



Concussion Acknowledgement

Name of Student _____

Definition of Concussion – a concussion is a type of traumatic brain injury, (TBI), caused by a bump, blow or jolt to the head or body that results in the head and brain moving rapidly within the skull. This sudden movement can cause changes in the way the brain normally functions. Even what may seem like a minor blow to the head can become serious.

Signs and Symptoms of Concussion – symptoms of a concussion may include but are not limited to: Headache or “pressure” in the head, nausea or vomiting, dizziness or balance problems, double or blurred vision, sensitivity to light or noise, confusion inability to concentrate, or memory problems, feeling sluggish or lazy. Concussion signs that may be observed may include but are not limited to: loss of consciousness (even briefly), appears dazed or stunned, can’t recall events prior to or after the injury occurred, inability to recall instructions or is confused about an assignment, trouble answering questions, moves clumsily, shows mood or personality changes.

Remove from play - When an athlete reports any of the above signs or symptoms of a head injury, the athlete should be removed IMMEDIATELY from all physical activity until cleared by a qualified healthcare professional approved by the Concussion Oversight Team. The athlete should be held out of all athletic participation until he or she is symptom free and is cleared to return to play by a healthcare professional.

Oversight - Each district shall appoint and approve a Concussion Oversight Team (COT). The COT shall include at least one physician and an athletic trainer if one is employed by the school district. Other members may include: Advanced Practice Nurse, neuropsychologist or a physician’s assistant. The COT is charged with developing the Return to Play protocol based on peer reviewed scientific evidence.

Concussion Emergency Symptoms to look for while at Home – In rare occasions, a concussion may cause severe swelling within the brain and create a dangerous situation. In the event that the athlete begins to exhibit any of the following symptoms, it should be considered as emergency. The athlete should be taken to the nearest emergency room to be evaluated by a physician.

- Unequal sizes of the pupils
- Ability to wake up or get attention
- Repeated vomiting, convulsions, or seizures
- Slurred speech, weakness, or decreased coordination
- Loss of consciousness
- Intolerable headache
- Unusual behavior, confusion, or agitation

Treatment of Concussion - The student-athlete/cheerleader shall be removed from practice or participation immediately if suspected to have sustained a concussion. Every student-athlete/cheerleader suspected of sustaining a concussion shall be seen by a physician before

they may return to athletic or cheerleading participation. The treatment for concussion is cognitive rest. Students should limit external stimulation such as watching television, playing video games, sending text messages, use of computer, and bright lights. When all signs and symptoms of concussion have cleared and the student has received written clearance from a physician, the student-athlete/cheerleader may begin their district's Return to Play protocol as determined by the Concussion Oversight Team.

Return to Play - According to the Texas Education Code, Section 38.157:

A student removed from an interscholastic athletics practice or competition (including per UIL rule, cheerleading) under Section 38.156 may not be permitted to practice or participate again following the force or impact believed to have caused the concussion until:

- (1) the student has been evaluated, using established medical protocols based on peer-reviewed scientific evidence, by a treating physician chosen by the student or the student's parent or guardian or another person with legal authority to make medical decisions for the student;
- (2) the student has successfully completed each requirement of the return-to-play protocol established under Section 38.153 necessary for the student to return to play;
- (3) the treating physician has provided a written statement indicating that, in the physician's professional judgment, it is safe for the student to return to play; and
- (4) the student and the student's parent or guardian or another person with legal authority to make medical decisions for the student:

- (A) have acknowledged that the student has completed the requirements of the return-to-play protocol necessary for the student to return to play;
- (B) have provided the treating physician's written statement under Subdivision (3) to the person responsible for compliance with the return-to-play protocol under Subsection (c) and the person who has supervisory responsibilities under Subsection (c);
- (C) have signed a consent form indicating that the person signing:
 - (i) has been informed concerning and consents to the student participating in returning to play in accordance with the return-to-play protocol;
 - (ii) understands the risks associated with the student returning to play and will comply with any ongoing requirements in the return-to-play protocol;
 - (iii) consents to the disclosure to appropriate persons, consistent with the Health Insurance Portability and Accountability Act of 1996 (Pub. L. No. 104-191), of the treating physician's written statement under Subdivision (3) and, if any, the return-to-play recommendations of the treating physician; and
 - (iv) understands the immunity provisions under Section 38.159.

Parent or Guardian Signature

Date

Student Signature

Date