

TUSKEGEE UNIVERSITY

University Policy: TBI/Concussion Management Policy

Policy Category: Athletics/Risk Management

Subject: TBI/Concussion Management

Office Responsible for Review of this Policy: Athletics/Risk Management

I. SCOPE

Tuskegee University recognizes the importance of safety amongst our student athletes. We are aware of the risk factors associated with traumatic brain injuries (TBI) commonly known as concussions. The TBI/Concussion Management Policy is applicable to all student athletes, athletic personnel, and medical providers.

II. POLICY STATEMENT

While the University supports collegiate/intramural sporting activities, it also recognizes the risks associated with participation in these activities. Therefore, certain steps are required to manage any suspected injuries involving head traumas. The University has the right to deny any student athlete's participation in any and all sporting activities if an injury of this nature is suspected.

III. PURPOSE

The purpose of this policy is to bring awareness to traumatic brain injuries (TBI) and provide protocols for proper management of the aforementioned. This policy will provide campus-wide education and offer a plan of action for treatment of any suspected head or brain injuries.

IV. TO WHOM THIS POLICY APPLIES

This policy applies to Tuskegee University student athletes, students participating in intramural sports, and any university employee with direct contact to this student population.

V. EFFECTIVE DATE

This policy is effective immediately.

VI. SIGNATURE, DATE, AND APPROVAL

Approved:



Brian L. Johnson, PhD
President

Date Approved: 8/3/2014

**TUSKEGEE UNIVERSITY
TBI/CONCUSSION MANAGEMENT POLICY
FOR STUDENT-ATHLETES
DEPARTMENT OF INTERCOLLEGIATE ATHLETICS**

A concussion is a brain injury that is caused by a blow to the head or body that may result in improper brain functioning. A concussion can range from mild to very severe and manifests itself differently in each individual. Concussions are recognized as being a potentially very serious condition that if managed improperly, can lead to catastrophic consequences. Tuskegee University recognizes that concussions are a potentially serious injury that requires a comprehensive and carefully measured approach to management. This policy was created in an effort to provide a consistent management approach to any student athlete that suffers a concussion, while also recognizing that each concussion, as well as each athlete, is unique and individualized in nature. Individualizing concussion management, considering each student athlete's complete medical history, and close physician involvement are critical to this policy and the overall safety of our student athletes. The purpose of this policy is to review the signs and symptoms associated with concussions, the management, and return to play protocol.

Tuskegee University recognizes that concussions may occur outside of participating in a sport. Therefore the acute management of the student-athlete with such a concussion may occur outside the scope of this document. However, return to play decisions for the student athlete that may have suffered a concussion outside of sport participation will be guided by this policy.

I. EDUCATION

Prior to each Pre-Season, each student-athlete and coach will be educated on the Tuskegee University Concussion Management Policy, by participating in the "Response and Recognition" training video located on the United Educators website. This training will educate each parties how to recognize signs and symptoms of concussion, as well as current trends in concussion management.

At the conclusion of the educational session, each student-athlete and coach will sign a statement acknowledging the receipt of the education, as well as their role in reporting any student-athlete exhibiting signs and symptoms of a concussion to the appropriate member of the Sports Medicine Staff.

II. SIGNS AND SYMPTOMS

Concussions and other brain injuries can be serious and potentially life threatening injuries. Research indicates that these injuries can also have serious consequences later in life if not managed properly. Signs and symptoms of a concussion may include, but are not limited to the following:

- Headache that persists or increases in severity
- Dizziness
- Loss of consciousness

- Post-traumatic amnesia
- Retrograde amnesia
- Tinnitus (ringing in ears)
- Nausea, vomiting, unsteadiness
- Visual disturbances/blurry vision
- Sensitivity to light and/or noise
- Abnormal drowsiness or sleepiness
- Delayed verbal or motor responses
- Vacant stare
- Convulsions
- Weakness of facial muscles, arms, or legs
- Loss of appetite

Exercise or activities that require a lot of concentration may cause symptoms to re-appear or worsen, thus increasing the time one needs to recover from a concussion.

III. BASELINE TESTING

According to the Center for Disease Control (CDC) baseline testing is a pre-season exam conducted by a trained health care professional. Baseline tests are used to assess a Tuskegee University athlete's balance and brain function (including learning and memory skills, ability to pay attention or concentrate, and how quickly he/she thinks and solve problems), as well as for the presence of any concussion symptoms. Results from baseline tests (or pre-injury tests) can be used and compared to a similar exam conducted by a health care professional during the season if a concussion occurs. Baseline testing generally takes place during the pre-season – ideally prior to the first practice.

A. THE PLAN

The process will begin with pre-season baseline testing. Every new (first year or transfer) student athlete in the sports of baseball, basketball (men and women), football, gymnastics, soccer, softball, cheerleading, track and field (pole vaulters and high jumpers), and volleyball must receive a pre-season baseline assessment for concussion which involves a check for concussion symptoms, as well as balance and cognitive (such as concentration and memory) assessments.

- The respective team's athletic trainers will conduct the following assessment for all new athletes: Computerized or paper-pencil neuropsychological tests may be included as a piece of an overall baseline test to assess a student-athlete's concentration, memory, and reaction time.
- The respective team's athletic trainer will also provide the educational material to all athletes on their respective teams and will acquire appropriate signatures on specific documentation.

During the baseline pre-season test, healthcare professionals should also assess for a prior history of concussion (including symptoms experienced and length of recovery from the injury). It is also important to record other medical conditions that could impact recovery after concussion,

such as a history of migraines, depression, mood disorders, or anxiety, as well as learning disabilities and Attention Deficit/Hyperactivity Disorder.

An athlete suspected of sustaining a concussion will be evaluated by the team's athletic trainer using the Graded Symptom Checklist (GSC). Should the team physician not be present, the athletic trainer will notify the team physician to develop an evaluation and a treatment plan. If able, an assessment of symptoms will be performed at the time of injury and then serially thereafter (i.e., 2-3 hours post-injury, 24 hours, 48 hours, etc.). The presence or absence of symptoms will dictate additional testing.

Any student-athlete diagnosed with symptoms of a concussion **will not return** to activity for the remainder of the day. Medical clearance will be determined by the team physician and or the combination of the team physician and athletic trainer involved.

The team athletic trainer will administer the Impact Testing when they deem the athlete capable of taking the test. These test results will be given to the team physician after results are received.

B. CONCUSSION ASSESSMENT

NO ATHLETE SUSPECTED OF HAVING A CONCUSSION IS PERMITTED TO RETURN TO PLAY THE SAME DAY, AND NO ATHLETE IS PERMITTED TO RETURN TO PLAY WHILE SYMPTOMATIC FOLLOWING A SUSPECTED CONCUSSION.

- **Baseline Testing:** performed on each athlete upon entering as a first year student, transfer, or for those athletes sustaining a concussion the previous season (reestablish a baseline)
- **Time of Injury:** clinical evaluation, GSC, and appropriate referral if needed; each athlete will receive a Head Injury Information Card that they can take with them.
- **1-3 hrs post-injury:** if available reevaluate, GSC and appropriate referral, if needed
- **Next day:** reevaluate, GSC
- **Follow-up evaluations** daily to track signs and symptoms
- **Administer Computerized or Paper-Pencil Neuropsychological Testing,** when athletic trainer and or team physician deems necessary
- **Once the athlete becomes asymptomatic:**
 - The athlete must be asymptomatic for 24 hours before any physical exertion activity will take place. This must be documented in the athletes file and the results of the Computerized or Paper-Pencil Neuropsychological Test must be placed in athletes' file.

5 Step Graduated Physical Exertion Return to Play Protocol

The protocol allows for a gradual increase in volume and intensity during the return to play process. The athlete is monitored for any concussion-like signs/symptoms during and after each physical exertion activity. The athlete will be reassessed prior to each step when it takes place.

The following steps are not ALL to be performed on the same day. In some situations, steps 1,2, or 3 may be completed on the same day, but usually will take place over a couple of days. The step process will be determined by each teams' respective athletic trainer. The activities in each step will be specific as deemed by each athletic trainer and with consultation of the team physician.

- **Step 1:** 10-20 minute stationary bike ride (low intensity); monitor signs/symptoms as well as vital signs.
- **Step 2:** Interval bike ride: sprinting and recovery periods; athletic trainer may add other activities (i.e. squats, pushups, sit-ups, etc); monitor signs/symptoms as well as vital signs.
- **Step 3:** Running activities (short sprints); plyometric advances as well as sport specific activities as deemed by athletic trainer; monitor signs/symptoms as well as vital signs.
- **Step 4:** Limited, controlled return to full-contact practice; monitor signs/symptoms as well as vital signs.
- **Step 5:** Return to FULL participation in a practice.

IV. REPORTING A CONCUSSION

Anyone that suspects a student athlete has a concussion, or notices any athlete suffering from any symptoms of a concussion, must report the concerns to the appropriate member of Tuskegee University Sports Medicine Staff.

V. ACUTE MANAGEMENT OF A CONCUSSION

Any athlete that suffers from symptoms of a concussion shall be removed from athletic participation for an evaluation by the Sports Medicine Staff. Following the evaluation from the Sports Medicine Staff, decisions will be made whether the athlete should be transported to the local hospital for emergency care and/or further diagnostic testing.

Once a concussion is diagnosed by a Physician, and any emergent care issues are addressed, a computerized or paper-pencil neuropsychological test will be administered by the Sports Medicine Staff. Any athlete that is diagnosed with a concussion by a physician or athletic trainer shall not return to participation for the remainder of that day. This is to ensure that the athlete does not negatively influence the nature of the injury by further exerting themselves.

VI. POST-ACUTE CONCUSSION MANAGEMENT

Follow-up Physician care will be determined on an individual basis as directed by Tuskegee University Sports Medicine Staff. Computerized or paper-pencil neuropsychological testing will be performed as determined by the Sports Medicine Staff based on the individual, and their symptoms. Once a student-athlete has been asymptomatic for at least 24 hours and the computerized or paper-pencil neuropsychological testing scores have returned to the baseline scores, a gradual return-to-play protocol shall be implemented, unless directed otherwise by a Physician.

VII. RETURN TO PLAY PROTOCOL

1. No activity – complete physical and cognitive rest.
2. Light aerobic activity – walking, swimming, or stationary biking; no weight training.
3. Sport-specific activity – running drills; no head impact activities.
4. Non-contact training drills – progression to more complex training drills; may start light weight training.
5. Full contact practice – following medical clearance, participate in normal training activities.
6. Return to play – Normal game play.
7. Clearance

This protocol is a stepwise progression. The athlete can and should continue to proceed to the next level if asymptomatic at the current level. Each step should take 24 hours unless otherwise directed by the team physician. If any post-concussion symptoms occur during the stepwise progression, then the athlete will drop back to the previous asymptomatic level and try the progression again after a further 24 hour period of rest has passed.

NO ATHLETE WILL RETURN TO FULL ACTIVITY OR COMPETITION UNTIL ASYMPTOMATIC IN LIMITED, CONTROLLED, AND FULL-CONTACT ACTIVITIES, AND CLEARED BY TEAM PHYSICIAN. THESE ACTIVITIES ALSO INCLUDE WEIGHT TRAINING AS WELL AS ACTIVITY COURSES.

VIII. FACTORS IN CONCUSSION MANAGEMENT

Tuskegee University recognizes that there are several factors that influence the concussion management policy. These factors include, but are not limited to:

- Medical History
- Symptoms
- Age
- Medication
- Sport

If it is determined by the sports medicine staff that the athlete should follow an adapted concussion management protocol, it is in an effort to ensure the safety of the student-athlete during their recovery from a concussion. At any point throughout the recovery of the student-athlete, a neurologist, or other specialist specifically trained in concussion management may be consulted as determined by the Physician.

The entire management process from initial evaluation, until eventual return to full participation, including any diagnostic testing, shall be documented in the student athletes medical file.

CONCUSSION MANAGEMENT POLICY ACKNOWLEDGEMENT

I, the undersigned, acknowledge that I have read Tuskegee University's Athletic Department Concussion Management Policy and that I understand the information included in this policy.

Name (print) _____

TU ID# _____ Date of Birth _____

Signature _____ Date _____

Parent/Guardian Signature (if under 18) Date _____

TUSKEGEE UNIVERSITY

TBI/Concussion Management Plan Athletic Personnel Acknowledgement

As an Athletic Personnel it is important to recognize the signs, symptoms, and behaviors of concussions. By signing this form you are stating that you understand the importance of recognizing and responding to concussions and head injuries per the guidelines set forth by the NCAA.

Athletic Personnel Agreement:

I _____ have completed the “Response and Recognition” video on the United Educators website, facilitated by personnel at Tuskegee University. I understand the signs, symptoms, and behaviors that are associated with a concussion and agree to remove the athlete from practice/play if exhibited and/or is suspected. I understand that it is my responsibility to inform the team physicians and/or athletic trainer if I suspect a concussion or if a suspected concussion is reported to me and that the athlete cannot return to practice or play before providing me with written clearance from the team physician.

I am aware of the possible consequences of the athlete returning to practice/play too soon.

Signature _____
Athletic Personnel

Date _____

Sport _____

TUSKEGEE UNIVERSITY

TBI/ Concussion Management Plan Medical Providers Acknowledgement

As a medical provider it is important to recognize the signs, symptoms, and behaviors of concussions. As a medical provider it is important to understand the protocols within Tuskegee University's TBI/ Concussion Management Plan. By signing this form you are stating that you understand the guidelines set forth by the NCAA and agree that it is your responsibility to ensure that these protocols are followed by everyone within Tuskegee University's Athletic Department.

Medical Providers Agreement:

I _____ have completed the necessary medical training and understand the standard of care expected by the NCAA as stated in their concussion management guidelines. I also understand that I serve as the authority in such cases and I am to act in the best interest of Tuskegee University when managing suspected concussion cases. Failure to manage this protocol in a responsible manner would be a derogation of duties and would be in direct contrast to the Hippocratic Oath that I took as a medical provider. I understand my responsibilities to the management of the TBI/ Concussion Management Plan and acknowledge the management role that I must play in order for it to be effective.

Signature _____
Medical Provider

Date _____

Sport _____