



July 2015

Re: Concussion Information for Parents

Dear Parent/Guardian:

Montgomery County Public Schools (MCPS) has a *Concussion Plan* that includes comprehensive, systemwide standards and procedures regarding student-athletes who suffer head injuries and concussions. A complete description of the MCPS Concussion Plan and corresponding components are available in the *Health and Safety* section of the MCPS Athletics web page at <http://www.montgomeryschoolsmd.org/departments/athletics>.

Education

Education is an important component of the *Concussion Plan*. It is important that parents and students understand the serious nature of concussions, and corresponding signs and symptoms. At a minimum, parents must review a document entitled *Head's Up—A Fact Sheet for Parents*. Student-athletes are required to review a similar document designed for student-athletes. Also, a *Health and Safety PowerPoint* will be presented to all student-athletes which includes information regarding concussions. The PowerPoint is available in the *Health and Safety* section of the MCPS Athletics web page. Additional information on the Athletics web page which parents and students are encouraged to review includes:

- *MCPS Concussion Plan*
- *What is a Concussion?*
- *Concussion in Sports: What You Need to Know* (an on line 30-minute Concussion Course)
- *A Parent's Guide to Concussions*

Baseline Concussion Testing

MCPS student-athletes are required to have a baseline test on file with the school prior to participating in a scrimmage or contest. Baseline tests are good for two-years. Thus, if a student had a baseline test last year, he or she will not need to retake the test this year. Additional information regarding baseline concussion testing is included in a letter that is distributed to parents (also available on the MCPS web page). The MCPS Baseline Testing Plan is located in the *Health and Safety* section of the MCPS Athletics web page.

Athletic Trainers

Athletic trainers are assigned to each MCPS high school. Athletic trainers will assist coaches and student-athletes in many health and safety-related areas, including on-site evaluation of head injuries, implementation of baseline testing and in monitoring gradual return-to-play protocol for student who have suffered a concussion.

Forms

Prior to participation, student-athletes are required to submit three specific forms that relate directly to concussions, concussion awareness, and baseline concussion testing:

- *Pre-Participation Head Injury/Concussion Report Form for Extracurricular Activities*
- *Concussion Awareness (Parent/Student-Athlete Acknowledgement Statement)*
- *Consent Form: ImPACT Baseline Concussion Testing*

Procedures

Detailed procedures regarding head injuries and concussions are outlined on the *MCPS Concussion Plan*. A general overview of the *Concussion Plan* and corresponding procedures include:

- Any player who exhibits signs, symptoms, or behaviors consistent with a concussion shall be removed from the practice or contest and shall not return to play until cleared by an authorized health care provider—the clearance form must be signed.
- The player's parents shall be informed that their son or daughter may have suffered a concussion and shall be advised to take their child to an authorized health care provider as soon as possible. The parent will be issued the MPSSAA form **Medical Clearance for Suspected Head Injury*.
- Appropriate school personnel, including administrators, athletic director, and school nurse, will be informed of the injury. Appropriate follow-up will be initiated.
- If the player suffered a concussion, he or she may begin a supervised gradual return-to-play process on the date indicated on the form *Medical Clearance for Suspected Head Injury*.
- The player's gradual return to full activity is monitored by school staff over a five-day period, according to the MPSSAA form **Graduated Return to Play Protocol*.
- The player may resume full participation after he or she successfully completes a supervised, gradual return-to-play protocol.

*These forms are located in the Health and Safety section of the MCPS Athletics web page at <http://www.montgomeryschoolsmd.org/departments/athletics>.

Sincerely,



William G. Beattie, Ed.D.
Director of Systemwide Athletics

WGB:ngm

Copy to:

Dr. Zuckerman
Mr. Sullivan

301-279-3144

July 2015

Re: Baseline Testing Information for Parents

Dear Parent/Guardian:

The 2015–2016 school year will be the third year that Montgomery County Public Schools (MCPS) will implement baseline concussion testing for student-athletes. Baseline testing is a neuropsychological test designed to assist in determining whether an athlete is sufficiently recovered from a concussion to return to active participation. Baseline testing involves an athlete taking a test in various areas of cognitive performance prior to the start of a sport season in order to establish a “baseline” of cognitive skills. If a player suffers a concussion, subsequent baseline tests may be administered and compared to the original test. Baseline testing provides a tool that can be used in conjunction with other tools or assessment techniques to determine when an athlete can safely return to play following a concussion.

MCPS utilizes a software tool called ImPACT (Immediate Post Concussion Assessment and Cognitive Testing) in order to implement systemwide baseline concussion testing. ImPACT is a computerized exam utilized in many professional, collegiate, and high school sports programs across the country to diagnose and manage concussions. If an athlete is believed to have suffered a head injury during competition, ImPACT can potentially be used to help determine the severity of the injury and when the injury has fully healed.

Certified athletic trainers (ATCs) provided by various health care vendors (identified below) will assist school athletic department personnel in administering the test. This non-invasive test is set up in “video-game” type format and takes about 30 minutes to complete. The test is administered at the school at no cost to parents. The test tracks information such as memory, reaction time, speed, and concentration. It, however, is not an IQ test. MCPS will require that all students have the results of a current baseline test on file with the school prior to participating in a scrimmage or contest. A baseline test is good for two years, thus a “current” baseline test result is one that has been administered within the past two years. Student-athletes who took the test in the course of the 2014–2015 school year will not have to take the test again in 2015–2016.

If a concussion is suspected, the athlete will have the opportunity to retake the test at no charge. Please understand that it is not required that students take a second baseline test following a concussion, and that parents are not required to use baseline tests as a criteria to resume participation. However, the test data will potentially enable health professionals to determine when return-to-play is appropriate and safe for the injured athlete. Both the preseason and post-injury test data may be given to the health care provider of your choice. A healthcare professional does not have to use baseline testing results as a condition for a player returning to completion.

MCPS has partnered with four vendors to assist in the administration of the ImPACT testing:

1. **Adventist Rehabilitation:** Churchill, Clarksburg, Einstein, Kennedy, Richard Montgomery, Northwest, Paint Branch, Poolesville, Rockville, Springbrook, Watkins Mill, Wheaton, Wootton
2. **Pivot:** Damascus, Gaithersburg, Seneca Valley
3. **MedStar:** BCC, Blair, Blake, Walter Johnson, Magruder, Northwood, Sherwood, Whitman
4. **Metro Orthopedic Specialists (M.O.S.):** Quince Orchard

To emphasize, the ImPACT testing procedures are non-invasive, and they pose no risks to your child. MCPS is pleased to provide this service, free of charge, for players and parents. The test can provide an important tool for health care providers for managing concussions and preventing potential brain damage that can occur with multiple concussions. Please review the enclosed form and return it with the appropriate signatures. If you have any further questions regarding this program please feel free to contact your local school's athletic director.

Sincerely,



William G. Beattie, Ed.D.
Director of Systemwide Athletics

WGB:ngm

Enclosure

Copy to:
Dr. Zuckerman
Mr. Sullivan

HEADS+UP

CONCUSSION IN HIGH SCHOOL SPORTS

A FACT SHEET FOR **PARENTS**

What is a concussion?

A concussion is a type of traumatic brain injury. Concussions are caused by a bump or blow to the head. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious.

You can’t see a concussion. Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If your child reports any symptoms of concussion, or if you notice the symptoms yourself, seek medical attention right away.

What are the signs and symptoms of a concussion?

If your child has experienced a bump or blow to the head during a game or practice, look for any of the following signs of a concussion:

SYMPTOMS REPORTED BY ATHLETE	SIGNS OBSERVED BY PARENTS/GUARDIANS
<ul style="list-style-type: none"> • Headache or “pressure” in head • Nausea or vomiting • Balance problems or dizziness • Double or blurry vision • Sensitivity to light • Sensitivity to noise • Feeling sluggish, hazy, foggy, or groggy • Concentration or memory problems • Confusion • Just “not feeling right” or “feeling down” 	<ul style="list-style-type: none"> • Appears dazed or stunned • Is confused about assignment or position • Forgets an instruction • Is unsure of game, score, or opponent • Moves clumsily • Answers questions slowly • Loses consciousness (even briefly) • Shows mood, behavior, or personality changes

How can you help your child prevent a concussion or other serious brain injury?

- Ensure that they follow their coach’s rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.
- Make sure they wear the right protective equipment for their activity. Protective equipment should fit properly and be well maintained.
- Wearing a helmet is a must to reduce the risk of a serious brain injury or skull fracture.
 - However, helmets are not designed to prevent concussions. There is no “concussion-proof” helmet. So, even with a helmet, it is important for kids and teens to avoid hits to the head.

What should you do if you think your child has a concussion?

SEEK MEDICAL ATTENTION RIGHT AWAY. A health care professional will be able to decide how serious the concussion is and when it is safe for your child to return to regular activities, including sports.

KEEP YOUR CHILD OUT OF PLAY. Concussions take time to heal. Don’t let your child return to play the day of the injury and until a health care professional says it’s OK. Children who return to play too soon—while the brain is still healing—risk a greater chance of having a repeat concussion. Repeat or later concussions can be very serious. They can cause permanent brain damage, affecting your child for a lifetime.

TELL YOUR CHILD’S COACH ABOUT ANY PREVIOUS CONCUSSION. Coaches should know if your child had a previous concussion. Your child’s coach may not know about a concussion your child received in another sport or activity unless you tell the coach.

If you think your teen has a concussion:

Don’t assess it yourself. Take him/her out of play. Seek the advice of a health care professional.

It’s better to miss one game than the whole season.

For more information, visit www.cdc.gov/Concussion.



HEADS+UP

CONCUSSION IN HIGH SCHOOL SPORTS

A FACT SHEET FOR **ATHLETES**

Concussion facts:

- A concussion is a brain injury that affects how your brain works.
- A concussion is caused by a bump, blow, or jolt to the head or body.
- A concussion can happen even if you haven't been knocked out.
- If you think you have a concussion, you should not return to play on the day of the injury and not until a health care professional says you are OK to return to play.

What are the symptoms of a concussion?

Concussion symptoms differ with each person and with each injury, and they may not be noticeable for hours or days. Common symptoms include:

- Headache
- Confusion
- Difficulty remembering or paying attention
- Balance problems or dizziness
- Feeling sluggish, hazy, foggy, or groggy
- Feeling irritable, more emotional, or "down"
- Nausea or vomiting
- Bothered by light or noise
- Double or blurry vision
- Slowed reaction time
- Sleep problems
- Loss of consciousness

During recovery, exercising or activities that involve a lot of concentration (such as studying, working on the computer, or playing video games) may cause concussion symptoms to reappear or get worse.

What should I do if I think I have a concussion?

DON'T HIDE IT. REPORT IT. Ignoring your symptoms and trying to "tough it out" often makes symptoms worse. Tell your coach, parent, and athletic trainer if you think you or one of your teammates may have a concussion. Don't let anyone pressure you into continuing to practice or play with a concussion.

GET CHECKED OUT. Only a health care professional can tell if you have a concussion and when it's OK to return to play. Sports have injury timeouts and player substitutions so that you can get checked out and the team can perform at its best. The sooner you get checked out, the sooner you may be able to safely return to play.

TAKE CARE OF YOUR BRAIN. A concussion can affect your ability to do schoolwork and other activities. Most athletes with a concussion get better and return to sports, but it is important to rest and give your brain time to heal. A repeat concussion that occurs while your brain is still healing can cause long-term problems that may change your life forever.

How can I help prevent a concussion?

Every sport is different, but there are steps you can take to protect yourself.

- Follow your coach's rules for safety and the rules of the sport.
- Practice good sportsmanship at all times.

If you think you have a concussion:
Don't hide it. Report it. Take time to recover.

It's better to miss one game than the whole season.

For more information, visit www.cdc.gov/Concussion.





Sudden Cardiac Arrest (SCA) Information for Parents and Student Athletes

Definition: Sudden Cardiac Arrest (SCA) is a potentially fatal condition in which the heart suddenly and unexpectedly stops beating. When this happens, blood stops flowing to the brain and other vital organs.

SCA in student athletes is rare; the chance of SCA occurring to any individual student athlete is about one in 100,000. However, student athletes' risk of SCA is nearly four times that of non-athletes due to the increased demands on the heart during exercise.

Causes: SCA is caused by several structural and electrical diseases of the heart. These conditions predispose an individual to have an abnormal rhythm that can be fatal if not treated within a few minutes. Most conditions responsible for SCA in children are inherited, which means the tendency to have these conditions is passed from parents to children through the genes. Other possible causes of SCA are a sudden blunt non-penetrating blow to the chest and the use of recreational or performance-enhancing drugs and/or energy drinks.

Warning Signs of SCA	Emergency Response to SCA
<ul style="list-style-type: none"> • SCA strikes immediately. • SCA should be suspected in any athlete who has collapsed and is unresponsive. <ul style="list-style-type: none"> ○ No response to tapping on shoulders ○ Does nothing when asked if he/she is OK • No pulse 	<ul style="list-style-type: none"> • Act immediately; time is most critical to increase survival rates. • Recognize SCA. • Call 911 immediately and activate EMS. • Administer CPR. • Use Automatic External Defibrillator (AED).

Warning signs of potential heart issues: The following need to be further evaluated by your primary care provider.

- Family history of heart disease/cardiac arrest
- Fainting, a seizure, or convulsions during physical activity
- Fainting or a seizure from emotional excitement, emotional distress, or being startled
- Dizziness or lightheadedness, especially during exertion
- Exercise-induced chest pain
- Palpitations: awareness of the heart beating, especially if associated with other symptoms such as dizziness
- Extreme tiredness or shortness of breath associated with exercise
- History of high blood pressure

Risk of Inaction: Ignoring such symptoms and continuing to play could be catastrophic and result in sudden cardiac death. Taking these warning symptoms seriously and seeking timely appropriate medical care can prevent serious and possibly fatal consequences.

Information used in this document was obtained from the American Heart Association (www.heart.org), Parent Heart Watch (www.parentheartwatch.org), and the Sudden Cardiac Arrest Foundation (www.sca-aware.org). Visit these sites for more information.

Frequently Asked Questions about Sudden Cardiac Arrest (SCA)

What are the most common causes of Sudden Cardiac Arrest (SCA) in a student athlete?

SCA is caused by several **structural** and **electrical** diseases of the heart. These conditions predispose an individual to have an abnormal rhythm that can be fatal if not treated within a few minutes. Most conditions responsible for SCA in children are **inherited**, which means the tendency to have these conditions is passed from parents to children through the genes. Some of these conditions are listed below.

1. *Hypertrophic cardiomyopathy (HCM)*: HCM involves an abnormal thickening of the heart muscle and it is the most common cause of SCA in an athlete.
2. Coronary artery anomalies: The second most common cause is congenital (present at birth) abnormalities of coronary arteries, the blood vessels that supply blood to the heart.
3. Other possible causes of SCA are:
 - a. *Myocarditis*: an acute inflammation of the heart muscle (usually due to a virus).
 - b. Disorders of heart electrical activity such as:
 - i. *Long QT syndrome*.
 - ii. *Wolff-Parkinson-White (WPW) syndrome*.
 - iii. *Catecholaminergic Polymorphic Ventricular Tachycardia (CPVT)*.
 - c. *Marfan syndrome*: a condition that affects heart valves, walls of major arteries, eyes, and the skeleton.
 - d. Congenital aortic valve abnormalities.
4. *Commotio Cordis*: concussion of the heart from **sudden blunt non-penetrating blow** to the chest
5. Use of recreational, **performance-enhancing** drugs, and **energy drinks** can also bring on SCA.

How can we minimize the risk of SCA and improve outcomes?

The risk of SCA in student athletes can be minimized by providing appropriate prevention, recognition, and treatment strategies. One important strategy is the requirement for a yearly pre-participation screening evaluation, often called a sports physical, performed by the athlete's medical provider.

1. It is very important that you **carefully and accurately complete the personal history and family history section** of the "Pre-Participation Physical Evaluation Form" available at <http://www.mpssaa.org/HealthandSafety/Forms.asp>.
2. Since the majority of these conditions are inherited, **be aware of your family history**, especially if any close family member:
 - a. had sudden unexplained and unexpected death before the age of 50.
 - b. was diagnosed with any of the heart conditions listed above.
 - c. died suddenly /unexpectedly during physical activity, during a seizure, from Sudden Infant Death Syndrome (SIDS) or from drowning.
3. **Take seriously the warning signs and symptoms of SCA**. Athletes should notify their parents, coaches, or school nurses if they experience any of these warning signs or symptoms.
4. Schools in Maryland have AED policies and emergency preparedness plans to address SCA and other emergencies in schools. Be aware of your school's various preventive measures.
5. If a cardiovascular disorder is suspected or diagnosed based on the comprehensive pre-participation screening evaluation, a referral to a child heart specialist or pediatric cardiologist is crucial. Such athletes will be excluded from sports pending further evaluation and clearance by their medical providers.



For official use only: Name of Athlete _____ Sport/season _____ Date Received _____
--

PRE-PARTICIPATION HEAD INJURY/CONCUSSION REPORTING FORM FOR EXTRACURRICULAR ACTIVITIES

This form should be completed by the student's parent(s) or legal guardian(s). It must be submitted to the Athletic Director, or official designated by the school, prior to the start of each season a student plans to participate in an extracurricular athletic activity.

Student Information

Name: _____

Grade: _____

Sport(s): _____

Home Address: _____

Has student ever experienced a traumatic head injury (a blow to the head)? Yes _____ No _____

If yes, when? Dates (month/year): _____

Has student ever received medical attention for a head injury? Yes _____ No _____

If yes, when? Dates (month/year): _____

If yes, please describe the circumstances: _____

Was student diagnosed with a concussion? Yes _____ No _____

If yes, when? Dates (month/year): _____

Duration of Symptoms (such as headache, difficulty concentrating, fatigue) for most recent concussion: _____

Parent/Guardian: Name: _____ (Please print)

Signature/Date _____

Student Athlete: Signature/Date _____



For official use only: Name of Athlete _____ Sport/season _____ Date Received _____

Parent/Student Athlete Acknowledgement Statement

Parent/Guardian

I acknowledge that I have read and understand the following:

- Sudden Cardiac Arrest (SCA) Information Sheet
- Concussion Awareness Information Sheet

PRINT NAME

PARENT/GUARDIAN SIGNATURE

Date _____

Student Athlete

I acknowledge that I have read and understand the following:

- Sudden Cardiac Arrest (SCA) Information Sheet
- Concussion Awareness Information Sheet

PRINT NAME

STUDENT ATHLETE SIGNATURE

Date _____