



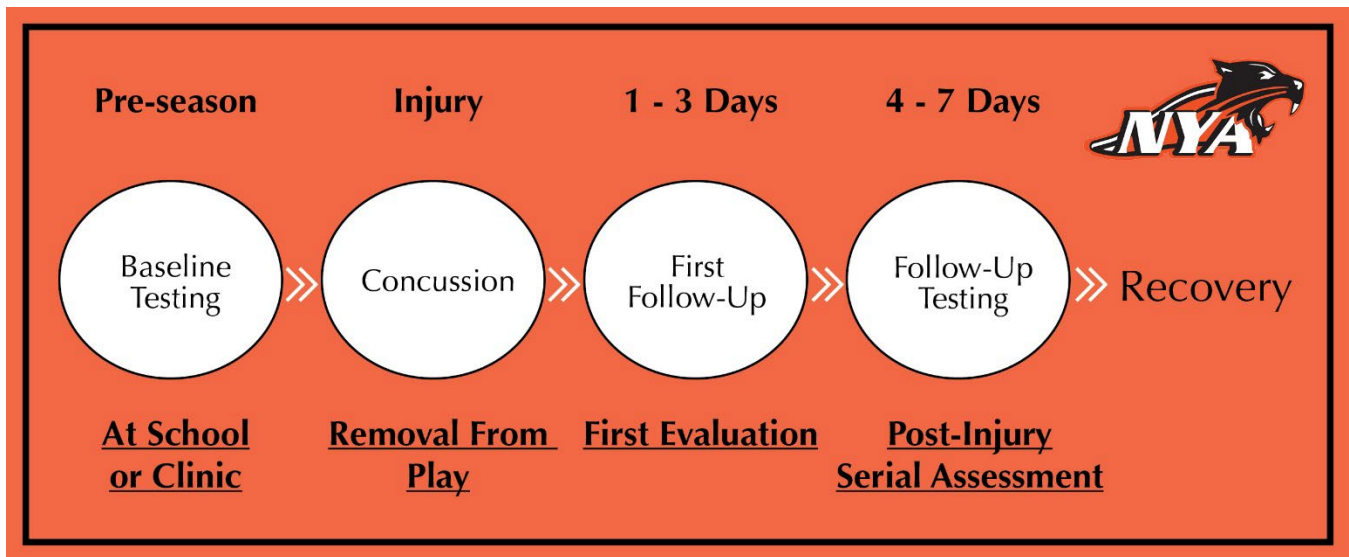
Concussion Management Protocol North Yarmouth Academy

North Yarmouth Academy will be utilizing **Sportgait** for both baseline testing and as a post-concussive tool to assist in return to academics and return to play decisions. All NYA students in grades six through postgraduate will be administered a baseline neurocognitive exam on a yearly or bi-yearly basis.

Definition of a Concussion

- Direct or indirect forces to the head, neck, face or body
- Results in rapid onset of short-lived neurological impairment
- May or may not involve a loss of consciousness
- Recovery varies from days to months or potentially longer
McCrory et al. (2017). Brit J Sports Med

Process of Concussion Recovery



Onset of Concussion/Symptoms

Any player suspected of a concussion will be removed from activity for the day and not return to activity until cleared by protocol. They will be fully evaluated by an Athletic Trainer, Nurse, or other Health Care Professional as soon as feasible.

- Call EMS/911 immediately if any loss of consciousness, decreased level of consciousness, drowsiness, irregular breathing, worsening headache, persistent vomiting or seizures are noted.
- Evaluation will include an exam, complete history, a symptom checklist, immediate memory and recall memory, modified BESS, and VOMS.
- Parent or Guardian of any student suspected of sustaining a concussion will be notified by attending Athletic Trainer, Coach, or School Nurse.

Evaluation

Student will be reevaluated by the School Nurse or Athletic Trainer the following day to include:

- Symptom checklist (on **Sportgait**)
- Immediate memory and recall memory
- Modified BESS
- VOMS

Based on assessment, the student's symptoms will be tiered as **mild, moderate, or severe**.

Any student with **moderate** to **severe** symptoms and/or needing accommodations for academics must have documentation provided by a Physician of their choice or Dr. Sedgwick.

If academic accommodations are needed, the student may not participate in athletics or extracurricular activities until academics are back to good standing.

Physicians will provide academic accommodations checklist to School Nurse.

Return to Academics

Student will begin to attempt academic commitments and progress based on symptoms, closely supervised by the School Nurse and Athletic Trainer.

Student will:

- A symptom checklist will be performed daily, at minimum, on **Sportgait**. Student should check in with School Nurse before school and/or Athletic Trainer after school.
- Self-monitor symptoms during class and utilize accommodations as needed. If symptoms do not improve after 15-20 minutes, return to the School Nurse for assessment and management.
- School accommodations and symptom management will be communicated to Counselors/Teachers as needed by school nurse. Examples include but are not limited to Tylenol, sunglasses, ear plugs, shortened classes, use of a quality note taker, etc.
- If needed for a moderate or severe concussion, a Concussion Management Team will be formed to support the student. This could include the student's parents, Head of Middle or Upper School, Dean of Upper School, School Counselor, Advisor and/or other Teachers, School Nurse, Athletic Director, and Athletic Trainer. The team will support the student until support is no longer necessary.

Return to Athletics

Once asymptomatic, and when neurocognitive scores are reassuring, the student will be required to obtain clearance by an Approved Healthcare Professional.

The student will begin a graduated return-to-play protocol based on the Maine Department of Education guidelines, a standard 5-step activity progression with 24-hours between each step.

If a student does not tolerate a day in the 5-step return (increase in symptoms), they will not progress to the next step, rest 24-hours, and return to the step previously tolerated.

A Post Injury **Sportgait** test will be performed before clearing the athlete to sports.

Graduated Return-to-Play Protocol

1. **Light aerobic exercise:** Intensity below 70%; no resistance training (preferably stationary bike)
2. **Sport-specific cardio:** Running, skating drills; no head impact drills.
3. **Non-contact sports practice:** Progression to more complex training drills, may start resistance training.
4. **Full-contact practice:** Following physician clearance (if needed), participate in normal training.
5. **Return to play:** Normal game play.

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