Fort Worth ISD Protocol For the Management of Sports-Related Concussion

made changes to the Texas

Education Code Chapter 38, Subchapter D which sets forth requirements for school districts in the prevention, treatment, and oversight of concussions in athletics. Fort Worth ISD has established this document to provide information on recognition of a possible concussion and procedures for management, including Return to Learn and Graduated Return to Sport Strategy.

Fort Worth ISD desires to return concussed student-athletes to academics and athletics in a safe and methodical way. This protocol applies to all students who are participating in those sports and activities that are listed in the FWISD Sports Medicine Policies and Procedures Manual. In order to effectively and consistently manage these injuries, the following procedures have been developed. The goal is to ensure that the concussed student-athlete is identified, referred, and treated appropriately; including appropriate follow-up medical care as it pertains to academic accommodation and return to athletics.

In addition to recent research, three (3) primary documents were consulted in developing this protocol. Section 38 of the Texas Education Code, t Consensus statement on concussion in sport- the 6th international conference on concussion in sport held in Amsterdam, October 2022 Athletic Trainer Association Position Statement: Management of Sport-Related

This protocol will be reviewed on a yearly basis, by the Fort Worth ISD Concussion Oversight Team. Any changes or modifications will be reviewed and given to Athletic Department staff and appropriate school personnel in writing.

Concussion Oversight Team (C.O.T.)

This team is required by Section 38.153 of the Texas Education Code (TEC) and is responsible for establishing a Graduated Return-to-Sport strategy based on peer-athletics practice or competition following the force or impact believed to have caused a concussion. The C.O.T. consists of a physician who is trained in the evaluation, treatment and oversight of concussions (Dr. Karen M. Kirk, MD) and each of the athletic trainers employed by Fort Worth ISD.

The C.O.T. has the final decision as to whether a student involved in FWISD athletics has a concussion and must comply with the protocol and procedures outlined.

Continuing Education for C.O.T. Members and Coaches

Each physician serving as a member of the C.O.T. must attend a course concerning the subject matter of concussions that has been approved for continuing education credit by the appropriate licensing authority for the profession. Each athletic trainer serving as a member of the C.O.T. must attend a course concerning the subject matter of concussions that has been approved for continuing education credit by the Texas Department of Licensing and Regulation for athletic trainers. All coaches must take a course approved by the University Interscholastic League that includes the subject matter of concussions, including evaluation, prevention, symptoms, risks, and long-term effects. Each member must complete the equivalent of 2 hours of training every 2 years. Each member must submit proof of timely completion of an approved course to the athletic department designee.

Public Concussion Information and Acknowledgment

In accordance with Texas Senate Bill 82, all student-athletes will be provided training in recognizing symptoms of catastrophic injuries, including head and neck injuries, and concussions. This training is included in the Rank One documentation that is required each school year, as well as the UIL safety training power point which will be shown by eac participation in the training.

Pre-Participation Cognitive Baseline

Fort Worth ISD requires all student-athletes in grades 9-12 to complete a cognitive baseline exam using Concussion Vital Signs, a web-based service. The student must complete a valid baseline test and be cleared by their

Recognition of a Concussion

affecting the brain caused by a traumatic physical force or impact to the head or body, which <u>may include</u> temporary or prolonged altered brain function resulting in physical, cognitive, or emotional symptoms, altered sleep patterns, or loss of

Common signs and symptoms of sports-related concussion

Signs things which are observed

On-Site Injury Management Process

If the student-athlete has symptoms of a concussion and is not stable (i.e. condition is changing or deteriorating):

- Deterioration of neurological function
- Decreasing level of consciousness or any

Follow-up Care

Before the student-athlete returns to classes or school activity

The student-athlete and athletic trainer(s) will communicate prior to the student-athlete returning to school to discuss the next steps in return to learn and sport protocols. A follow up assessment will be completed and documented at this time. Any documentation from care provided since the injury (i.e. ER paperwork or physician visit notes) should be shared with the athletic trainer(s) and documented in the student-athletes Rank One injury report. The athletic trainer(s) will give the parent/guardian referral information for evaluation by a physician, preferably one trained in evaluation, treatment and management of concussions, as well as a school claim form (if one has not already been provided). The parent/guardian will also be provided with the FWISD Concussion Management Step-by-Step information sheet.

Student-athletes who suffer a non-school related concussion (i.e. vehicle accident, non-school sports activity, etc.) must also complete the Return to Learn and Graduated Return to Sport Protocol

Follow Up Assessment

The athletic trainer(s) will use the follow up assessment results and clinical judgement to make recommendations regarding the studentStudent-athletes with few symptoms, or low symptom severity scores may be able to attend classes with short term accommodations, as tolerated. These student-athletes will monitor symptoms closely with the athletic trainer(s). More formal accommodations may be recommended once the student-athlete has been evaluated by a physician.

Student-athletes who are experiencing multiple symptoms, high symptom severity scores, and/or easily exacerbated symptoms may benefit from 24-48 hours of relative cognitive rest, gradual return to daily activities, or shortened school days.

The athletic trainer(s) will notify the studentnurse, and school administrator of the current return to learn status, including temporary accommodations prior to physician
evaluation and accommodations written by the treating physician.

*Middle school student-athletes will follow a plan created by their pyramid high school athletic trainer(s) to monitor for return or development of symptoms. The pyramid high school athletic trainer(s) will meet with the student or designate an individual on-campus (i.e. school nurse, administrator, a coach not from the student-athlete student-athlete to meet with daily.

Physician Evaluation and Clearance

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concussion must be evaluated by a treating physician, preferably trained in the recognition, evaluation, and management of sport related concussions. The athletic trainer(s) may recommend a specific physician, but ultimately the parent/guardian may use the physician of their choosing. The athletic trainer(s) will collaborate with the treating physician to assess and monitor symptoms, conduct appropriate rehabilitative exercises, and communicate accommodations with the school staff. The student-athlete must be cleared by the treating physician in order to begin the Return to Sport progression.

*Return to Sport may not be completed prior to Return to Learn.

Return to Learn and Return to Sport

Fort Worth ISD strives to remember that our student-athletes are students first and student-athletes second. A key ingredient to recovery is a return to full academic participation before returning to participation in athletic activities. If a student is symptomatic and it is affecting their academics, the school will take appropriate action to provide academic accommodations as needed. The school athletic trainer(s) will work with the parent/guardian, treating physician, and the appropriate school committee (SPED, 504, RTI) if formal accommodations are required and/or ordered by the treating physician.

Prolonged cognitive and physical rest has not been proven to be helpful in recovery from a concussion. Due to this an athletic trainer may oversee Stage 1 of the management strategy prior to a student-athlete being seen by a physician since some student-

These activities may be coordinated with the physician on the COT, or other designated physician, as needed. Activities should stay below both cognitive and physical exacerbation threshold, meaning they do not provoke an increase in symptom severity by more than 2 points (on a 10-point scale). Concussion symptoms and severity will be reported by student-athlete input during the activity. Activities may include walking, cycling, and other normal daily activities.

Not all student-athletes will need specialized academic support following a concussion, and most (93%) will have a complete return to learn within 10 days of injury. If symptom exacerbation occito G[r)-7e)nts (on a 10