

# **Bishop O’Dowd Head Injury and Concussion Management Packet**

Dear Parent/Guardian,

Your student-athlete has been assessed by a Certified Athletic Trainer (ATC) for a possible head injury and concussion sustained during athletic participation. This packet contains information regarding head injuries and concussions in general, the steps needed to be taken from this point forward, and contact information for assistance during the recovery process.

**This packet includes:**

- Head Injury and Concussion Information Sheet ..... pg 2
- Immediate Post Head Injury and Concussion Care ..... pg 4
- O’Dowd Head Injury and Concussion Return to Learn (RTL) Protocol ..... pg 5
- O’Dowd Head Injury and Concussion Return to Play (RTP) Protocol ..... pg 6
- Physician’s Letter to School ..... pg 8

If you have any questions or concerns, please contact the concussion management team:

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# Head Injury and Concussion Information Sheet

\*Modified from the CIF Concussion Information Sheet\*

## **Why am I getting this information sheet?**

You are receiving this information sheet about head injuries and concussions because of California state law AB25 (effective January 1, 2012), now Education Code §49475:

1. *The law requires a student-athlete who may have a concussion during a practice or a game to be removed from the activity for the remainder of the day.*
2. *Any student-athlete removed for this reason must receive a written note from a medical doctor trained in the management of concussion before returning to practice.*
3. *Before a student-athlete can start the season and begin practice in a sport, a concussion information sheet must be signed and returned to the school by the student-athlete and the parent or guardian.*

Every two years all coaches are required to receive training about concussions (AB1451), as well as certification in First Aid training, CPR and AED's.

## **What tools does O'Dowd use to manage potential concussions?**

As part of head injury and concussion management at O'Dowd, all student-athlete who participate in football, rugby, basketball, soccer, volleyball, water polo and lacrosse must take the C3Logix baseline test before participating. The program uses a computerized assessment measure to help determine when full recovery has occurred. C3Logix is a research-based software tool developed by the Cleveland Clinic utilized to evaluate recovery after concussion. C3Logix evaluates multiple aspects of physical and neurocognitive function, including memory, balance, attention, brain processing speed, reaction time, and post-concussion symptoms.

Those student-athletes in low or no contact sports are not required to baseline test but will be evaluated using the test if a concussion occurs. The athletic trainer uses this assessment along with other tools, physician recommendations and player self-reporting to determine when the student-athlete is ready to return to play.

## **What is a head injury and concussion and how would I recognize one?**

A head injury and concussion are a type of brain injury. They occur from forces applied directly or indirectly to the skull that result in the rapid acceleration and deceleration of the brain. Head injuries and concussions can appear in any sport and can look differently in each person.

*Most head injuries and concussions get better with rest and over 90% of student-athletes fully recover.* However, all head injuries and concussions should be considered serious. If not recognized and managed properly, they may result in problems including brain damage and even death. *Most head injuries and concussions occur without loss of consciousness ("knocked out").* Signs and symptoms of head injury and concussion (see list included) may present directly after the injury or may take several hours to appear. If your student-athlete reports any symptoms of head injury and concussion or if you notice any signs or symptoms, seek medical evaluation from your team's athletic trainer and a medical doctor trained in the evaluation and management of head injury and concussion. If your child is vomiting, has a severe headache, or is having difficulty staying awake or answering simple questions, call 911 or take your student immediately to the emergency department of your local hospital.

On the California Interscholastic Federation (CIF) website is a [Graded Concussion Symptoms Checklist](#). We use an electronic version of this through our concussion management software, C3Logix. If a head injury and concussion occurs, your student-athlete will fill this checklist out daily in the O'Dowd Athletic Training Room. The Graded Concussion Symptoms Checklist provides a list of symptoms that may present in the event of a head injury and concussion and completing it on a daily basis allows for comparison over time to make sure the student-athlete is recovering from the head injury and concussion.

### **What can happen if my student-athlete keeps playing with a head injury and concussion symptoms or returns too soon after getting a head injury and concussion?**

*Student-athletes with the signs and symptoms of head injury and concussion should be removed from play immediately.* There is **NO** same day return to play (RTP) for a student-athlete with a suspected head injury or concussion. Youth student-athletes may take more time to recover and are more prone to long-term serious problems from a head injury and concussion.

Even though a traditional brain scan (e.g. MRI or CT) may be “normal”, the brain has still been injured. Research studies show that a second blow before the brain has recovered can result in serious damage. If your student-athlete suffers another head injury or concussion before completely recovering from the first one, this can lead to prolonged recovery (weeks to months), or even to severe brain swelling (Second Impact Syndrome) with devastating consequences.

There is an increasing concern that head impact exposure and recurrent head injuries and concussions may contribute to long-term neurological problems. One goal of this head injury and concussion program is to prevent a too early RTP so that serious brain damage can be prevented.

### **How is Return to Play determined?**

Head injury and concussion symptoms should be completely alleviated for 48 hours before beginning the RTP protocol. A RTP progression involves a gradual, step-wise increase in physical effort, sports-specific activities and gradual increased risk for contact. If symptoms occur with activity, the progression should be stopped. When symptoms have resolved for another 24 hours, the progression may be restarted at the previous symptom-free stage.

RTP after head injury and concussion should occur only with authorization from a medical doctor (MD or DO only) trained in the evaluation and management of head injuries and concussions, and a step-wise progression program monitored by a certified athletic trainer or physician. The O’Dowd RTP protocol can be found on the Bishop O’Dowd High School website, or attached below.

### **Final Thoughts for Parents and Guardians**

*It is well known that high school student-athletes will often not talk about signs of concussions, which is why this information sheet is so important to review with them.* Teach your student-athlete to tell the coaching staff or athletic trainers if he or she experiences such symptoms, or if he or she suspects that a teammate has had a head injury or concussion. You should also feel comfortable talking to the coaching staff or athletic trainers directly about possible concussion signs and symptoms that you may be seeing in your student-athlete.

## Immediate Post Head Injury and Concussion Care

**\*\*NO DRUGS OF ANY KIND (TYLENOL, ADVIL, ETC) FOR 24 HOURS\*\***

A concussion (as defined by the National Athletic Trainers Association) is a trauma-induced alteration in mental status that may or may not involve loss of consciousness. Head injuries and concussions occur from forces applied directly or indirectly to the skull that result in the rapid acceleration and deceleration of the brain.

Possible symptoms experienced by the student-athlete	Possible signs observed by teammates, parents, or coaches
<ul style="list-style-type: none"> <li>● "Pressure in head"</li> <li>● Nausea or vomiting</li> <li>● Neck pain</li> <li>● Balance problems or dizziness</li> <li>● Blurred, double, or fuzzy vision</li> <li>● Sensitivity to light or noise</li> <li>● Feeling sluggish or slowed down</li> <li>● Feeling groggy or foggy</li> <li>● Drowsiness</li> <li>● Change in sleep patterns</li> <li>● Amnesia</li> <li>● "Don't feel right"</li> <li>● Fatigue or low energy</li> <li>● Sadness</li> <li>● Nervousness or anxiety</li> <li>● Irritability</li> <li>● More emotional</li> <li>● Confusion</li> <li>● Concentration or memory problems</li> <li>● Repeating the same question/comment</li> </ul>	<ul style="list-style-type: none"> <li>● Appears dazed</li> <li>● Vacant facial expression</li> <li>● Confused about assignment</li> <li>● Forgets plays</li> <li>● Is unsure of game, score, or opponent</li> <li>● Moves clumsily or displays incoordination</li> <li>● Answers questions slowly</li> <li>● Slurred speech</li> <li>● Shows behavior or personality changes</li> <li>● Can't recall events prior to hit</li> <li>● Can't recall events after hit</li> <li>● Seizures or convulsions</li> <li>● Any change in typical behavior or personality</li> <li>● Loses consciousness</li> </ul>

If any of the following symptoms intensify or begin **after** your student-athlete is released to you, call 911 or take your student-athlete to the emergency department **immediately**:

- Bleeding from the nose and/or ears
- Paralysis or marked weakness of limbs and facial muscles
- Drainage of fluids from nose and/or ears
- Loss of consciousness
- Vomiting

## Head Injury and Concussion Return to Learn (RTL) Protocol

In the Academic Support Department we have created a Return to Learn program for any student-athlete who has suffered a head injury or concussion. Here are the steps to follow if you or your student-athlete suffers a concussion:

Athletic Training and Academic Support departments have collaborated to create a comprehensive program assisting student-athletes in their Return to Play and Return to Learn. We feel that these processes go hand-in-hand. Bishop O'Dowd High School student-athletes will need to complete the RTP protocols outlined by the athletics department before returning to play.

If you have been referred to a doctor due to sustaining a possible concussion during your sports season, you must schedule a doctor's visit within 72 hours to determine the diagnosis. The doctor needs to complete the attached Physician's letter and a copy of this letter must be given directly to either Joanne Kinyon, Kiah Sundermeir, or Malik McCord.

For student-athletes who do not play athletics for Bishop O'Dowd and suffer a concussion:

1. Schedule a doctor's visit to determine the diagnosis. The doctor's diagnosis should include a note stating athletic and academic status (this may include academic accommodations during recovery).
2. Give a copy of the O'Dowd Physician's Letter to Malik McCord.

### Academics:

In order to receive academic accommodations, you must turn in a doctor's note to Malik McCord. Upon receiving all necessary paperwork, Malik McCord will communicate the student-athlete's situation and recommended academic accommodations to teachers. It is essential that you meet with Malik McCord frequently to update him on your symptoms and progress. Malik McCord will assist student-athletes with creating a plan to catch up on work, and student-athletes must follow-up with teachers and complete all work within the agreed upon timeframe.

No note, no accommodations!

Contact: Malik McCord (510) 577-9100 ext.114 or [mmccord@bishopodowd.org](mailto:mmccord@bishopodowd.org)

### **Concussion Management Program: Return to Learn Phases**

Phase 1: No school, full cognitive rest

Phase 2: Half day attendance with accommodations

Phase 3: Full day attendance with accommodations

Phase 4: Full day attendance without accommodations

Phase 5: Full school and extracurricular involvement (Must be cleared by doctor and if student-athlete is participating in Bishop O'Dowd athletics, must also complete Bishop O'Dowd Return to Play protocols. student-athlete must have completed all academic accommodations before beginning stage I of the athletic return to play protocol).

## Athletic Head Injury and Concussion Return to Play (RTP) Protocol

The goal of this protocol is to safely return the student-athlete to play following a head injury or concussion through the implementation of a comprehensive concussion management program.

Head injuries and concussions are dangerous and life threatening injuries and it is imperative that they are handled appropriately. All suspected head injuries and concussions must be referred to the Certified Athletic Trainer or a physician that specialize in concussion management.

California state law currently states that any student-athlete suspected of sustaining a head injury or concussion must be removed from play. The student-athlete may not return until cleared by a licensed health care provider (MD or DO only) that is trained in the evaluation and management of head injuries and concussions. State Law AB2127 states that return-to-play cannot be sooner than seven days after evaluation by a physician who has made the diagnosis of concussion.

You will need to make an appointment with a physician that is trained in concussions (this may be your regular physician) for full clearance. The same doctor who sees you for your initial, non-emergency evaluation, must provide clearance, unless you are referred to a specialized doctor such as a neurologist.

In addition, the student-athlete must complete the graduated return-to-play protocol set forth by the CIF to return to full competition. Head injury and concussion RTP protocol cannot begin until the student-athlete is symptom-free for 48 hours.

O'Dowd expects any student-athlete entered into the concussion management program by a physician to complete the return-to-play protocol IN ITS ENTIRETY. In the event of discrepancies, more communication with the doctor may be required and parents may be asked to provide authorization for that communication. In the event they are unable to provide authorization, the student-athlete will be required to complete the O'Dowd RTP protocol in its entirety.

Student-athletes will be expected to return the O'Dowd "Physician's Letter" form located in the post-concussion packet emailed to you, given to you in person, and located on the website. **Student-athletes will not be cleared without this form signed and returned by your diagnosing physician.**

### Instructions:

This graduated return to play protocol **MUST** be completed before you can return to FULL COMPETITION.

- A certified athletic trainer (ATC) or a physician must monitor your progression through each stage.
- Stages 0 through IV take a minimum of 6 days to complete.
- You must be back to normal academic activities before beginning Stage I, unless otherwise instructed by your physician.
- You must complete one full practice without restrictions (Stage V) before competing in first game.

After Stage I, you cannot progress more than one stage per day (or longer if instructed by your physician).

If symptoms return at any stage in the progression, IMMEDIATELY STOP any physical activity and follow up with your school's athletic trainer, or your physician. In general, if you are symptom-free the next day, return to the previous stage where symptoms had not occurred. Seek further medical attention if you cannot pass a stage after 3 attempts due to concussion symptoms, or if you feel uncomfortable at any time during the progression.

You must have written physician (MD/DO) clearance to begin and progress through the following Stages as outlined below, or as otherwise directed by your physician. <u>Minimum</u> of 6 days to pass Stages I through IV.				
Date & Initials	Stage	Activity	Exercise Example	Objective of the Stage
	0	No physical activity for at least 2 full symptom-free days	<ul style="list-style-type: none"> <li>No activities requiring exertion (weight lifting, jogging, PE classes)</li> <li>student-athlete will take C3Logix Follow up test within 24-48 hours following a concussion.</li> </ul>	<ul style="list-style-type: none"> <li>Recovery and elimination of symptoms</li> </ul>
	I	Light aerobic activity	<ul style="list-style-type: none"> <li>20 minutes of stationary biking</li> </ul> <b>Must be performed under direct supervision of the athletic training staff.</b>	<ul style="list-style-type: none"> <li>Increase heart rate to no more than 50% of perceived maximum exertion (e.g. &lt;100 beats per minute)</li> <li>Monitor for symptom return</li> </ul>
	II	Moderate aerobic activity ( <i>Light resistance training</i> )	<ul style="list-style-type: none"> <li>30 min increased effort stationary biking</li> <li>Body weight exercises (squats, planks, push-ups) max 1 set of 10, no more than 10 mins total</li> </ul> <b>Must be performed under direct supervision of the athletic training staff.</b>	<ul style="list-style-type: none"> <li>Increase heart rate to 50-75% max exertion (e.g. 100-150 bpm)</li> <li>Monitor for symptom return</li> </ul>
	III	Strenuous aerobic activity ( <i>Moderate resistance training</i> )	<ul style="list-style-type: none"> <li>30-45 min running or stationary biking, OR:</li> <li>Weight lifting " 50% of max weight"</li> <li>C3Logix Post Injury re-assessment</li> </ul>	<ul style="list-style-type: none"> <li>Increase heart rate to &gt;75% max exertion</li> <li>Monitor for symptom return</li> </ul>
	IV	Non-contact training with sport-specific drills ( <i>No restrictions for weightlifting</i> )	<ul style="list-style-type: none"> <li>Non-contact drills, sport-specific activities (cutting, jumping, sprinting)</li> <li>No contact with people, padding or the floor/mat</li> </ul>	<ul style="list-style-type: none"> <li>Add total body movement</li> <li>Monitor for symptom return</li> </ul>
	V	Limited contact practice	<ul style="list-style-type: none"> <li>Controlled contact drills allowed (no scrimmaging)</li> </ul>	<ul style="list-style-type: none"> <li>Increase acceleration, deceleration and rotational forces</li> <li>Restore confidence, assess readiness for return to play</li> <li>Monitor for symptom return</li> </ul>
		Full contact practice Full unrestricted practice	<ul style="list-style-type: none"> <li>Return to normal training, with contact</li> <li>Return to normal unrestricted training</li> </ul>	
<ul style="list-style-type: none"> <li><b>MANDATORY:</b> You must complete at least ONE contact practice before return to competition, or if non-contact sport, ONE unrestricted practice.</li> </ul>				
	VI	Return to play (competition)	<ul style="list-style-type: none"> <li>Normal game play (competitive event)</li> </ul>	<ul style="list-style-type: none"> <li>Return to full activity without restrictions</li> </ul>

Modified from CIFstate.org 05/2015

## Physician Letter to School

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

<b>INJURY STATUS</b>
<p>_____ This student-athlete was evaluated by an MD/DO and is determined to NOT have a concussion.</p>
<b>ACADEMIC STATUS</b>
<p>This student-athlete is not/no longer experiencing any signs or symptoms of concussion and may be released to full academic participation.</p>
<b>PHYSICAL ACTIVITY STATUS</b>
<p>This student-athlete has medical clearance for unrestricted athletic participation.</p>

<b>ACADEMIC SUPPORT CONTACT</b>
<p>Academic Concussion Management Malik McCord (mmccord@bishopodowd.org)</p>
<b>PHYSICAL ACTIVITY SUPPORT CONTACT</b>
<p>Head Athletic Trainer Joanne Kinyon MA, ATC, CSCS (jkinyon@bishopodowd.org)</p> <p>Assistant Athletic Trainer Kiah Sundermeir MA, ATC (ksundermeir@bishopodowd.org)</p>

<b>INJURY STATUS</b>
<b>Date of Diagnosis:</b>
<p>_____ This student-athlete was evaluated by an MD/DO, is diagnosed with a concussion, and is under our care. Medical follow up evaluation is scheduled for: _____</p>
<b>ACADEMIC STATUS</b>
<p>_____ This student-athlete is not to return to school until: _____</p> <p>_____ This student-athlete may begin to return to school based on the successful progression through the O'Dowd Concussion Return-to-Learn Protocol. Specific restrictions are as follows: _____ _____</p> <p>_____ This student-athlete has no academic restrictions.</p>
<b>PHYSICAL ACTIVITY STATUS</b>
<p>_____ This student-athlete is not to participate in physical activity of any kind except for untimed, voluntary walking <b>*(Follow up appt. required)*</b>.</p> <p>_____ Once symptom free, this student-athlete may begin the 7 day graduated O'Dowd Return-to-Play Protocol that is in accordance with CA state law and under the supervision of certified athletic trainers.</p>

Physician (MD/DO) Signature: \_\_\_\_\_

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

Physician Stamp and Contact Information:

Parent/Guardian Acknowledgement Signature: \_\_\_\_\_

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