The Board of Education of the Odessa Montour school District adopts the following concussion management policy to support the proper evaluation and management of head injuries.

A sports concussion is a mild traumatic brain injury that occurs when normal brain functioning is disrupted by a blow or jolt to the head. Recovery from a concussion will vary. Avoiding re-injury and over-exertion until fully recovered is proper concussion management.

While district staff will exercise reasonable care to protect students, head injuries may still occur. Physical education teachers, coaches, nurses, and other appropriate staff will receive training to recognize the signs, symptoms and behaviors consistent with a concussion. Any student exhibiting those signs, symptoms or behaviors while participating in a school sponsored class, extracurricular activity or interscholastic athletic activity shall be removed from the game or activity.

If a student sustains a concussion at a time other than when engaged in a school-sponsored activity, the district expects the parent/legal guardian to report the condition to the school nurse or coach so that the district can support the appropriate management of the condition.

The student shall not return to school or activity until cleared by health care professional. This includes but is not limited to the student’s primary care physician or the school medical director. In the case of students who participate in interscholastic sports, the school medical director will make the final decision on return to participation in sport. Any student who continues to have signs or symptoms upon return to activity must be removed from play and re-evaluated by their health care provider.
Return to Play/Activity Protocol Following a Concussion

When a student shows signs or symptoms of a concussion or is suspected to have sustained a brain injury after an evaluation by coaching staff or medical personnel at the time of the incident:

1. The student will not be allowed to return to play/activity in the current game or practice.
2. The student should not be left alone, and regular monitoring for deterioration is essential over the next 24 hours following injury.
3. Following initial injury, the Student must follow up with their Primary Care Physician or by an Emergency Department within the first 24 hours.
4. Return to play must follow a medical clearance and successful completion of the Return to play protocol.
5. The Schools Medical Director has final determination for students return to play status.

Proper concussion management is rest until all symptoms resolve and the graded program of exertion before return to sport/activity. The program is broken down into six steps in which only one step is covered per one 24 hour period. The 6 steps involved in the Return to Play Protocol are

1. No exertional activity until asymptomatic
2. Light aerobic exercise such as walking, stationary bike, etc. . No resistance training.
3. Sport/activity specific exercise such as running, ect. Progressive addition of light resistance training.
4. Non-contact training skill drills.
5. Full contact training in practice setting (if a contact/collision sport.
6. Return to competition.

If any concussion symptoms recur, the athlete should drop back to the previous level and try to progress after 24 hours of rest. In addition, the student-athlete should also be monitored for recurrence of symptoms due to mental exertion, such as reading working on a compert or taking a test.