

Lewiston-Porter Central Schools

Concussion Management Policy and Procedures

- 1.) Athlete is to be immediately removed from their sport due to a head injury or displaying concussion like signs and/or symptoms. Athlete will then be evaluated by a trained health care professional which may include, but not limited to, an athletic trainer, school nurse, school physician or the athlete's primary care physician. Computer-based evaluations will be available in the athletic training room using Standardized Assessment of Concussion (SAC) software.
- 2.) In the event a head injury is confirmed, the school athletic trainer will monitor the athlete's progress through the use of computer-based testing and physical evaluation. The results will be made available to the school nurse, school physician, and the overseeing physician of the athlete. Parents will also be notified immediately in the event of a head injury.
- 3.) All evaluations by the athletic trainer must be documented. The student athlete and family will be responsible for obtaining all school documentation and providing it for any follow-up medical evaluations. They must also provide the Athletic Trainer with any instructions or documentation from their physician regarding the said injury.
- 4.) Return to play decisions:
 - a. Athlete must be cleared by a physician before participating in any activity.
 - b. Evaluation by school athletic trainer must be done and may include the use of computer-based testing (SAC). If a baseline test was performed athlete must score within 1 point of baseline test.
 - c. In the event an athlete is cleared by their physician, but does not pass the athletic trainer evaluation, the athlete may **NOT** participate. The athletic trainer will contact the physician's office to discuss further treatment options.
 - d. If the athlete is cleared by his/her physician in writing as well as the school athletic trainer, the athlete will return to play in the following phases:
 - No Activity** – Complete physical and cognitive rest with the objective being recovery.
 - Phase 1** – Low impact, non-strenuous, light aerobic activity such as walking or riding a stationary bike. If tolerated without return of symptoms over a 24 hour period, proceed to;
 - Phase 2** – Higher impact, higher exertion and moderate aerobic activity such as running or jumping rope. No resistance training. If tolerated without return of symptoms over 24 hour period, proceed to;
 - Phase 3** – Sport specific non-contact activity. Low-resistance weight training with a spotter. If tolerated without return of symptoms over a 24 hour period, proceed to;
 - Phase 4** – Sports specific activity, non-contact drills. Higher resistance weight training with a spotter. If tolerated without return of symptoms over a 24 hour period, proceed to;
 - Phase 5** – Full contact training drills and intense aerobic activity. If tolerated without return of symptoms over a 24 hour period, proceed to;
 - Phase 6** – Return to full activities without restrictions.