**The Ursuline School Concussion Management Guidelines**

Purpose: To assess the severity of injury and to guide the safe return to sports participation, physical education, and regular classroom activities.

Medical information regarding concussions has advanced dramatically over the past few years. The Ursuline School has therefore adopted the following policy of Concussion Management.

1. If an athlete has a suspected concussion or is exhibiting any symptoms of a concussion, the athlete will be held from practice/game/activity until evaluated by an appropriate healthcare professional. Depending on the circumstances, the supervising adult will notify the students’ parents/guardian of their condition.
2. If a certified athletic trainer (ATC) is on site, either at home or away events, the athlete should be evaluated for concussion by them immediately. If no athletic trainer is available, the coach on the sideline is responsible for filling out form “A”.
   1. Please note: The attending ATC on-site may use their own medical documentation (i.e. the Standard Assessment of Concussion, SCAT 2, SCAT 3, BESS, etc.). If this documentation is used, that assessment will be used in place of form “A”.
3. If a concussion is sustained outside of a school sponsored athletic activity, it is the responsibility of the parent/guardian to notify the school nurse, so The Ursuline School can accurately document the injury. The nurse will follow up with the student on their condition.
4. An individual can only be diagnosed with concussion by a licensed and practicing physician. If an athlete has been diagnosed with a concussion, she is considered to be under that physician’s care throughout the duration of their injury. The Ursuline School administration and athletic department may follow-up with the student and her progress accordingly. The athlete should check in with members of The Ursuline School administration and athletic department as often as possible.
5. The student shall not return to any P.E. or sports activities until written authorization has been received by the school from the attending physician. Once the athlete has been cleared by her physician, they must follow the gradual 5-day return to play protocol (as outlined below).
6. If a student at any time presents with ongoing symptoms, any school personnel can question any physician clearance note, removing a student from sports/practice/game/P.E. Should there be any reoccurrence of symptoms, a re-evaluation by a physician/practitioner is necessary and required to determine when the student can return to play.
7. The school will use ImPACT (Immediate Post Concussion Assessment and Cognitive Testing) to assist in determining an athlete’s ability to return to play. More information about ImPACT testing can be found at <https://impacttest.com/>.
8. Although following this standard protocol shall be universal, it is important to note that no two concussions are the same and rates and times of returning to play will vary.

NYSPHSAA Recommended Return to Physical Activity Protocol

1. First Day- low impact, non-strenuous light aerobic activity such as riding a stationary bike. If tolerated without return of symptoms over a 24 hour period proceed to
2. Second Day- Higher impact, higher exertion and moderate aerobic activity such as running or jumping rope. If tolerated without return of symptoms over a 24 hour period proceed to
3. Third Day- Sport specific non-contact activity. If tolerated without return of symptoms over a 24 hour period proceed to
4. Fourth Day- Sport specific, non-contact drills. If tolerated without return of symptoms over a 24 hour period proceed to
5. Fifth Day- Full contact training drills and high intensity aerobic activity. If tolerated without return of symptoms over a 24 hour period proceed to
6. Sixth Day- Return to full activity without restrictions.

\*If any symptoms reoccur, the student will go back to previous asymptomatic level and rest until asymptomatic again.