



BISHOP MCDEVITT SPORTS MEDICINE ABBREVIATED CONCUSSION PROTOCOL



In December 2011, the General Assembly of Pennsylvania passed the Safety in Youth Sports Act that establishes “standards for managing concussions and traumatic brain injuries for student athletes.” This Act will be effective as of July 1, 2012. The protocol at Bishop McDevitt High School is designed to follow these legislative guidelines and outline the procedures following an injury to an athlete’s brain. These procedures are to help insure that injured athletes are identified, treated appropriately by an appropriate medical professional, and are fully recovered prior to returning to play.

There are common signs and symptoms that help with the recognition of a concussion. To see a complete list of these signs and symptoms, please refer to the Take Home Instruction Sheet. If your athlete is experiencing any signs or symptoms after a head injury then he/she should remain home from school until he/she is symptom free without the help of medications for 24 hours.

After your athlete is diagnosed with a concussion, the Athletic Director and School Nurse will be notified of the injury. Your athlete’s PE teacher will also be informed because, as a concussed athlete, they should not be participating. After your athlete sees a physician, he/she should bring in a note that reiterates that they should not participate in gym, as well as any other restrictions the physician may provide. If your athlete requires any academic accommodations from his/her physician, he/she should bring this paperwork to the guidance office and athletic trainer.

When an athlete suffers from a head injury, they are taken through a series of neurocognitive tests. A SCAT3 test can be performed immediately after the injury on the sideline or in the Athletic Training Room. The SCAT3 tests for general cognitive function, such as memory, orientation, and balance, and also offers a standardized symptom evaluation that can continue to be utilized throughout your athlete’s treatment. The athlete should check in to the Athletic Training Room every day to go through a daily symptom evaluation.

Bishop McDevitt also utilizes ImpACT testing. ImpACT is a computerized assessment that is utilized as a tool to evaluate neurocognitive function recovery after a concussion. The functions assessed include memory, attention, brain processing speed, reaction time and post concussion symptoms. At the beginning of each season, all new athletes are required to take a baseline ImpACT test. Returning athletes are required to take a baseline ImpACT every second year (i.e. freshmen and juniors). After an athlete is concussed, post injury testing ideally will be done within 24-72 hours of the initial injury. Please contact the Athletic Trainer to set up a time for your athlete to take his/her Post-Injury ImpACT test. After the first Post-Injury test, the test will be repeated at the appropriate intervals. These neurocognitive test results are extremely helpful for your physician so it is recommend that you bring them to your appointment. ImpACT is **NOT** a test that will diagnose a concussion, but rather a tool used in the evaluation of concussions and the management of concussion recovery.



BISHOP McDEVITT SPORTS MEDICINE

ABBREVIATED CONCUSSION PROTOCOL



Return to Play Procedures

If an athlete exhibits any signs or symptoms of a concussion or has any abnormal cognitive testing, he/she will **NOT** be permitted to return to play on the same day of the injury. In order to progress back into activity after a concussion, a concussed athlete must meet **ALL** of the following criteria:

- Asymptomatic at rest without the aid of medications that mask or modify the symptoms of a concussion
- Asymptomatic with mental exertion (athlete must attend a full day of school)
- Within normal range of baseline on Post-Injury ImPACT testing
- Have written clearance from a physician

When all of the above criteria are met, your athlete will be progressed back to full activity following a stepwise process. Progression is individualized and is determined on a case by case basis. Factors such as concussion history, duration and type of symptoms, age, and the type of sports can affect the rate of their progression. The progression consists of six steps as follows:

Rehabilitation Stage	Functional exercise at each stage of rehabilitation	Objective of each stage
1. No activity	Symptom limited physical and cognitive rest.	Recovery
2. Light aerobic exercise	Walking, swimming or stationary cycling keeping intensity <70% maximum permitted heart rate. <i>No resistance training.</i>	Increase HR
3. Sport-specific exercise	Skating drills in ice hockey, running drills in soccer. <i>No head impact activities.</i>	Add movement
4. Non-contact training drills	Progression to more complex training drills, eg, passing drills in football and ice hockey. May start progressive resistance training.	Exercise, coordination and cognitive load
5. Full-contact practice	Following medical clearance participate in normal training activities.	Restore confidence and assess functional skills by coaching staff
6. Return to play	Normal game play.	

A minimum of 24 hours must occur between each step. If an athlete experiences any symptoms during a step of the progression, they must wait 24 hours after symptoms resolve before restarting their progression at the same step.

The athletic trainer will review appropriate activities for the day with your athlete prior to activity. Your child must report to the athletic trainer for re-assessment **daily** (or for the days that he/she is in school) until he/she has progressed to unrestricted activity and is fully cleared for return to play.

If you have any questions regarding our protocol or if you need to schedule a Post-Injury ImPACT test, please contact the Athletic Trainer.

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