

San Gabriel Valley Jr All American Football/Cheer Concussion Compliance Protocol



Youth sports organizations, like the SGVJAAFC, must comply with state-mandated "youth sports concussion protocols'. The SGVJAAFC will comply with the state requirements stated below in accordance with the practices and procedures set forth for each requirement.

Registration of youth programs and information process for parents and youth participants

Upon registering for a SGVJAAFC, youth program, the Board of Directors shall provide concussion and head injury information sheet to all SGVJAAFC, youth participants and members ("athletes'), their parents, SGVJAAFC, youth program coaches, athletic directors, and administrators.

The information sheet covers the following:

- a. Head injuries and their potential consequences.
- b. Signs and symptoms of a concussion.
- c. Best practices for removing an athlete after a suspected concussion.
- d. Steps for returning an athlete after a concussion of head injury.

After the initial distribution of Concussion Information Handouts, before any athlete can start the season and begin practice in a sport, a Concussion Acknowledgement Information Sheet must be signed and returned to the SGVJAAFC, by the athlete and the parent/guardian. See attachment 1- SGVJAAFC, Concussion Information Sheet. Additional Concussion and Head Injury information can be accessed here and online at: http://www.cdc.gov/concussion/HeadsUp/youth.html

Training and Education for Coaches and Administrators

The SGVJAAFC, will provide concussion/head injury education and training to youth coaches and administrators, before being allowed to supervise an athlete.

Education

SGVJAAFC, youth program coaches, athletic directors, and administrators shall receive written materials and annual training regarding concussions and head injuries before supervising athletes in any sports activity.

For purposes of this document, "coaches, athletic directors, and administrators" is defined as volunteers who perform duties within this capacity.

The written materials shall be provided to SGVJAAFC, youth program coaches, athletic directors, and administrators, prior to the supervision of a youth program, and include information about concussions and head injuries.

http://www.cdc.gov/concussion/HeadsUp/youth.html

Fact Sheet for Youth Sports Coaches

Signs & Symptoms – Action Plan

Procedures for athletes suspected/diagnosed with a concussion/head injury.

Athletes who have a suspected concussion during a practice or game must be removed from the activity immediately and may not return to that program for the remainder of the day.

Parents/guardians must be notified of time/date of the injury, symptoms observed, and any treatment provided to the athlete. See attachment 2- SGVJAAFC, Acute Concussion Notification Form for Parents/Guardians

An athlete removed because of a suspected concussion must receive written clearance from a medical doctor trained in the management of concussions before returning to the SGVJAAFC.

Athletes should consult with their medical professional before returning to any sports or physical activities. A return to play to full competition must be completed no sooner than 7 days after the concussion diagnosis has been made by a licensed healthcare provider.

Before returning to competition in a SGVJAAFC athletic program, the concussion symptoms be completely gone and the athlete must provide a written medical clearance from a licensed healthcare provider trained in the evaluation and management of concussions.







Attachment 1 SGVJAAFC Concussion Information Sheet



Why am I getting this information sheet?

You are receiving this information sheet about concussions because of California State Law Assembly Bill No. 2007.

1. The law requires athletes participating in youth sports organizations, who may have a concussion during a practice or game, to be removed from the activity for the remainder of the day.

2. Any 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 an athlete can start the season and begin practice in a sport, a concussion information sheet must be signed and returned to the organization by the athlete and the parent or guardian.

Every year all coaches, athletic directors, and their administrators are required to receive training about concussions.

What is a concussion, and how would I recognize one?

A concussion is a kind of brain injury. It can be caused by a bump or hit to the head, or by a blow to another part of the body with the force that shakes the head. Concussions can appear in any sport and can look different in each person.

Most concussions get better with rest, and over 90% of athletes fully recover. However, all concussions should be considered serious. If not recognized and managed the right way, they may result in problems including brain damage and even death.

Most concussions occur without being knocked out. Signs and symptoms of a concussion may show up right after the injury, or can take hours to appear. If your child reports any symptoms of a concussion or if you notice some symptoms and signs, seek medical evaluation from your team's athletic trainer and a medical doctor trained in the evaluation and management of concussion. If your child is vomiting, has a severe headache, or is having difficulty staying awake or answering simple questions, call 911 to take him or her immediately to the emergency department of your local hospital.

What can happen if my child keeps playing with concussion symptoms or returns too soon after getting a concussion?

Athletes with the signs and symptoms of concussion should be removed from play immediately. There is NO same-day return to play for a youth with a suspected concussion. Youth athletes may take more time to recover from concussions and are more prone to long-term serious problems from a 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 to the brain. If your athlete suffers another 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 concussions may contribute to long-term neurological problems. One goal of this concussion program is to prevent a too-early return to play so that serious brain damage can be prevented.

Signs observed by teammates, parents and coaches include:

- Looks dizzy
- Looks spaced out
- Confused about plays
- Forgets plays
- Is unsure of game, score, or opponent
- Moves clumsily or awkwardly
- Answers questions slowly

- Slurred speech
- Shows a change in personality or way of
- Can't recall events before or after the injury
- Seizures or has a fit
- Any change in typical behavior or personality

Symptoms may include one or more of the following:

| Headaches | Loss of memory |
|---|---|
| "Pressure in head" | "Don't feel right" |
| Nausea or throws up | Tired or low energy |
| Neck pain | Sadness |
| Has trouble standing or | Nervousness or feeling on |
| walking Blurred, double, or | edge Irritability |
| fuzzy vision | More emotional |
| Bothered by light or | Confused |
| feeling foggy or | Concentration or memory problems |
| groggy Drowsiness | Repeating the same |
| Change in sleep patterns | question/comment |

How is Return to Play (RTP) determined?

Concussion symptoms should be completely gone before returning to competition. RTP progression involves a gradual, step-wise increase in physical effort, sports-specific activities and the risk for contact. If symptoms occur with activity, the progression should be stopped. If there are no symptoms the next day, exercise can be restarted at the previous stage.

RTP after concussion should occur only with medical clearance from a medical doctor trained in the evaluation and management of concussions, and a step-wise progression program monitored by a player safety coach, athletic, or coach, For your reference, a Return to Play plan is available at the SGVJAAFC office or online at www.SGVJAA.org. RTP for full competition must be no sooner than 7 days after the concussion diagnosis has been made by a physician.

Final Thoughts for Parents and Guardians:

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

References:

<u>http://www.cdc.gov/concussion/HeadsUp/youth.html</u>







<u>Acknowledgements</u>

- 1. I hereby acknowledge that I have received the San Gabriel Valley Jr. All-American Concussion Information Sheet.
- 2. I have read and understand its contents.
- 3. I also acknowledge that if I have any questions regarding these signs, symptoms and the "Return to Play" protocols, I will consult with a licensed healthcare provider.

| Athlete's Name | Athlete's Signature | Date |
|----------------|---------------------|------|
| | | |
| Parent's Name | Parent's Signature | Date |







Attachment 2

SGVJAAFC Concussion Notification Form for Parents/Guardians

| PARENT'S NAME: | | | | | | |
|-----------------|-------|-----------|-------|--|--|--|
| ATHLETE'S NAME: | | | | | | |
| DOB: | CITY: | DIVISION: | DATE: | | | |

| Signs and symptoms exhibited include (check all that apply): | | | |
|--|---|---|---|
| o Head | dache | 0 | Can't recognize people or places |
| o Seizu | ure (uncontrolled jerking of arms/legs) | 0 | Looks very drowsy/Can't be awakened |
| o Wea | kness or numbness of arms/legs | 0 | Increased confusion and/or irritability |
| o Repe | eated vomiting | 0 | Unusual behavior |
| O Loss | of consciousness | 0 | Slurred speech |
| o Lack | of balance/unsteadiness on feet | 0 | Drainage of blood/fluid from ears or nose |
| o Char | nges in vision (double, blurry vision) | 0 | Loss of bowel and/or bladder control |
| Other signs and symptoms: | | | |
| | | | |

TREATMENT PROVIDED: _____

I have read and reviewed the information provided by the SGVJAAFC, I understand that my child will need medical clearance prior to returning to the SGVJAAFC.

| Date: | |
|-------|--|
| | |
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Athlete's name: _____

Parent signature: