

New York State Concussion Management and Awareness Act (update 7.1.23)

Key Legislative Guidelines

Schools must provide a course of instruction on concussions and appropriate responses to suspected concussions that is taken by all school coaches, physical education teachers, nurses and athletic trainers on a biennial basis.

Schools must include information on concussions in any permission form or parent/guardian consent form required for a student's participation in interscholastic sports. The information must include, but not be limited to:

- the definition of "concussion";
- signs and symptoms of mild traumatic brain injuries and how such injuries may occur;
- and guidelines for return to school and certain school activities after a pupil has suffered a concussion, regardless of whether the injury occurred outside of school.

Schools should also either post such information on their websites or inform parents how they can obtain such information from the websites of the State Education Department and the Department of Health.

Schools must immediately remove from athletic activities any student believed to have sustained a concussion. If there is any doubt as to whether the student has sustained a concussion, school districts must operate on the presumption that the student has a concussion. Students are not permitted to resume athletic activity unless they have been symptom-free for at least 24 hours, been evaluated by a licensed physician and received the physician's written, signed authorization clearing them. Consistent with the student's treating physician's directives, guidelines must be established for limitations and restrictions on school attendance and activities after sustaining a concussion



CONCUSSION MANAGEMENT

Martin Luther School recognizes that concussions and head injuries are commonly reported injuries in children and adolescents who participate in sports and recreational activity and can have serious consequences if not managed carefully. Therefore, Martin Luther School has adopted the following policy to support the proper evaluation and management of head injuries.

Concussion is a mild traumatic brain injury. Concussion occurs when normal brain functioning is disrupted by a blow or jolt to the head. Recovery from concussion will vary. Avoiding re-injury and over-exertion until fully recovered are the cornerstones of proper concussion management.

While staff will exercise reasonable care to protect students, head injuries may still occur. Physical education teachers, coaches, nurses and other appropriate staff receive training to recognize the signs, symptoms and behaviors consistent with a concussion. Information is available on the school's website and is provided for participating in interscholastic sports and addressed in physical education classes.

Martin Luther School's concussion coordinator is Ms. Ann Boyle, athletic director and can be reached at aboyle@martinluthernyc.org or at 718-894-4000 ext. 127. Ms. Boyle will assist parents/guardians and students in the process of handling a concussion within the context of school and athletics.

Any student exhibiting those signs, symptoms or behaviors while participating in a school sponsored class, extracurricular activity, or interscholastic athletic activity shall be removed from the game or activity and be evaluated as soon as possible by an appropriate health care professional. The athletic director, coach, teacher or other supervising adult will notify the student's parents or guardians and recommend appropriate monitoring and medical evaluation.

If a student sustains a concussion at a time other than when engaged in a school-sponsored activity, the school expects the parent/ guardian to report the condition to the athletic director so that the school can support the appropriate management of the condition.

The student shall not return to school or activity until authorized to do so by an appropriate health care professional. The school's athletic director will make the final decision on return to activity including physical education class and after-school sports. Any student who continues to have signs or symptoms upon return to activity must be removed from play and reevaluated by their health care provider.

Any parental consent forms required for participation in athletics will include information on head injuries. Parents/guardians are encouraged to obtain a baseline concussion test for their child. The athletic director will develop regulations and protocols to guide the return to activity. The school shall periodically review this policy to ensure its continued compliance with state regulations and guidance.

New York State Scholastic Athlete

Fact Sheet on Concussions

What is a concussion?

A concussion is a brain injury that:

- Is caused by a blow to the head or body, from contact with another player, hitting a hard surface such as the ground, ice or floor, or being hit by a piece of equipment.
- · Can change the way your brain normally works.
- Can range from mild to severe.
- Presents itself differently for each athlete.
- Can occur during practice or competition in ANY sport.
- Can happen even if you do not lose consciousness.

What are the symptoms of a concussion?

You can't see a concussion, but you might notice some of the symptoms right away. Other symptoms can show up hours or days after the injury.

Concussion symptoms include:

- Amnesia
- Confusion
- Headache
- Loss of consciousness
- Balance problems or dizziness
- Double or fuzzy vision
- Sensitivity to light or noise
- Nausea (feeling that you might vomit)
- Feeling sluggish, foggy or groggy
- · Feeling unusually irritable
- Concentration or memory problems (forgetting game plays, facts, meeting times)
- Slowed reaction time

Exercise or activities that involve a lot of concentration, such as studying, working on the computer, or playing video games may cause concussion symptoms (such as headache or tiredness) to reappear or get worse.

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

- **Don't hide it.** Tell your athletic trainer, coach, and parents. Never ignore a blow to the head. Also, tell your athletic trainer and coach if one of your teammates might have a concussion. Sports have injury timeouts and player substitutions so that you can get checked out.
- **Report it.** Do not return to participation in a game, practice or other activity with symptoms. The sooner you get checked out, the sooner you may be able to return to play.
- **Get checked out.** Your physician, athletic trainer, or health care professional can tell you if you have had a concussion and when you are cleared to return to play. A concussion can affect your ability to perform everyday activities, your reaction time, balance, sleep, and classroom performance.
- Take time to recover. If you have had a concussion, your brain needs time to heal. While your brain is still healing, you are much more likely to have a repeat concussion. In rare cases, repeat concussions can cause permanent brain damage, and even death. Severe brain injury can change your whole life. Once cleared to resume activity by the physician, you will follow a Return-To-Play Protocol.

How can I prevent a concussion?

Basic steps you can take to protect yourself from concussion:

- Do not initiate contact with your head or helmet. You can still get a concussion if you are wearing a helmet.
- Avoid striking an opponent in the head. Undercutting, flying elbows, stepping on a head, checking an unprotected opponent, and sticks to the head all cause concussions.
- Follow your athletics department's rules for safety and the rules of the sport.
- Practice good sportsmanship at all times.
- Practice and perfect the skills of the sport.

Addendum Reference: 2010 NCAA Concussion Fact Sheet for Student-Athletes

Additional Resources:

CDC - Center for Disease Control - Heads Up https://www.cdc.gov/headsup/index.html

New York State Center for School Health -Concussion | Mild Traumatic Brain Injury (mTBI)

NYSED - Guidelines for Concussion Management In Schools July 2022

NYS DOH - Sports-Related Concussion

NYSPHSAA-NEW YORK STATE PUBLIC HIGH SCHOOL ATHLETIC ASSOCIATION https://nysphsaa.org/sports/2021/6/8/safety.aspx



Concussions: The Invisible Injury

Student and Parent Information Sheet

CONCUSSION DEFINITION

A concussion is a reaction by the brain to a jolt or force that can be transmitted to the head by an impact or blow occurring anywhere on the body. Essentially a concussion results from the brain moving back and forth or twisting rapidly inside the skull.

FACTS ABOUT CONCUSSIONS ACCORDING TO THE CENTER FOR DISEASE CONTROL (CDC)

- An estimated 4 million people under age 19 sustain a head injury annually. Of these approximately 52,000 die and 275,000 are hospitalized.
- An estimated 300,000 sports and recreation related concussions occur each year.
- Students who have had at least one concussion are at increased risk for another concussion.

In New York State in 2009, approximately 50,500 children under the age of 19 visited the emergency room for a traumatic brain injury and of those approximately 3,000 were hospitalized.

REQUIREMENTS OF SCHOOL DISTRICTS

Education:

- Each school coach, physical education teacher, nurse, and athletic trainer will have to complete an approved course on concussion management on a biennial basis, starting with the 2012-2013 school year.
 - * School coaches and physical education teachers must complete the CDC course.
 - (www.cdc.gov/concussion/HeadsUp/online_training.html)
 - * School nurses and certified athletic trainers must complete the concussion course. (http://preventingconcussions.org)

Information:

- Provide concussion management information and sign off with any parental permission form.
- The concussion management and awareness information or the State Education Department's web site must be made available on the school web site, if one exists.

Removal from athletics:

- Require the immediate removal from athletic activities of any pupil that has or is believed to have sustained a mild traumatic brain injury.
- No pupils will be allowed to resume athletic activity until they have been symptom free for 24 hours and have been evaluated by and received written and signed authorization from a licensed physician. For interscholastic athletics, clearance must come from the school medical director.
 - * Such authorization must be kept in the pupil's permanent heath record.
 - * Schools shall follow directives issued by the pupil's treating physician.

SYMPTOMS

Symptoms of a concussion are the result of a temporary change in the brain's function. In most cases, the symptoms of a concussion generally resolve over a short period of time; however, in some cases, symptoms will last for weeks or longer. Children and adolescents are more susceptible to concussions and take longer than adults to recover.

It is imperative that any student who is suspected of having a concussion is removed from athletic activity (e.g. recess, PE class, sports) and remains out of such activities until evaluated and cleared to return to activity by a physician.

Symptoms include, but are not limited to:

- Decreased or absent memory of events prior to or immediately after the injury, or difficulty retaining new information
- Confusion or appears dazed
- Headache or head pressure
- Loss of consciousness
- Balance difficulties, dizziness, or clumsy movements
- Double or blurry vision
- Sensitivity to light and/or sound
- Nausea, vomiting and/or loss of appetite
- Irritability, sadness or other changes in personality
- · Feeling sluggish, foggy or light-headed
- Concentration or focusing problems
- Drowsiness
- Fatigue and/or sleep issues sleeping more or less than usual

Students who develop any of the following signs, or if signs and symptoms worsen, should be seen and evaluated immediately at the nearest hospital emergency room.

- Headaches that worsen
- Seizures
- Looks drowsy and/or cannot be awakened
- Repeated vomiting
- Slurred speech
- Unable to recognize people or places
- · Weakness or numbing in arms or legs, facial drooping
- Unsteady gait
- Change in pupil size in one eye
- Significant irritability
- Any loss of consciousness
- Suspicion for skull fracture: blood draining from ear or clear fluid from the nose

STATE EDUCATION DEPARTMENT'S GUIDANCE FOR CONCUSSION MANAGEMENT

Schools are advised to develop a written concussion management policy. A sample policy is available on the NYSPHSAA web site at www.nysphsaa.org. The policy should include:

- A commitment to reduce the risk of head injuries.
- A procedure and treatment plan developed by the district medical director.
- A procedure to ensure proper education for school nurses, certified athletic trainers, physical education teachers, and coaches.
- A procedure for a coordinated communication plan among appropriate staff.
- A procedure for periodic review of the concussion management program.

RETURN TO LEARN and RETURN TO PLAY PROTOCOLS

Cognitive Rest: Activities students should avoid include, but are not limited to, the following:

- Computers and video games
- Television viewing
- Texting
- Reading or writing
- Studying or homework
- Taking a test or completing significant projects
- Loud music
- Bright lights

Students may only be able to attend school for short periods of time. Accommodations may have to be made for missed tests and assignments.

Physical Rest: Activities students should avoid include, but are not limited to, the following:

- Contact and collision
- High speed, intense exercise and/or sports
- High risk for re-injury or impacts
- Any activity that results in an increased heart rate or increased head pressure

Return to Play Protocol once symptom free for 24 hours and cleared by School Medical Director:

- Day 1: Low impact, non strenuous, light aerobic activity.
- Day 2: Higher impact, higher exertion, moderate aerobic activity. No resistance training.
- Day 3: Sport specific non-contact activity. Low resistance weight training with a spotter.
- Day 4: Sport specific activity, non-contact drills. Higher resistance weight training with a spotter.
- Day 5: Full contact training drills and intense aerobic activity.
- Day 6: Return to full activities with clearance from School Medical Director.

Any return of symptoms during the return to play protocol, the student will return to previous day's activities until symptom free.

CONCUSSION MANAGEMENT TEAM

Schools may, at their discretion, form a concussion management team to implement and monitor the concussion management policy and program. The team could include, but is not limited to, the following:

- Students
- Parents/Guardians
- School Administrators
- Medical Director
- Private Medical Provider
- School Nurse
- Director of Physical Education and/or Athletic Director
- Certified Athletic Trainer
- Physical Education Teacher and/or Coaches
- Classroom Teachers

OTHER RESOURCES

New York State Education Department

http://www.p12.nysed.gov/sss/schoolhealth/schoolhealthservices

- New York State Department of Health http://www.health.ny.gov/prevention/injury_prevention/concussion/htm
- New York State Public High School Athletic Association www.nysphsaa.org/safety/
- Center for Disease Control and Prevention http://cdc.gov/TraumaticBrainInjury
- National Federation of High Schools www.nfhslearn.com – The FREE Concussion Management course does not meet education requirement.
- · Child Health Plus

http://www.health.ny.gov/health_care/managed_care/consumer_guide/about_child_health_plus.htm

 Local Department of Social Services – New York State Department of Health

http://www.health.ny.gov/health_care/medicaid/ldss/htm

- Brain Injury Association of New York State http://www.bianys.org
- Nationwide Children's Hospital Concussions in the Classroom

http://www.nationwidechildrens.org/concussions-in-the-classroom

- Upstate University Hospital Concussions in the Classroom http://www.upstate.edu/pmr/healthcare/programs/concussion/classroom.php
- ESPN Video Life Changed by Concussion http://espn.go.com/video/clip?id=7525526&categoryid=5595394
- SportsConcussions.org
 http://www.sportsconcussions.org/ibaseline/
- American Association of Neurological Surgeons http://www.aans.org/Patient%20Information/Conditions%20 and%20Treatment/Concussion.aspx
- Consensus Statement on Concussion in Sport Zurich http://sportconcussions.com/html/Zurich%20Statement.pdf

A FACT SHEET FOR Parents





What is a concussion?

A concussion is a type of brain injury that changes the way the brain normally works. A concussion is caused by a bump, blow, or jolt to the head. Concussions can also occur from a blow to the body that causes the head and brain to move rapidly back and forth. Even what seems to be a mild bump to the head can be serious. Concussions can have a more serious effect on a young, developing brain and need to be addressed correctly.

What are the signs and symptoms of a concussion?

You can't see a concussion. Signs and symptoms of concussion can show up right after an injury or may not appear or be noticed until hours or days after the injury. It is important to watch for changes in how your child or teen is acting or feeling, if symptoms are getting worse, or if s/he just "doesn't feel right." Most concussions occur without loss of consciousness.

If your child or teen reports one or more of the symptoms of concussion listed below, or if you notice the signs or symptoms yourself, seek medical attention right away. Children and teens are among those at greatest risk for concussion.

Signs & Symptoms of a Concussion

Signs Observed by Parents or Guardians

- Appears dazed or stunned
- Is confused about events
- Answers questions slowly
- · Repeats questions
- Can't recall events prior to hit, bump, or fall
- Can't recall events *after* hit. bump, or fall
- Loses consciousness (even briefly)
- Shows behavior or personality changes
- Forgets class schedule or assignments

Symptoms Reported by Your Child or Teen

Thinking/Remembering

- Difficulty thinking clearly
- Difficulty concentrating or remembering
- Feeling more slowed down
- Feeling sluggish, hazy, foggy, or groggy

Physical

- · Headache or "pressure" in head
- · Nausea or vomiting
- Balance problems or dizziness
- · Fatigue or feeling tired
- · Blurry or double vision
- Sensitivity to light or noise
- · Numbness or tingling
- · Does not "feel right"

Emotional

- Irritable
- Sad
- More emotional than usual
- Nervous

Sleep*

- Drowsy
- Sleeps *less* than usual
- Sleeps more than usual

*Only ask about sleep symptoms f the injury occurred on a prior day



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Danger Signs

Be alert for symptoms that worsen over time. Your child or teen should be seen in an emergency department right away if she or he has one or more of these danger signs:

- One pupil (the black part in the middle of the eye) larger than the other
- Drowsiness or cannot be awakened
- A headache that gets worse and does not go away
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Difficulty recognizing people or places
- Increasing confusion, restlessness, or agitation
- Unusual behavior
- · Loss of consciousness (even a brief loss of consciousness should be taken seriously)

Children and teens with a suspected concussion should **NEVER** return to sports or recreation activities on the same day the injuried occurred.

They should delay returning to their activities until a healthcare provider experienced in evaluating for concussion says it's OK to return to play. This means, until permitted, not returning to:

- Physical Education (PE) class
- Sports practices or games
- Physical activity at recess



What should I do if my child or teen has a concussion?

1. Seek medical attention right away.

A healthcare provider experienced in evaluating for concussion can determine how serious the concussion is and when it is safe for your child or teen to return to normal activities, including physical activity and school (concentration and learning activities).

2. Help them take time to get better.

brain needs time to heal. Your child or teen may need to limit activities while s/he is recovering from a concussion. Exercising or activities that involve a lot of concentration, such as studying, working on the computer, or playing video games may cause concussion symptoms (such as headache or tiredness) to reappear or get worse. After a concussion, physical and cognitive activities—such as concentration and learning should be carefully managed and monitored by a healthcare provider.

Your child may feel frustrated, sad, and even angry because s/he cannot return to recreation and sports right away, or cannot keep up with schoolwork. Your child may also feel isolated from peers and social networks. Talk often with your child about these issues and offer your

If your child or teen has a concussion, her or his

3. Talk to your child or teen about how they are feeling.

support and encouragement.

How can I help my child return to school safely after a concussion?

Most children can return to school within a few days. Help your child or teen get needed support when returning to school after a concussion. Talk with your child's teachers, school nurse, coach. speech-language pathologist, or counselor about your child's concussion and symptoms.

Your child's or teen's healthcare provider can use CDC's Letter to Schools to provide strategies to help the school set up any needed supports.

As your child's symptoms decrease, the extra help or support can be removed gradually. Children and teens 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
- · Reduce time spent reading, writing, or on the computer
- · Sit out of physical activities, such as recess, PE, and sports until approved by a healthcare provider
- · Complete fewer assignments
- Avoid noisy and over-stimulating environments



To learn more, go to www.cdc.gov/HEADSUP or call 1.800.CDC.INFO