

MANAGEMENT OF MILD TRAUMATIC BRAIN INJURIES AND CONCUSSIONS

POLICY

In compliance with the NCAA, when a student-athlete shows any signs, symptoms or behaviors consistent with a concussion, the student-athlete shall be removed from practice or competition and evaluated by a team physician or the physician's designee. The team physician or the physician's designee have unchallengeable authority to determine management and return-to-play.

PURPOSE

To protect the student-athlete, maintain a Concussion Management Plan based upon current best practices, and comply with NCAA guidelines.

PROCEDURES

1. Evaluation
 - a. Assess level of consciousness
 - b. Remove the student-athlete from activity
 - c. Perform a visual assessment
 - d. "Call for" Team Physician if on-site
 - e. Administer the "Sideline Assessment Card"
 - f. Administer balance examination (BESS)
 - g. Administer exertion test (jog, sprint, push-ups, etc.)
 - h. Determine Return-To-Play status – **A student-athlete diagnosed with a concussion shall be withheld from the competition or practice and not return to activity for the remainder of that day**
 - i. Continue to monitor student-athlete for signs and symptoms of concussion
 - j. Re-assess student-athlete following practice/competition
 - k. Activate Emergency Action Plan if necessary
2. Management
 - a. Re-evaluate student-athlete in a private setting
 - b. Communicate with the Team Physician
 - c. Provide and review written Home Care Instructions to the student-athlete and roommate, friend, or guardian
 - d. Follow-up with the student-athlete on the next day and communicate with Team Physician
 - e. Contact the Director of Enrichment Services, the Student-athletes Dean and Professors if concussion signs and symptoms persist for 24 hours to arrange for academic accommodations

- f. Symptoms lasting more than seven days may require additional diagnostic tests and evaluations
- g. Administer the Impact - New Trauma Test – once the student-athlete is 24 hours symptom-free (e.g. headache, dizziness, nausea, and light sensitivity)
- h. Impact Trauma Test scores other than a “Passing Score” or exacerbation of symptoms following the tests are graded as failed. There shall be 24 hours (or longer) given before administration of the Trauma Follow-up Test
- i. Progression after passing the Impact Trauma Test and SCAT III tests – There should be approximately 24 hours (or longer) for each stage. The team physician or the physician’s designee will monitor this progression. If symptoms recur the student-athlete will return to stage 1. Resistance training should be added in the later stages.
 - i. Rest until asymptomatic (physical and mental rest)
 - ii. Light aerobic exercise (e.g. stationary cycle)
 - iii. Sport-specific exercise
 - iv. Non-contact training drills (start light resistance training)
 - v. Full contact training after medical clearance
 - vi. Return-to-Play after medical clearance
 - vii. Return-to-Learn after medical clearance
- j. Establish new Impact baseline test approximately two weeks following Return-to-Play

DOCUMENTATION

1. Impact Baseline Test and Balance Error Scoring System (BESS) administered prior to beginning practice
2. Signature of annual Concussion Education Form posted on ACS website
3. Signed statement by the student-athlete on their annual pre-participation physical examine that they accept full responsibility for reporting their injuries and illnesses to the institutional sports medicine staff, including signs and symptoms of concussion
4. Sideline Assessment Card, to be placed in the student-athlete medical record folder
5. SCAT III Assessment Card, to be placed in the student-athlete medical record folder
6. Impact Trauma Test and subsequent trauma follow-up tests, to be placed in the student-athlete medical record folder
7. Injury note including documentation of the incident, evaluation, management plan, and clearance
8. Referrals, prescriptions, and imaging requisitions when ordered the student-athlete’s medical record folder.
9. Complete and submit the Disability Services Registration Form to Columbia Health Disability Services.
10. Complete and submit the Verification Of Disability Form For Medical Providers to Columbia Health Disability Services.