms of deteriorating brain injury/function prompting immediate referral to a local emergency room as well as return to play requirements at the school. Parent(s) or legal guardian(s) as well as student athletes must read and sign

19 Adapted from Marshfield Public Schools and the Dexter and Southfield Schools

20 Adapted from Ludlow High School

the Concussion Information and Gradual Return to Play form and bring it back to the certified athletic trainer before starting with the return to play protocol. All symptomatic students will be referred to their primary care provider for evaluation.

When an athlete loses consciousness for any reason, the athletic trainer will start the Emergency Action Plan by activating EMS, recognize ABC's, stabilize the C-spine and transport the injured athlete to the local hospital via ambulance. If the athletic trainer is not present, the coach should call EMS immediately, check ABCs and not move athlete until help arrives.

Any athlete who is removed from the competition or event and begins to develop signs and symptoms of a worsening brain injury will be transported to the hospital immediately in accordance with the Emergency Action Plan. **Worsening signs and symptoms requiring immediate physician referral:**²¹

- Amnesia lasting longer than 15 minutes
- Deterioration in neurological function
- Decreasing level of consciousness
- Decrease or irregularity in respirations
- Decrease or irregularity in pulse
- Increase in blood pressure
- Unequal, dilated, or un-reactive pupils
- Cranial nerve deficits
- Any signs or symptoms of associated injuries, spine or skull fracture, or bleeding
- Mental-status changes: lethargy, difficulty maintaining arousal, confusion, agitation
- Seizure activity
- Vomiting/worsening headache
- Motor deficits subsequent to initial on-field assessment
- Sensory deficits subsequent to initial on-field assessment
- Balance deficits subsequent to initial on-field assessment
- Cranial nerve deficits subsequent to initial on-field assessment
- Post-Concussion symptoms worsen
- Athlete is still symptomatic at the end of the game

²¹ From Ludlow High School's policies, this footnote from Prentice, William E., Arnhem's Principles of Athletic Training: A Competency-Based Approach. 12th ed. New York: McGraw Hill. 2006. p. 872-890.



Section 9: Medical Clearance for Return to Play

Regulation 105 CMR 201.006(A)(9):

The protocol for medical clearance for return to play after a concussion that at a minimum complies with 105 CMR.201.011.

105 CMR 201.011:

Each student who is removed from practice or competition for a head injury or suspected concussion, or loses consciousness, even briefly, or exhibits signs and symptoms of a concussion, shall obtain and present to the Athletic Director, unless another person is specified in school policy or procedure, a Department Post Sports-Related Head Injury Medical Clearance and Authorization Form (Medical Clearance and Authorization Form), or school-based equivalent, prior to resuming the extracurricular athletic activity. This form must be completed by a physician or one of the individuals as authorized by 105 CMR 201.011(A). The ultimate return to play decision is a medical decision that may involve a multidisciplinary approach, including consultation with parents, the school nurse and teachers as appropriate.

105 CMR 201.011(A):

Only the following individuals may authorize a student to return to play:

- (1) A duly licensed physician;*
- (2) A duly licensed certified athletic trainer in consultation with a licensed physician;*
- (3) A duly licensed nurse practitioner in consultation with a licensed physician; or*
- (4) A duly licensed neuropsychologist in coordination with the physician managing the student's recovery.*

Overview:

If an athlete is removed from play for a suspected concussion, he or she must be medically cleared and evaluated before returning to play/practice. If the student was diagnosed with a concussion, the medical clearance can only be provided **after** he or she has completed a graduated return to play plan indicating they are ready to resume physical

activity. To provide this clearance, MDPH has developed a **Sports Related Head Injury Medical Clearance and Authorization Form** whose link may be found in the **Additional Resources** section or on the MDPH website. Schools may use this form or a school-based equivalent including the same information. The form may include additional information the school wishes to collect. The following elements should be included on the school-based equivalent:

- Student's name, sex, date of birth, grade
- Date of Injury
- Symptoms and their duration
- Diagnosis
- If a concussion was diagnosed, date of completion of graduated RTP plan
- Past history of previous concussions
- Health provider's name, address, phone #
- Health provider's designation as physician, CAT, NP or neuropsychologist
- If not physician, name of physician providing consultation or coordination
- Signature and date of health provider providing clearance

In order to comply with the regulations, this section of the school's policies must include: confirmation that students may not return to play/practice until medical clearance is obtained, what form will be used, who reviews the medical clearance, where forms will be kept, and what procedures will be followed if symptoms are observed after a student resumes physical activity. For more information about graduated return to play plans, see Section 10 of this document. Of note, the athlete must be completely symptom-free at rest before beginning a graduated return to play process.

There is substantial flexibility to develop policies and protocols that meet the needs and resources of a particular school or school district. This is reflected in the sample policies below.

Return to Play Sample Policy 1:

The _____ school physician, if available, should also be involved. **Medical clearance is meant to be provided AFTER a student has completed his or her graduated return to play plan.**

The medical provider giving medical clearance for returning to play must use the MDPH Medical Clearance Form, "**Post Sports-Related Head Injury Medical Clearance and Authorization Form,**" available on the MDPH website (www.mass.gov/eohhs/docs/dph/com-health/injury/posthead-injury-clearance-form.pdf), or a school-based equivalent that includes the same

information. The Medical Clearance Form contains more detailed information than a simple statement that the student is ready to return to athletics. This additional information is necessary as school staff monitors the student returning from a concussion. Athletic staff may consider providing this form to the athlete to share with the physician. The completed forms should be kept in the student's medical record in the school health office as well as athletic department office.

Return to Play Sample Policy 2:²²

All students at _____ School must be cleared to return to play/practice by a licensed medical professional (physician, NP in consultation with a physician, CAT in consultation with a physician or neuropsychologist in coordination with the physician managing the student's recovery) *after the graduated return to play has been completed*. (See details about graduated return to play practices below under Section 10). It is recommended that this medical professional have familiarity with concussion diagnosis and management in order to determine how serious the concussion is and when it is safe for the student to return to normal activities including physical activity and school (concentration and learning activities). Sports activities include physical education class as well as sports practices and games:

- The student should be completely symptom free at rest and with physical (sprints, non-contact aerobic activity) and cognitive exertion (school work).
- Return to play should occur gradually (see below).
- Students should be monitored for symptoms and cognitive function during each stage of exertion.
- Students should only progress to the next level of exertion if they are asymptomatic at the current level.

Medical clearance will be provided using the form whose link can be found in the **Additional Resources** section of these policies and also available on the _____ School website. It is recommended that the student take this form to the medical professional at the time of exam as other forms will not be accepted. These forms must be provided to the coach or athletic trainer and

22 Adapted from a number of sources, including Marshfield High School

will be shared with the school nurse for review with a copy kept in the student's medical record.

In a situation in which a student has been medically cleared but school staff have observed continuing symptoms, the school will make the final decision regarding a student's to return to play. If this situation arises, the _____ School staff should communicate to the physician or health care provider who provided the clearance regarding the symptoms which school staff have observed, to allow for reevaluation by the health care provider. It is possible that the health care provider was not aware of the student's symptoms when the provider gave the clearance. If the athlete still has symptoms, the athlete should NOT return to play.

Return to Play Sample Policy 3 (When schools use ImpACT or other testing not required by regulations):²³

Following a diagnosed concussion made by a healthcare provider, the student athlete will take a post-injury test within 24 to 48 hours following the head injury. STUDENT ATHLETES WILL NOT BE ALLOWED TO MOVE ONTO FUNCTIONAL/PHYSICAL TESTING UNTIL THEIR IMPACT TEST IS BACK TO THE BASELINE SCORE AND THEY ARE ASYMPTOMATIC. After a student athlete takes their first post-injury test, they will not be re-tested again for 5 days.

If after the first post-injury ImpACT test the athlete is not back to his/her baseline, the parent(s) or legal guardian(s) will be notified, and the student athlete will be referred back to their healthcare provider and must have the Concussion Information and Gradual Return to Play form signed by a physician, licensed neuropsychologist, nurse practitioner or certified athletic trainer stating when the athlete is allowed to return play.

Following a post-injury test, the certified athletic trainer will take the Concussion Information and Gradual Return to Play form signed by the parent(s) or legal guardian(s) and fill in the date of all post-injury tests taken by each student athlete.

²³ Adapted from Ludlow High School

The certified athletic trainer will also document the date on which the athlete is asymptomatic and sign the document agreeing that all the above statements are true and accurate.

Once the athlete completes the exertional post concussions tests, the parent(s) or legal guardian will be notified and the athlete will be sent home with all signed documents relating to head injury. At this time the parent(s) or legal guardian must bring the student athlete to a licensed physician, licensed neuropsychologist, nurse practitioner, or certified athletic trainer to be medically cleared for participation in extracurricular athletic activities.

Once a student athlete's post-injury test is back at the student athlete's baseline score they will go through 5 days of Exertional Post Concussion Tests. The student athlete must be asymptomatic for all functional and physical tests to return to play (RTP). All tests will be administered by a certified athletic trainer.

Return to Play Sample Policy 4:²⁴

If it is determined that an athlete has a concussion or suspected concussion, he/she will be out of competition until he/she can be cleared for participation by a physician. No player shall go from being sidelined with a concussion to full play until he/she has followed the recommended stepwise process from the treating physician regarding return to activity. Each athlete will likely have his/her own course of recovery, which may depend upon prior medical history of concussion. Each student who is removed from practice or competition shall have a written graduated re-entry plan for return to full academic and extracurricular athletic activities. The plan shall be developed by the student's teachers, the student's guidance counselor, school nurse, certified athletic trainer if on staff, neuropsychologist if available or involved, parent, members of the building-based student support and assistance team or individualized education program team as appropriate and in consultation with the student's primary care provider or the treating physician. This written plan shall include instructions for students, parent(s) and school personnel addressing physical and cognitive rest, graduated return to academics and athletics,

²⁴ Adapted from the Dexter and Southfield Schools

estimated time intervals for resuming activities, assessment frequencies, as appropriate, by the school nurse, physician, team physician, athletic trainer if on staff, or neuropsychologist if available until full return to academics and athletics is authorized. A plan for communication and coordination shall also be put into place with the above individuals who are managing the student's recovery. The student must be completely symptom-free at rest in order to begin graduated re-entry (stepwise program) to activities. Final authority for return to play shall reside with the student's physician or the physician's designee.



Section 10: Development and Implementation of Post Concussion Graduated Reentry Plans

Regulation 105 CMR 201.006(A)(10):

Procedure for the development and implementation of post-concussion graduated reentry plans to school and academic activities, if indicated, by persons specified in CMR 201.010(E)(1).

105 CMR 201.010(E):

Each student who is removed from practice or competition and subsequently diagnosed with a concussion shall have a written graduated reentry plan for return to full academic and extracurricular athletic activities.

- (1) The plan shall be developed by the student's teachers, the student's guidance counselor, school nurse, certified athletic trainer if on staff, neuropsychologist if available or involved, parent, members of the building-based student support and assistance team or individualized education program team as appropriate and in consultation with the student's primary care provider or the physician who made the diagnosis or who is managing the student's recovery.*
- (2) The written plan shall include instructions for students, parents and school personnel, addressing but not be limited to: (a) Physical and cognitive rest as appropriate; (b) Graduated return to extracurricular athletic activities and classroom studies as appropriate, including accommodations or modifications as needed; (c) Estimated time intervals for resumption of activities; (d) Frequency of assessments, as appropriate, by the school nurse, school physician, team physician, certified athletic trainer if on staff, or neuropsychologist if available until full return to classroom activities and extracurricular athletic activities are authorized; and (e) A plan for communication and coordination between and among school personnel and between the school, the parent, and the student's primary care provider or the*

physician who made the diagnosis or who is managing the student's recovery.

(3) The student must be completely symptom-free and medically cleared as defined in 105 CMR 201.011 in order to begin graduated reentry to extracurricular athletic activities.

Overview:

If a student athlete has been diagnosed with a concussion, the regulations require that a graduated reentry plan, for both academics and sports, be developed and implemented. Recovery from a concussion requires rest, both physical and cognitive, in order for the brain to heal. This means that during the recovery period, it is as important for a concussed student to refrain from studying, working on a computer or playing video games, as it is for the student to refrain from participating in athletics. A graduated reentry plan, to either academics or sports, should not begin until a student is symptom-free at rest. A student should be symptom-free at each stage of the plan before graduating to the next phase.

Graduated reentry plans require a collaborative approach among health care providers, teachers, guidance counselors, the athletic staff and the athlete and her/his parent or guardian. Graduated reentry plans include gradual steps from physical and cognitive rest, gradual return to physical and academic activities, estimated time intervals for resumption of activities, frequent assessments, and a communication plan among school staff, parents, and health care providers. The injured student will recover more quickly with rest, not only from physical exertion and athletic activity, but also from the cognitive demands of academic work.

For example, students who return to school after a concussion may need to:

- Take rest breaks as needed
- Spend fewer hours at school
- Be given more time to take tests or complete assignments
- Receive help with schoolwork, and/or
- Reduce time spent on the computer, reading, or writing²⁵

MDPH has worked with the Department of Elementary and Secondary Education to provide guidance to schools regarding academic accommodation options. A link to this guidance can be found in the **Additional Resources** section.

²⁵ CDC: Heads Up to Schools, Know your Concussion ABCs, A Fact Sheet for School Nurses

A graduated return to play (extracurricular athletic activity) plan should involve a stepwise process from complete rest, to light exercise, to aerobic exercise, to no-contact training drills, and finally full-contact practice and game play.

The written graduated reentry plan should be kept in the student's medical record in the school health nurse office and also the athletic department office. Examples of both return to academics and return to play protocols can be found in the Sample Policies that follow.

To comply with the regulations, this section of the school's policies must address: which school personnel will be involved in the development of graduated reentry plans, how parents/guardians will be involved, who will monitor progress, and where the written plan will be kept.

There is substantial flexibility that may be incorporated into school/school district policies and procedures for graduated re-entry based upon local needs and resources. This is demonstrated in the sample policies below.

Graduated Reentry Plan Sample 1:

_____ School requires that all students returning to school and athletics after a concussion have a written plan for reentry. School staff, such as teachers, school nurses, counselors, administrators, speech-language pathologists, coaches and others should work together to develop and implement this plan in coordination with the student, their parent/guardian and the primary care provider.

Graduated return to academic plans are based on the stages of recovery framework that takes a student from rest to gradual return to full participation in academic activities.²⁶

Stages of Recovery:²⁷

The stages of recovery are a framework designed through a collaborative effort by local health care professionals. The purpose of

²⁶ Adapted from Marshfield Public Schools

²⁷ Based on the work of Dr. Janet Kent at South Shore Hospital; see www.southshorehospital.org/yhc/HeadSmart_Handbook.pdf

this framework is to create common language that will help guide students, families, school personnel and health professionals through the recuperation process. Placement in stages is based on assessment of the student's medical condition by a licensed medical professional and accompanied by written orders.

Red Stage (Usually 2 – 4 days, but could last weeks)

- Rest
- Students typically do not attend school

Orange Stage

- Rest
- Attend school half to full days
- Avoid school bus and heavy backpacks
- Work with designated educational personnel regarding school accommodations
- No tests in school
- No sports, band, chorus, physical education or outdoor recess

Yellow Stage

- Attend school full-time if possible
- Students and families work with teachers regarding homework deadlines (complete as much as possible)
- See school nurse for pain management and/or rest if needed
- Limit one quiz/test per day (untimed testing is recommended)
- Work in 15 minute blocks
- No sports
- Licensed medical professional will make decisions regarding band, chorus, physical education and outdoor recess (elementary level) based on medical assessment

Green Stage

- Attend school full-time
- Resume normal activities
- Resume sports once school work is back on track, student is symptom-free, and has been cleared by a licensed medical professional

Graduated return to athletic plans will begin only after a student has returned to full participation in academics and is completely symptom-free at rest.

Return to Play Schedule:²⁸

When a student athlete is completely symptom-free at rest and has the approval of a medical professional, she/he may begin a graduated return to play protocol. The return to play schedule for the student should proceed as follows and should be monitored by the athletic trainer.

Step 1: Light exercise, including walking or riding an exercise bike. No weight-lifting.

Step 2: Aerobic exercise such as running in the gym or on the field. No helmet or other equipment.

Step 3: Non-contact training drills in full equipment. Weight-training can begin.

Step 4: Full-contact controlled training followed by practice or training.

Step 5: Full-contact game play.

The written reentry plans will be signed by the student, their parent/guardian, the school nurse, the lead teacher/guidance counselor, athletic trainer and coach so that all parties are in agreement as to the plan for reentry. Frequent or periodic assessments by the school personnel including the nurse, athletic trainer, school physician or team physician as appropriate may be necessary until full return to classroom activities and extracurricular athletic activities are authorized by medical staff. A copy of the plan will be kept in the student's medical record.

Graduated Reentry Plans Sample Policy 2 (This is a sample return to play protocol for a school utilizing ImPACT testing for athletes):²⁹**Gradual Return to Play Protocol:**

Return to play will occur only after the following steps have been completed, **in the order** listed below:

1. Parent/Guardian reads and signs the Concussion Information and Gradual Return to Play Protocol.

²⁸ Adapted from Bourne School District, Marshfield Public Schools and NFHS

²⁹ Adapted from Northampton High School

2. Post injury ImPACT® test completed when athlete returns to school. Post injury ImPACT® test must be back to baseline before continuing with the Physical Post Concussion Tests. Parent/Guardian will be notified, and athlete referred to their health care provider, if first post injury ImPACT® test is not back to baseline. Post-injury ImPACT® test will continue every five(5) days until baseline is attained.
3. Athletic trainer verifies that the Physical Post Injury Tests were administered and the athlete was asymptomatic. Athlete must finish Physical Post Injury Tests, even if athlete has been cleared by their health care provider.
4. Athlete may not participate in practice or play until written clearance by an appropriate health care professional: physician (MD, DO) or nurse practitioner (NP) **AND** with completion of the Physical Post Injury Tests.
5. Completed signature form returned to athletic trainer.
6. Athlete reads and signs the Concussion Information.
7. Athletic trainer notifies coach and gives copies of completed form to director of athletics and school nurse.

Graduated Reentry Plans Sample Policy 3 (This is an additional sample of a return to play protocol):³⁰

Following a post-injury test, the certified athletic trainer will take the Concussion Information and Gradual Return to Play form (see link to this form in **Additional Resources**) signed by the parent(s) or legal guardian(s) and fill in the date of all post-injury tests taken by each student athlete.

The certified athletic trainer will also document the date in which the athlete is asymptomatic and sign the document agreeing that all the above statements are true and accurate.

³⁰ Adapted from Ludlow High School

Before the athlete starts on the exertional post concussions tests, the parents will be notified and the athlete will be sent home with all signed documents relating to head injury. At this time, the parent(s) or legal guardians must bring their student athlete to an a licensed physician, licensed neuropsychologist, nurse practitioner or other appropriately trained or licensed healthcare professional to be cleared for participation in their extracurricular activity. Alternatively, the certified athletic trainer may confer with the athlete's healthcare provider to obtain clearance for beginning the graduated reentry plan. Student athletes will also need to receive final medical clearance for Return to Play after they have completed their graduated re-entry plan. This medical clearance may only be provided by a licensed physician, neuropsychologist, nurse practitioner, or certified athletic trainer.

Student athletes who continue to exhibit concussion symptoms for a week or more must be evaluated by a physician before returning to play.

Once a student athlete's post-injury test is back at the student athlete's baseline score they will go through 5 days of Exertional Post Concussion Tests. The student athlete must be asymptomatic for all functional and physical tests to return to play (RTP). All tests will be administered by a certified athletic trainer.

Exertional Post Concussion Tests:

Test 1: (30% to 40% maximum exertion): Low levels of light physical activity. This will include walking, light stationary bike for about 10 to 15 minutes. Light isometric strengthening (quad sets, UE light hand weights, ham sets, SLR's, resistive band ankle strengthening) and stretching exercises.

Test 2: (40% to 60% maximum exertion): Moderate levels of physical activity. Treadmill jogging, stationary bike, or elliptical for 20 to 25 minutes. Light weight strength exercises (resistive band exercises UE and LE, wall squats, lunges, step up/downs). More active and dynamic stretching.

Test 3: (60% to 80% maximum exertion). Non-contact sports specific drills. Running, high intensity stationary bike or elliptical 25 to 30 minutes. Completing regular weight training. Start agility drills (ladder, side shuffle, zig-zags, carioca, box jumps, and hurdles).

Test 4: (80% maximum exertion). Limited, controlled sports specific practice and drills.

Test 5: Full contact and return to sport with monitoring of symptoms.

Graduated Reentry Plans Sample Policy 4 (This is an example of a return to play protocol that includes a signature from the parent, athletic trainer and student on the same form):

Northampton High School, Department of Athletics: CONCUSSION AND RETURN TO PLAY PROTOCOL

Physical Post Concussion Tests

The athlete will be given five physical post concussion tests administered by a certified athletic trainer. Only one test per day. Next test will be administered only when previous test is passed with no symptoms. These tests will take a minimum of five days.

Test 1: (To increase heart rate) Low levels of physical activity. This includes walking, light jogging, light stationary biking and light weight lifting (low weight, moderate reps, no bench, no squats).

Test 2: (To increase heart rate with movement) Moderate levels of physical activity with body/head movement. This includes moderate jogging, brief running, moderate intensity on the stationary cycle, moderate intensity weight lifting (reduce time and or reduces weight for the athlete's typical routine).

Test 3: Heavy non-contact physical activity. This includes sprinting/running, high intensity stationary cycling, completing the regular weight lifting routine, non-contact sport specific drills (agility with 3 planes of movement).

Test 4: Sports specific practice.

Test 5: Full contact in a controlled drill or practice.

Athlete's Name _____ Age _____ Date of Injury _____ Sport _____

Parent/Guardian Signature:

I have read the *Concussion and Return to Play Protocol* and I understand the seriousness of a concussion, its symptoms and the *Graduated Return to Play Protocol*. Questions? Call high school nurse at 413-587-1460 or athletic office at 413-587-1356.

Parent/Guardian Signature _____ Date _____

Test Completion Dates with Asymptomatic Results:

Test 1 _____ Test 2 _____ Test 3 _____ Test 4 _____ Test 5 _____

I verify that _____ (athlete's name) has completed the five physical post-concussion tests and said athlete was asymptomatic for all tests.

Certified Athletic Trainer Signature _____ Date _____

Athlete Signature

I have read and understand the *Concussion and Return to Play Protocol*, concussion symptoms, and the seriousness of a second concussion injury.

Athlete Signature _____ Date _____



Section 11: Providing Information, Forms and Materials to Parents and Athletes

Regulation 105 CMR 201.006(A)(11):

Procedure for providing information, and necessary forms and materials, to all parents and athletes including the: (a) annual training requirement, (b) procedure for the school to notify parents when an athlete has been removed from play for a head injury or suspected concussion sustained during an extracurricular athletic activity, (c) protocol for obtaining medical clearance for return to play and academics after a diagnosed concussion, (d) parent's responsibility for completion of the Pre-participation Form, or school-based equivalent, and (e) parent's responsibility for completion of the Report of a Head Injury Form, or school-based equivalent.

11a) Annual Training Requirement

Overview:

The MDPH regulations require that parents or legal guardians and students who participate in extracurricular athletic activity, as well as a variety of school personnel, receive MDPH-approved concussion training annually. (See Section 2 for details about training requirement and **Additional Resources** for links to approved training materials.) If schools wish to, they can provide this training in a pre-season meeting for parents and students. There are at least two strategies for providing such training in a pre-season meeting:

- Schools may offer one of the following on-line trainings: the Centers for Disease Control's (CDC) *Heads Up Concussion* training or the National Federation of State High School Association's (NFHS) *Concussion in Sports – What You Need to Know* training. Schools may use the agenda and attendance roster as a record of verification for participants who are trained in this type of group setting.
- Alternatively, schools may use MDPH approved written training materials to meet the training requirement. The versions for parents and students are available in English and Spanish. If schools distribute these training materials to parents and students at a pre-season meeting, all parents

and students should be asked to sign an acknowledgement verifying that they have reviewed the written materials.

There are additional options for providing such information, forms and materials to parents and athletes including:

- Mail to parents and students prior to school season;
- Training materials and forms posted to school's website;
- Training materials and forms included in student, parent and/or athletic handbook;
- Sending out email reminders to students/parents to fulfill annual training requirement;
- Coaches can provide information forms and video on concussion training to students in pre-season orientation.

Sample Policy 1:³¹

Parents/guardians and students who plan to participate in any athletic program at _____ School must also take a free on-line course. Two free on-line courses are available and contain all the information required by the law. The first is available through the National Federation of High School Coaches. You will need to click the "order here" button and complete a brief information form to register. At the end of the course, you will receive a completion receipt which should be provided to the coach or athletic director as documentation. The entire course, including registration, can be completed in less than 30 minutes: www.nfhslearn.com/electiveDetail.aspx?courseID=15000. The second on-line course is available through the Centers Disease Control at: www.cdc.gov/concussion/HeadsUp/online_training.html.

11b) Procedure for the School to Notify Parents When an Athlete Has Been Removed from Play for a Head Injury or Suspected Concussion

Overview:

The Department of Public Health intends that all student athletes and adults who are on the field during practice or competition will be educated

³¹ Adapted from Cambridge Public Schools

with the same basic information about the signs, symptoms and risks of concussion. Communication between families, athletic staff and health care providers is crucial to facilitate a student's prompt removal from play and referral for medical care and full recovery following a concussion.³² The following sample policies emphasize the importance of coordination and communication among athletic staff, parents and medical providers.

Sample Policy 1:³³

The athletic trainer, coach, school nurse and/or volunteers (EMS, sports physicians) should promptly inform the athlete's parents or guardians about the possible concussion during the day of the injury via telephone and/or email and give them the fact sheet on concussions. Give the parents the "Report of Head Injury During Sports Season Form" (or school-based equivalent) and explain to them they will need to complete it and return it to the school. Inform the parents that the student will have to be medically cleared by a medical professional before returning to play and the Post-Sports-Related Head Injury Medical Clearance and Authorization Form will need to be completed and returned to the school before the student can resume play.

Sample Policy 2:³⁴

If an athlete sustains a sports-related head injury, including a suspected concussion, the athletic trainer, school nurse, or coach will notify parents immediately and appropriate school staff within 24 hours of evaluating or learning of the injury. This protocol is the same for all home and away athletic events.

Sample Policy 3:³⁵

The athletic trainer or school nurse/physician will be responsible for contacting the athlete's parents and providing follow-up instructions. If the athlete is injured at an away event or if the athletic trainer is unavailable, the coaching staff are responsible for notifying the athlete's parents of the injury and, if warranted, call for emergency care. The student should be sent home with the

32 Adapted from Marshfield Public Schools

33 Adapted from Bridgewater-Raynham Regional School District

34 Adapted from the Dexter and Southfield Schools

35 Adapted from Paramus, New Jersey High School

“Report of Head Injury during Sports Season Form” as well as the “Post Sports-related Head Injury Medical Clearance and Authorization Form” or school-based equivalents.

11c) Protocol For Parents/Students to Obtain Medical Clearance for Return to Play and Academics After a Diagnosed Concussion

See also Section 8.

Overview:

The annual safety training for parents/guardians and athletes who participate in any extracurricular athletic activity as well as school policies should inform them of the school’s protocol on obtaining medical clearance for return to play. Options for schools to provide this information include:

- Mail to parents and students prior to school season;
- Medical clearance materials and forms posted to school’s website;
- Training materials and forms included in student, parent and/or athletic handbook;
- Distributing this information at pre-season; parents/student meetings, meetings with coaches, or in school assemblies;
- Coaches can provide information forms and videos on concussion training to students in pre-season orientation.

Sample Policy:

At _____ School parents and students are oriented about the protocol on obtaining medical clearance for return to play after a diagnosed concussion. In addition, our athletic handbook under the section for “Sports Concussion” contains our policies regarding sports concussion including obtaining medical clearance after a concussion. The website for the school at xxx.xxxxxxx.edu under the Athletic Department tab has a page on sports concussion that also details these protocols. Finally, parents and students can always call the athletic department office at xxx-xxx-xxxx or the school nurse office at xxx-xxx-xxxx to get further clarification or ask questions. No student will be allowed to return to play athletic activities until the medical clearance form is signed by authorized medical professional, submitted and reviewed by the school nurse.

11d) Parent’s Responsibility for Completion of the Pre-Participation Form or School-Based Equivalent

Overview:

The athletic director, coach, school nurse, athletic trainer or other designated school official are responsible for informing parents and students that the pre-participation form (or school-based equivalent) needs to be completed by the student and parent/guardian and returned to the athletic director, coach, school nurse, athletic trainer or other designated school official prior to the start of each sports season a student plans to participate. Schools have the following options to educate students and parents/guardians about the requirement to complete the pre-participation form, and to provide the form:

- Mail to parents and students prior to school season
- Training materials and forms posted to school’s website
- Training materials and forms included in student, parent and/or athletic handbook
- Sending out email reminders to students/parents to fulfill annual training requirement
- Providing this information at pre-season parents/student meetings or meetings with coaches
- Providing this information in school assemblies
- Coaches can provide information forms and video on concussion training to students in pre-season orientation
- A link to the MDPH **Pre-Participation Head Injury/Concussion Reporting Form** can be located in the **Additional Resources** section.

Sample Policy:

At _____ School’s annual meeting in the fall, parents and students are oriented about the requirement to submit the pre-participation form or school-based equivalent, signed by both student and parent, which provides a comprehensive history with up-to-date information relative to concussion history. It is the parent’s responsibility to tell all the student’s coaches and school nurse if the student has ever had a concussion via this form. In addition, our athletic handbook under the section for “Sports Concussion” includes our policies regarding sports concussion including the requirement to complete the pre-participation form

by student and parent at the start of every sports season. The website for the school at xxx.xxxxxxx.edu under the Athletic Department tab has a page on sports concussion that also details these protocols. Finally, parents and students can always call the athletic department office at xxx-xxx-xxxx or the school nurse office at xxx-xxx-xxxx to get further clarification or ask questions. These forms should be submitted to the athletic department office which copies and reviews them and then forwards them to the School Nurse Office for review. At the beginning of every sports season, no student will be allowed to participate in athletic activities until the pre-participation form is signed, submitted by parent and student and reviewed by designated staff annually.

11e) Parent’s Responsibility for Completion of the Report of a Head Injury Form, or School-Based Equivalent

Overview:

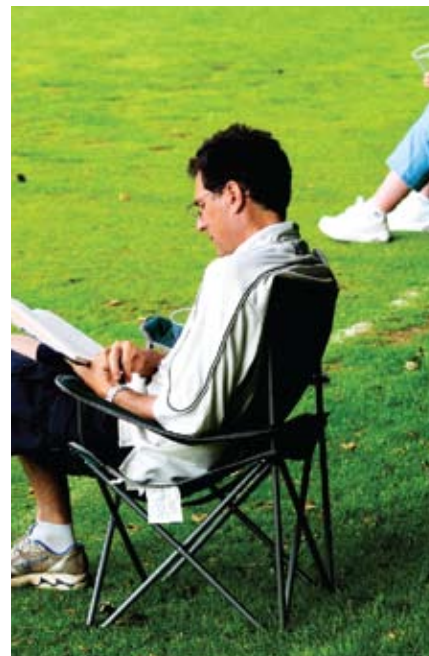
Options for educating parent/guardians about the requirement to complete the **Report of Head Injury During Sports Season Form** (or school-based equivalent) are:

- The School Nurse or other designated school official should track these forms and contact parents if they have not yet been returned
- Mail to parents and students prior to school season
- Training materials and forms posted to school’s website
- Training materials and forms included in student, parent and/or athletic handbook
- Sending out email reminders to parents to fill out Report of Head Injury form
- Providing these forms/information at pre-season parents/student meetings or meetings with coaches
- Providing this information in school assemblies
- Coaches can provide information forms and video on concussion training to students in pre-season orientation
- A link to the MDPH **Report of Head Injury During Sports Season Form** can be located in the **Additional Resources** section.

Sample Policy:

At _____ School's annual meeting in the fall, parents and students are oriented about the requirement to submit all forms including the **Report of Head Injury Form** (or school-based equivalent) signed by parent if their child has a head injury related to athletic activities. In addition, our athletic handbook under the section for "Sports Concussion" lists our policies regarding sports concussion including the requirement to complete and sign. The website for the school at xxx.xxxxxxx.edu under the Athletic Department tab has a page on sports concussion that also details these protocols. Finally, parents and students can always call the athletic department office at xxx-xxx-xxxx or the school nurse office at xxx-xxx-xxxx to get further clarification or ask questions. These forms should be submitted to the athletic department office which copies and reviews them and then forwards them to the School Nurse Office for review. At the beginning of every sports season, no student will be allowed to participate in athletic activities until all required forms including the report of head injury form has been signed, submitted by parent and reviewed by school nursing and athletic department staff.

Section 12: Inclusion of Sports- Related Head Injury Policy in the Student and Parent Handbook



Regulation 105 CMR 201.006(A)(12):
Inclusion in the student and parent handbooks of information regarding the sports-related head injury policy and how to obtain the policy.

Overview:

The Department of Public Health intends that all student athletes and adults who are on the field during practice or competition will be educated with the same basic information about the signs, symptoms and risks of concussion and required forms. Including this information in the student and parent handbooks will assist parents and students in becoming educated about the importance of the school's sports-related head injury policy.

Handbook Sample Policy 1:

_____ School has recently modified its student handbook, parent handbook, and athletic handbook that are distributed at the beginning of the school year to contain:

- Most recent Concussion information fact sheet (link in **Additional Resources** section)
- Links and information about annual training (link in **Additional Resources** section)
- _____ School's protocol/policies on sports-related head injuries
- **Pre-participation Head Injury/Concussion Reporting Form for Extracurricular Activities, Report of Head Injury During Sports Season Report Form, and Post Sports-related Head Injury Medical Clearance and Authorization Form** (or school-based equivalents)

Our handbooks with updated information sports-related concussion information are updated every other year and are also available at the school's website or within the school's website under the Athletic Department directory. Hard copies of these manuals are also available at the Athletic Director's Office at xxx-xxx-xxxx and/or School Principal's Office.

Handbook Sample Policy 2:³⁶

State Concussion Law Requirements

The Commonwealth of Massachusetts Executive Office of Health and Human Services requires that all high schools subject to the Massachusetts Interscholastic Athletic Association (MIAA) rules adhere to the following law:

Student athletes and their parents, coaches, athletic directors, school nurses, and physicians must learn about the consequences of head injuries and concussions through training programs and written materials. The law requires that athletes and their parents inform their coaches about prior head injuries at the beginning of the season. If a student athlete becomes unconscious, or is suspected of having a concussion, during a game or practice, the law now mandates taking the student out of play or practice, and requires written certification from a licensed medical professional for "return to play."

Parents and student-athletes who plan to participate in any sports program at _____ School must also take one free online course about concussions per school year. Two free online courses have been made available and contain all the information required by the law.

The first online course option is offered through the National Federation of High School Coaches. You will need to click the "order here" button and complete a brief information form to register. At the end of the course, you will receive a completion receipt. The entire course, including registration, can be completed in less than 30 minutes: www.nfhslearn.com/electiveDetail.aspx?courseID=15000

The second online course option is offered through the Centers for Disease Control and Prevention at: www.cdc.gov/concussion/HeadsUp/online_training.html

³⁶ Adapted From Archbishop Williams High School Student Athlete/Parent Handbook 2011-2012

Handbook Sample Policy 3:³⁷

Below is a form taken from the Archbishop William High School Athletic Department Student-Athlete/Parent Handbook 2011-2012 that requires parents and student-athletes to read the state's concussion law, complete one of the training classes listed and sign:

State Law Regarding Sports Related Head Injuries and Concussion

The Commonwealth of Massachusetts Executive Office of Health and Human Services requires that all high schools subject to the Massachusetts Interscholastic Athletic Association (MIAA) rules adhere to the following law:

Student-athletes and their parents, coaches, athletic directors, school nurses, and physicians must learn about the consequences of head injuries and concussions through training programs and written materials. The law requires that athletes and their parent inform their coaches about prior head injuries at the beginning of the season (See item H of section III page 2). If a student athlete becomes unconscious, or is suspected of having a concussion, during a game or practice, the law now mandates taking the student out of play or practice, and requires written certification from a licensed medical profession for "return to play".

Parents and student-athletes who plan to participate in any sports program at Archbishop Williams High School must also take one free online course about concussions per school year. Two free online courses have been made available and contain the information required by the law.

The first online course option is offered through the National Federation of High School Coaches. You will need to click the "order here" button and complete a brief information form to register. At the end of the course, you will receive a completion receipt. The entire course, including registration, can be completed in less than 30 minutes:

www.nfhslearn.com/electiveDetail.aspx?courseID=15000

The second online course option is offered through the Centers for Disease Control and Prevention at: www.cdc.gov/concussion/HeadsUp/online_training.html

Please sign below that you have read the above information regarding the state's concussion law and have completed one of the courses listed.

Signature of Student-Athlete _____ Date _____

Signature of Parent/Guardian _____ Date _____

This form, along with an updated physical, must be on file before the student can be allowed to participate.

³⁷ Adapted From Archbishop Williams High School Student Athlete/Parent Handbook 2011-2012



Section 13: Communicating with Parents with Limited English Proficiency

Regulation 105 CMR 201.006(A)(13):
*Procedure for communicating with parents with limited
English proficiency.*

Communicating with Parents Sample Policy 1:³⁸

Because of limited English skills, some parents may be unable to communicate with school personnel and may feel isolated from the school community. _____ School makes every attempt to communicate effectively with parents with limited English proficiency. _____ School has translated these school policies on head injuries and concussions in extracurricular athletic activities, the on-line training classes and the mandated forms³⁹ into Spanish, Portuguese and Chinese. These documents are listed on the _____ High School's Athletic Department website at xxx.xxxxxx.edu in all these languages. _____ School will translate other materials as requested. In the event a student receives a concussion or is suspected of having a concussion, _____ School Athletic Director's office should notify the parent in the appropriate language. Interpreters are available by contacting the Principal's office.

Communicating with Parents Sample Policy 2:⁴⁰

Because of limited English skills, some parents may be unable to communicate with school personnel and may feel isolated from

38 Adapted from Massachusetts Department of Public Health Comprehensive School Nurse Manual, 2007

39 These forms are the Pre-participation forms, Report of Head Injury Forms and Post Sports-related Head Injury Medical Clearance and Authorization form

40 Adapted from Massachusetts Department of Public Health Comprehensive School Nurse Manual, 2007, p. 16-5

the school community. _____ School makes every attempt to communicate effectively with parents with limited English proficiency. _____ School, which serves a diverse population, has a website with a Google translator so that all website materials can be translated into many languages. All sports injury-related materials including the on-line training classes, the CDC fact sheets on concussions and the required forms are available at _____ School's Athletic Department website at xxx.xxxxxx.edu. _____ School will translate, other materials as requested. In the event a student receives a concussion or is suspected of having a concussion, _____ School Athletic Director's office should notify the parent in the appropriate language. Interpreters are available by contacting the Principal's office.



Section 14:

Outreach to Parents for Form and Training Completion

Regulation 105 CMR 201.006(A)(14):

Procedure for outreach to parents who do not return completed forms required for students to participate in extracurricular sports and for how to handle situations where a student verifies completion of the annual training requirement but a parent has not.

Outreach to Parents Sample Policy 1:

Student Athletes at _____ School will not be permitted to participate in extracurricular sports until both the parent and student have completed and returned the signed **Pre-Participation Head Injury/Concussion Reporting Form** (or school-based equivalent) for Extracurricular Activities forms *before the start of every sports season*. In the event the school has not received the Pre-Participation Head Injury/Concussion Reporting Form or other required forms, including documentation of an annual physical examination and documentation that both the student athlete and their parent/guardian have completed the required annual training, _____ School will make three attempts to contact parent using the school's typical communication methods to parents (email, US mail, telephone, etc.). The student athlete will not be allowed to play or practice until the appropriate required signed and completed forms are returned to the Athletic Department.

Section 15:

Sharing Concussion-Related Health Information



Regulation 105 CMR 201.006(A)(15):

Procedure for sharing information concerning and athlete's history of head injury and concussion, recuperation, reentry plan, and authorization to return to play and academic activities on a need to know basis consistent with requirements of 105 CMR 201.000 and applicable federal and state law including but not limited to the Massachusetts Student Records Regulations, 603 CMR 23.00, and the Federal Family Educational Rights and Privacy Act Regulations, 34 CFR Part 99.

Overview:

Generally speaking, a patient's health information is confidential. There are multiple state and federal regulations governing sharing health information^{41,42,43}. Schools need to develop these policies so that they are consistent with these regulations and school personnel should always be cognizant of the confidentiality of health information. Some examples that schools may want to include in their policies are below. For a detailed description of confidentiality, see Chapter 2 of the MDPH Comprehensive School Health Manual: www.maclearinghouse.com/SchoolHealthManualSite/schoolhealthmanual.htm).

41 Consistent with requirements of 105 CMR 201.000 and applicable federal and state law including but not limited to the Massachusetts Student Records Regulations, 603 CMR 23.00, and the Federal Family Educational Rights and Privacy Act Regulations, 34 CFR Part 99.

42 603 CMR 23.07(3): "Subject to 603 CMR 23.00 authorized school personnel shall have access to the student records of student to whom they are providing services, when such access is required in the performance of their official duties." 603 CMR 23.07(4)(e): "A school may disclose information regarding a student to appropriate parties in connection with a health or safety emergency if knowledge of the information is necessary to protect the health or safety of the student or other individuals..." 603 CMR 23.07(4)(h): School health personnel and local and state health department personnel shall have access to student health records...when such access is required in the performance of official duties, without the consent of the eligible student or parent."

43 Federal Family Educational Rights and Privacy Act Regulations, 34 CFR Part 99.31(a) "An educational agency or institution may disclose personally identifiable information from an education record of a student without the consent required by section 99.30 if the disclosure meets one or more of the following conditions (1)(i)(A) The disclosure is to other school officials, including teachers, within the agency or institution whom the agency or institution has determined to have legitimate educational interests....(1)(B)(3)(ii) An educational agency or institution must use reasonable methods to ensure that school officials obtain access to only those education records in which they have legitimate educational interests..."

Sharing Information Sample Policy 1:⁴⁴

Informal collaboration occurs on a temporary, as-needed basis for information exchange, as when the school nurse informs (while adhering to protocols for confidentiality) the physical education teacher that a particular student may not participate in athletic activities because of a recent injury.⁴⁵ There may be circumstances in which there is a need to share information in the student health record with authorized school personnel – either to enhance the educational progress of the student or protect his/her safety or well-being. For example, staff may need to be alerted to signs or symptoms of a medical problem on a need to know basis and offered a course of action. This type of disclosure should be made only to those authorized school personnel who work *directly with* the student in an instructive (academic or athletic), administrative, or diagnostic capacity. Finally, authorized school personnel should be instructed not to re-disclose the information.

If there is any question about the sensitivity of the information, the school nurse should seek the permission of the parent/guardian and student, if appropriate, prior to disclosure to authorized school personnel. Ultimately, however, federal regulations permit information in the student health record to be seen by authorized school personnel on a need to know basis, and the basis for such sharing seems even more compelling when necessary to protect the well-being or safety of the student.⁴⁶ See Chapter 2 of the Comprehensive School Health Manual (www.macleavinghouse.com/SchoolHealthManualSite/schoolhealthmanual.htm) for further discussion of this issue.

There may be times when a school nurse has the legal obligation to disclose health or related information to protect a student's health or safety. Public policy requires the protection of a patient's right to privacy by medical professionals, unless there is an immediate threat or serious harm to the student or others.⁴⁷

44 Adapted from Massachusetts Department of Public Health Comprehensive School Nurse Manual, 2007

45 Massachusetts Department of Public Health Comprehensive School Health Manual, 2007, p. 2-7

46 Massachusetts Department of Public Health Comprehensive School Health Manual, 2007, p. 2-36

47 Massachusetts Department of Public Health Comprehensive School Health Manual, 2007, p. 2-38.

Section 16:

Requirements for Coaches, Athletic Trainers, Trainers and Volunteers

Regulation 105 CMR 201.006(A)(16):

Instructions to coaches, certified athletic trainers, trainers and volunteers: a) to teach form, techniques, and skills and promote protective equipment use to minimize sports-related head injury; and b) to prohibit athletes from engaging in any unreasonably dangerous athletic technique.

105 CMR 201.012(C)(6):

The Athletic Director shall be responsible for "Ensuring 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..."

105 CMR 201.013(A)(6) & (7):

Coaches shall be responsible for "(6) Teaching techniques aimed at minimizing sports-related head injury; (7) Discouraging and prohibiting athletes 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..."



16a) Teaching Strategies That Minimize Sports-Related Head Injury

Teaching Form and Techniques Sample Policy 1:

Coaches of _____ School are expected to be current with best practices in their sport that reduce the likelihood of head injury. In addition, coaches are prohibited from teaching or promoting dangerous practices such as using a helmet as a weapon. It is expected

that all coaches and athletic department staff teach techniques that minimize sports injury and/or concussion such as proper fitting, certified (especially helmets) equipment and protective equipment.

Teaching Form and Techniques Sample Policy 2:⁴⁸

Coaches, Athletic Directors and Athletic Trainers of _____

School should:

- Insist that safety comes first; develop, teach, implement and enforce safety rules
- Promote good officiating of the existing rules
- Emphasize to athletes and parents that playing with a concussion is dangerous
- Promote safe use of equipment *all year*; require that sports participants use the right protective equipment during all practices and games and that all equipment, particularly helmets, are properly fitted
- Maintain and improve the surfaces of playing fields; routinely conduct hazard assessments of the playground; walk the field before each practice or game to check for divots, uneven surfaces, loose goal posts or other conditions that could affect play; ensure that spaces and facilities for physical activity meet or exceed recommended safety standards for design, installation and maintenance
- Check all equipment to ensure it is up to manufacturer standards of quality and care and does not exceed expiration date
- Make sure athletes wear the right protective equipment for their activity (such as helmets, padding, shin guards, mouth protectors and eye and mouth guards); protective equipment should fit properly, be well maintained and certified, not be expired and be worn consistently and correctly
- Discourage others from pressuring injured athletes to play

⁴⁸ This section has been taken from a variety of sources including NFHS Brochure, CDC, Heads Up Concussion in Youth Sports, Massachusetts Department of Public Health School Nurse Manual, National Athletic Trainers' Association (NATA) and Washington Interscholastic Athletic Association (WIAA)

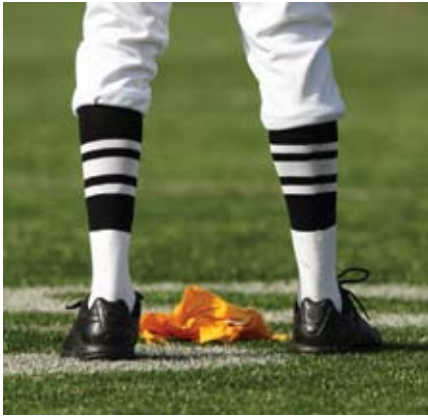
16b) Prohibiting Dangerous Play

Prohibiting Athletes from Dangerous Technique

Sample Policy:⁴⁹

Athletic directors and coaches of _____ School should enforce rules prohibiting dangerous moves (e.g., “spearing” or “horse collaring,” clothes-lining or helmet-to-helmet contact in football, or free-falling flips or swan dives from any type of toss, partner stunt or pyramid in cheerleading). In addition, coaches must ensure that student athletes learn proper checking/tackling techniques that are safe and minimize the risk of head injury. Athletic department staff should encourage students to follow the rules of play and to practice good sportsmanship at all times.

⁴⁹ Adapted from Massachusetts Department of Public Health Comprehensive School Nurse Manual, 2007



Section 17: Penalties

Regulation 105 CMR 201.006(A)(17):

Penalties, including but not limited to personnel sanctions and forfeiture of games, for failure to comply with provisions of the school district's or school's policy.

Overview:

Each school district should delineate what penalties they will have in place for failure to comply with the school or district's policy. This should include when the games should be forfeited (players do not have current physical examinations, failure of a coach to remove a player with a suspected concussion from the game, coaches' unwillingness to comply with any aspect of the regulations) and when other penalties will be invoked.

Penalties Sample Policy:

_____ School 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. The underlying philosophy of these policies is "when in doubt, sit them out." Failure to comply with the letter or spirit of these policies could result in progressive discipline for staff and/or forfeiture of games. If students or parents have concerns that the policies are being violated, they should contact the Superintendent or Headmaster and also place their complaint in writing with a request for resolution.

Additional Resources



Additional materials and resources about sports-related concussion are listed below, with links where they can be downloaded.

Fact sheet on Signs and Symptoms of Concussion:

www.mass.gov/eohhs/docs/dph/com-health/injury/sports-concussion-signs-symptoms.pdf

Approved Training Materials for Sports-related Concussion:

www.mass.gov/eohhs/docs/dph/com-health/injury/sports-concussion-training-materials.pdf

MDPH Pre-participation Head Injury/Concussion Reporting Form for Extracurricular Activities:

www.mass.gov/eohhs/docs/dph/com-health/injury/preparticipation-reporting-form.pdf

MDPH Report of Head Injury During Sports Season Form:

www.mass.gov/eohhs/docs/dph/com-health/injury/in-season-report-form.pdf

MDPH Post Sports-Related Head Injury Medical Clearance and Authorization Form:

www.mass.gov/eohhs/docs/dph/com-health/injury/posthead-injury-clearance-form.pdf

MDPH Regulations 105 CMR 201: Head Injuries and Concussions in Extracurricular Athletic Activities:

www.lawlib.state.ma.us/source/mass/cmr/cmrtxt/105CMR201.pdf

“Chapter 166 of the Acts of 2010”, An Act Relative to Safety Regulations for School Athletes:

www.malegislature.gov/Laws/SessionLaws/Acts/2010/Chapter166

Example of Post-Concussion Gradual Entry Plan: Sports New England 5-Step Program:

www.mass.gov/eohhs/docs/dph/com-health/injury/sports-concussion-gradual-entry-plan-example.pdf

MDPH Guidance on 504 or IEP Plans for Students Returning to Academic Work:

www.mass.gov/eohhs/docs/dph/com-health/injury/sports-504-plan-guidance.pdf

List of Useful Websites

www.mass.gov/eohhs/docs/dph/com-health/injury/sports-useful-websites.pdf

