



Loudoun County Public Schools
Division of Athletics

Concussions in High School Sports—LCPS Guidelines for Parents, Athletes, & Staff
IMPORTANT INFORMATION—READ CAREFULLY

Loudoun County Public Schools – Student Athlete Concussion Guidelines:

The Code of Virginia was amended to include Sections 22.1-271.5 and 22.1-271.6 directing Virginia school divisions to **develop and distribute guidelines for policies dealing with concussions** in student-athletes, and requiring LCPS to **obtain written acknowledgment from students and parents** of information regarding **the identification and LCPS handling of suspected concussions** in student athletes. This Guideline details the **“Return To Play”** and the **“Return To Learn”** protocols to be followed.

1. Concussion Facts:

- A concussion is a **brain injury** caused by a bump, blow, or jolt to the **head, face, neck, or body** which results in a temporary disruption of normal brain function. A concussion occurs when the brain is violently rocked back and forth or twisted inside the skull. **An athlete does not have to lose consciousness to suffer a concussion.**
- Concussions occur most frequently in football, but girls’ lacrosse, girls’ soccer, boy’s lacrosse, wrestling and girls’ basketball follow closely behind. **All athletes are at risk.**
- Concussion symptoms may last from a few days to **several months.**
- A concussion can affect a student’s **ability to do schoolwork and other activities.**
- An athlete **may not return to sports while still having symptoms** from a concussion as they are at risk for prolonged symptoms and further injury.
- A concussion may cause multiple symptoms. Many symptoms appear immediately after the injury, while others **may develop over the next several days or weeks.**
- Most athletes who experience a concussion can recover completely as long as they do not return to play prematurely. The effects of repeated concussions can be cumulative, and after a concussion, there is a period in which the brain is particularly vulnerable to further injury. If an athlete sustains a second concussion during this period, the **risk of permanent brain injury increases significantly** and the consequences of a seemingly mild second concussion can be **very severe, and even result in death (i.e., “Second Impact Syndrome”).**

2. Immediate Post-Concussion Assessment and Cognitive Testing (ImPACT)

In an effort to provide for the safety of our student athletes, LCPS has implemented the **Immediate Post-Concussion Assessment and Cognitive Testing (ImPACT)** program as a tool to assist in the evaluation of concussions. ImPACT is widely used and the most scientifically validated computerized concussion evaluation tool. Given the inherent difficulties in concussion management, it is important to manage concussions on an individualized basis and to perform baseline testing and/or post injury testing. This type of concussion assessment can help to objectively evaluate the concussed athlete’s post-injury condition and track recovery for safe return to play, thus preventing the cumulative effects of concussion. **A “Baseline” ImPACT evaluation is conducted by the LCPS Athletic Trainer** with assistance from the Athletic Director and Coaches trained to administer baseline testing.

3. Concussion Signs Observed by Parents, Coaches and Students:

Athlete appears dazed or stunned - Is confused about what to do - Forgets plays - Is unsure of game, score or opponent - Moves clumsily - Loses consciousness - Shows behavior or personality changes - Can’t recall events prior to or after a hit – Irritability – Sadness – More emotional – Nervousness

4. Concussion Signs and Symptoms:

Athlete feels Headache or “pressure” in head - Nausea or vomiting - Balance problems or dizziness - Double or fuzzy vision - Bothered by light or noise - Feeling sluggish, hazy, foggy or groggy - Concentration or memory problems – Confusion – Sleeping issues

5. Actions if a Student Athlete Suffers a Suspected Concussion Event:

- Student Athlete **shall be immediately removed from play**, be it a game or practice and **may not return to play or practice on that same day**. Continuing to participate in physical activity after a concussion can lead to worsening concussion symptoms, increased risk for further injury, and even a risk of death. **WHEN IN DOUBT, SIT THEM OUT.**
- Student Athlete **must be evaluated by an Approved Healthcare Professional and be cleared** before returning to play or practice. The healthcare professional’s written diagnosis indicating the athlete’s status shall be provided to the Athletic Trainer for further clearance. **Approved Healthcare Professionals include MD-Medical Doctor, DO-Doctor of Osteopathic Medicine, PA-Physician Assistant, CNP-Certified Nurse Practitioner, ATC-Certified Athletic Trainer, and/or Neuropsychologist.**
- Approximately 48 hours after a suspected concussion, the Student Athlete will be ImPACT evaluated again. Once an athlete is asymptomatic, they may begin a progression of activities in a **step-wise fashion** to allow the brain to re-adjust to exertion.
- **REST IS THE BEST TREATMENT FOR CONCUSSIONS.**

6. Academic Accommodations and Return Protocol LCPS can Provide to a Student Athlete with a Concussion

Following a suspected concussion, a student-athlete or parent/guardian must contact the school Athletic Trainer within 24 hours and have a follow-up evaluation performed by a licensed healthcare professional within 48 hours. A student recovering from a brain injury shall gradually increase cognitive activities progressing through some or all of the following phases based on evaluation and input by parent/guardian, teachers, and school staff. Referral to a concussion specialist may be recommended to a student-athlete who has been experiencing symptoms for greater than three weeks.

7. What Must Be Done By Student Athletes, Parents, and Coaches?

- **All parties must** learn to recognize the “Signs and Symptoms” of concussion as listed above.
- Teach student athletes to immediately inform the Athletic Trainer and/or Coach if they experience such symptoms.
- Teach student athletes to tell the Athletic Trainer and/or Coach if they suspect that a teammate has a concussion.
- Ask teachers to monitor any decrease in grades or changes in behavior that could indicate a concussion.
- Report concussions to the Athletic Trainer and Coaches to help in monitoring injured student athletes as they move to the next sports season.

RETURN TO LEARN	RETURN TO PLAY
A student recovering from a brain injury shall gradually increase cognitive activities progressing through some or all of the following phases based on evaluation and input by parent/guardian, teachers, and school staff.	If symptoms occur during any of the following steps, the athlete must cease activity and be re-evaluated and cleared by his/her health care provider .
<p>Red: Home/Rest Cognitive and physical rest may include:</p> <ul style="list-style-type: none"> • Limit reading, computer use, texting, video games, etc. • No homework, assignments, tests, quizzes • No driving <p>Light cognitive mental activity may include:</p> <ul style="list-style-type: none"> • Up to 30 minutes of sustained cognitive exertion • Prolonged concentration as tolerated • Limited physical activity 	<p>Step 1: No physical activity until asymptomatic.</p> <p>Athlete must remain asymptomatic in order to progress to the next Step. If symptoms return during any of the Steps, the student athlete must return to the previous Step.</p>
<p>Orange: School part-time. Maximum instructional modifications including:</p> <ul style="list-style-type: none"> • Shortened days with built-in breaks • Modified environment (no hallways or cafeteria & work in library) • Established learning priorities • Exclusion from standardized and classroom testing • Extra time/assistance on assignments • Rest and recovery when out of school 	<p>Step 2: Light physical activity.</p> <p>This includes walking or stationary bike for 15-20 minutes. No weight training. No helmet or other equipment. No PE.</p>

RETURN TO LEARN	RETURN TO PLAY
<p>Yellow: School full-time.</p> <p>Moderate instructional modifications including:</p> <ul style="list-style-type: none"> • Established learning priorities • Limited homework • Alternative grading strategies • Built-in breaks • Modified or limited classroom testing • Exclusion from standardized testing • Reduction of extra time, assistance and/or modification of assignments as needed 	<p>Step 2: Light physical activity.</p> <p>This includes walking or stationary bike for 15-20 minutes. No weight training. No helmet or other equipment. No PE.</p>
<p>Blue: School full-time.</p> <p>Minimal instructional modifications including:</p> <ul style="list-style-type: none"> • Built-in breaks • Limited formative and summative testing • Exclusion from standardized testing • Reduction of extra time, assistance and/or modification of assignments as needed • Continuation of instructional modification and supports in academically challenging subjects that require cognitive overexertion and stress 	<p>Step 3: Moderate physical activity.</p> <p>This includes running, moderate weight training and non-contact sport specific drills. No helmet or other equipment. Modified PE.</p>
<p>Green: School full-time with no academic accommodations.</p> <p>Attends all classes; maintains full academic load/homework; requires no instructional modifications.</p>	<p>Step 4: Heavy non-contact physical activity.</p> <p>This includes sprinting, conditioning, Full weight training and sport-specific drills in full equipment. Modified PE.</p> <p>If after Step 4, there are no symptoms of concussion, the athlete will be given a cognitive test before going on to Step 5. If the athlete does not clear on the second ImPACT evaluation, they will repeat the Steps above and have another ImPACT evaluation after Step 4.</p>
<p>A student-athlete shall progress to a stage where he or she no longer requires instructional modifications or other support before being cleared to return to full athletic participation (return-to-play). Some RTL and RTP processes may overlap.</p>	<p>Step 5: Full contact physical activity in practice. Full PE.</p> <p>Step 6: No restrictions of physical activity.</p> <p>Game-play with release from Approved Healthcare Professional (MD- Medical Doctor, DO- Doctor of Osteopathic Medicine, PA- Physician Assistant, CNP- Certified Nurse Practitioner, ATC- Certified Athletic Trainer, or Neuropsychologist).</p>

Indicate your agreement by signing below and returning the signed form to your student's school.

Keep a copy for your records.

<p>I have received and read the Loudoun County Public Schools Student Athlete-Concussion Guidelines and grant my consent and permission for the Student Athlete to participate in the Immediate Post-Concussion Assessment and Cognitive Testing (ImPACT) program including Baseline and Post-Concussion Cognitive Testing. Furthermore, I acknowledge, understand, and certify by my signature below that I agree to the protocols of the LCPS concussion program for the Student Athlete's best welfare and safe participation in sports for Loudoun County Public Schools.</p>	
<p>Student Athlete Name (print):</p>	
<p>Student Athlete Signature:</p>	<p>Date:</p>
<p>Parent/Guardian Name (print):</p>	
<p>Parent/Guardian Signature:</p>	<p>Date:</p>