Student Accidents and Injuries - Treatment and Reporting

Definitions:

Appropriate Medical Professional:

- For Cardiac Events: a medical doctor trained in the evaluation of Cardiac Events
- For concussions: a medical doctor or psychologist neuropsychologically trained in the
 evaluation and management of concussions. Because they act under the supervision of a
 medical doctor, this also applies to Physician Assistants and Nurse Practitioners where
 obtaining a medical doctor or psychologist neuropsychologically trained in the evaluation
 and management of concussions is not practical.

Injury: An injury is any physiological damage to living tissue caused by immediate physical stress. Injuries are acute, physical conditions. Mental disorders and chronic disability, although these may be the eventual consequences of physical injury, are not included in the definition of injury as it is used in this regulation.

- **Minor Injury**: A minor injury is an injury that requires limited attention such as cleansing, antiseptic, application of a band-aid, etc. Minor injuries may be treated by a school nurse or a designated staff member who has been trained in first-aid procedures. An injury such as a paper cut would be considered a minor injury.
- **Serious injury**: A serious injury includes any type of head, brain, heart, neck, eye, tooth, broken bone or back injury. This is not an exhaustive list of what is considered a serious injury.

Note: These are not the only two categories of injury. An injury could fall outside of the "minor" threshold and not rise to the standard of "serious" injury.

Reporting of Non-Athletic Accidents and Injuries

All accidents and non-minor injuries occurring at school in the course of a school day or during any school-sponsored activity at any time of day shall be reported in the following manner:

- 1. All accidents and non-minor injuries that occur during the school day in the buildings, on school grounds, en route to and from school, or during school-related activities at any time of day shall be reported to the school nurse as soon as feasible.
- 2. The school nurse shall be responsible for completing an accident/injury report form in the District's student information system, the current version of which is attached as Attachment A.
- 3. The school nurse shall assess whether the accidents and injuries are of a repetitive nature or occur repeatedly in a specific area indicating need for repair or adjustment in the environment and advise the building principal of any such concern or observation.
- 4. The school nurse shall provide a copy of the accident/injury report to the supervisor/director and building principal.

Medication Prescribed for Injury

- 1. Medication prescribed by a physician shall only be administered by authorized personnel as set forth in Policy and Administrative Regulation 5406.
- 2. In all such cases, parental permission for administration of medication must be granted and current physician orders for treatment of injuries must be provided.

Student and Parent Awareness and Education

The following procedures apply to all student-athletes and all coaches (including volunteer coaches) of school-related activities:

- 1. The District may hold an informational meeting prior to the start of each athletic season for all ages of competitors regarding symptoms of Cardiac Events, concussions and other head injuries, the importance of proper concussion management and how pre-season baseline assessments can aid in the evaluation, management and recovery process.
- 2. Every student-athlete and parent/guardian of any student participating in an athletic activity is required to sign and return the following documentation to the student's school:
 - a. An acknowledgment of receipt and review of the concussion and traumatic brain injury information sheet which is provided to student-athletes and their parents/guardians every school year.
 - b. An acknowledgment of receipt and review of a "Cardiac Event Symptoms and Warning Signs Information Sheet" which is provided to student-athletes and their parents/guardians every school year.

These forms are available in Administrative Regulation 6146: Student Athletics

Procedures for All Injuries

The general responsibilities of the personnel at each school include:

- 1. Provide care appropriate to medical situation by qualified personnel & access EMS if warranted.
- 2. Notify the child's parent or guardian.
- 3. When necessary, arrange transportation for the child.
- 4. When necessary, guide parents/guardians to sources of treatment.

The school nurse, teacher, coach, athletic trainer, and other school personnel shall not diagnose. Medication shall only be administered by authorized personnel as set forth in

Policy and Administrative Regulation 5406. All accidents that involve non-minor injuries that occur during the school day in the buildings, on school grounds, en route to and from school, or during school-related activities at any time of day shall be reported to the school nurse as soon as feasible.

Additional Procedures for Serious Accidents and Injuries

Serious injuries shall be reported as soon as possible to the building principal and to the office of the Superintendent of Schools. In addition, the following persons shall be informed, and in this order:

- 1. Emergency response personnel (not always required for tooth injury);
- 2. The student's parents/guardians.

The school will encourage the parent/guardian to report the student's injury to the family's healthcare professional.

In case the parent/guardian cannot be reached, the school nurse, principal, athletic trainer and/or athletic director will contact the emergency contact as listed in the District's student information system.

Additional Procedures for Serious Injuries to Student-Athletes

All serious injuries to student-athletes should be reported to the (head) athletic trainer as soon as possible. Coaches are responsible for reinforcing this requirement with student-athletes.

The athletic training staff shall keep head coaches and the athletic director at each secondary school informed of student-athlete injury status.

1. Pre-Testing/Baseline Concussion Testing for Student Athletes

- a. The District uses the ImPACT (Immediate Post Concussion Assessment and Cognitive Testing) Concussion Management System, which is a computerized baseline evaluation of a student's neurocognitive state that tracks memory, reaction time, brain processing speed, concentration, and visual motor skills.
- b. The ImPACT test is not a diagnostic tool, but it does provide objective data. It is a return-to-play manager that provides data that physicians and athletic trainers can revisit for comparative purposes in the event of a head injury.
- c. The ImPACT test is required and free to District student athletes in selected sports (See below).
- d. ImPACT is not recommended for children younger than age 12.

- e. All individual testing is done at home. In the event a student cannot complete the testing at home, the student will have the option to test at school and on a school device, if necessary.
- f. The District currently tests using ImPACT based on assumed risk of specific sports. Students participating at any level--middle school, freshman, junior varsity and varsity--of the following designated interscholastic and club sports complete the ImPACT test:
 - Football
 - Soccer
 - Lacrosse
 - Field Hockey
 - Basketball
 - Wrestling
 - Diving
 - Ice Hockey
 - Rugby
 - Cheerleading
 - Volleyball
 - Baseball Softball

2. Evaluation and Management: Head Injury WITHOUT Loss of Consciousness, With Athletic Trainer Present

- a. Coach or athletic trainer removes student from the contest or activity as well as any other activities that may pose a risk for the student pending further notice.
- b. Athletic trainer checks for symptoms using a District-approved head injury evaluation form (e.g., Acute Concussion Evaluation).
- c. Once removed from play due to a suspected head injury, the student will not be permitted to return to the contest or activity and the coach or athletic trainer will contact the student's parent/guardian.
 - 1. Parents/guardians are provided a head injury fact sheet.
 - 2. Parents/guardians are referred to an Appropriate Medical Professional for an acute concussion evaluation.
- d. After an Appropriate Medical Professional determines the student is symptom free, the student may begin a gradual return to play as outlined in this regulation

Symptom recurrence upon gradual return to play: If, upon return to play, symptoms have not resolved or have returned in the estimation of the athletic trainer or other school medical personnel, the family will be referred to an Appropriate Medical Professional once again for reevaluation and clearance as outlined above.

3. Evaluation and Management: Cardiac Event WITHOUT Loss of Consciousness, With Athletic Trainer Present

- a. Coach or athletic trainer removes student from the contest or activity as well as any other activities that may pose a risk for the student pending further notice.
- b. Athletic trainer checks for symptoms using a District-approved Cardiac Event evaluation form.
- c. Once removed from play due to a suspected Cardiac Event, the student will not be permitted to return to the contest or activity and the coach or athletic trainer will contact the student's parent/guardian.
 - 1. Parents/guardians are provided a Cardiac Event fact sheet.
 - 2. Parents/guardians are referred to an Appropriate Medical Professional
- d. Any student who, as determined by a game official, coach from the student's team, certified athletic trainer, licensed physician, or other official designated by the Superintendent to make this determination, exhibits signs or symptoms of a Cardiac Event while participating in an athletic activity or at any time prior to or following an athletic activity, shall be removed by the coach from further participation in the athletic activity at that time.
- e. If the student is diagnosed or with a suspected Cardiac Event, the student must receive cardiac clearance by an Appropriate Medical Professional in order to return to any athletic activity, including a gradual return to play.

4. Evaluation and Management: Head Injury or Cardiac Event WITH Loss of Consciousness, With Athletic Trainer Present

- a. Student is transferred immediately to nearest emergency room by emergency medical services.
- b. Student's parents/guardians are immediately contacted.
- c. For students with a head injury: An acute concussion evaluation is performed by an Appropriate Medical Professional noting signs and symptoms, characteristics of the injury, and risk factors associated with recovery such as previous concussions or learning disability.
- d. For students diagnosed with a Cardiac Event: An evaluation is conducted by a Appropriate Medical Professional trained in the evaluation of Cardiac Events.
- e. The student must be cleared by an appropriate medical professional in order to return to activity.
 - 1) For students with a head injury: With the signed written permission of the attending medical professional and parents/guardians, the student is approved to begin a gradual return to play as defined in this regulation, provided the written permission of an appropriate medical encompasses such activities.
 - 2) For students diagnosed with a Cardiac Event: Any student with a diagnosed or suspected Cardiac Event cannot begin a gradual return to play or return to practice or competition without cardiac clearance from an Appropriate Medical Professional.
- f. determines the student is symptom free, the student may begin a gradual return to play as defined in this regulation

Symptom recurrence upon gradual return to play: If, upon return to play, symptoms have not resolved or have returned in the estimation of the athletic trainer or other school medical personnel, the family will be referred to an Appropriate Medical Professional once again for reevaluation and clearance as outlined above.

Gradual Return to Play

These steps are based on the CDC's Return to Play progression. These steps are NOT intended to be the same thing as a written protocol for treatment. A student may only engage in a gradual return to play if such activity is within the scope of the written permission of an Appropriate Medical Professional and the signed permission of a student's parents/guardians.

- 1. Low levels of physical activity. This includes walking, light jogging, light stationary biking, and light weightlifting (lower weight, higher reps; no bench, no squat).
- 2. Moderate levels of physical activity with body/head movement. This includes moderate jogging, brief running, moderate- intensity stationary biking, and moderate-intensity weightlifting (reduced time and/or reduced weight from typical routine).
- 3. Heavy non-contact physical activity. This includes sprinting/running, high-intensity stationary biking, regular weightlifting routine, and non-contact sport-specific drills.
- 4. Full contact in controlled practice.
- 5. Full contact in game play.

Management of Suspected Concussion or Cardiac Event When Athletic Trainer is Not Present

All coaches, including of club sports, are instructed to contact parents/guardians and/or emergency medical services and the athletic director when there is suspicion of a head injury or Cardiac Event. The athletic director will be responsible for contacting the athletic trainer and the school nurse. Loss of consciousness always warrants a 911 call.

Record Keeping

All District personnel involved in the above procedures regarding serious injuries to students and student-athletes shall keep accurate and complete records regarding ImPACT base-line testing, injuries, evaluations, symptoms, recovery periods, ImPACT re-testing, communications with parents/guardians, communications with medical doctors, and any other pertinent information related to the student. An Athletic Injury Report form must be completed by a coach or athletic trainer and be submitted the next school day to the school nurse and building athletic director.

Mandatory Reporting

a. The District requires that:

- 1. Coaches and athletic trainers must report serious injuries to student-athletes to the Athletic Director and Building Principal as soon as is possible, but after the student's present safety is ensured.
- 2. Athletic Directors must report serious injuries to student-athletes to the Building Principal as soon as is possible, but after the student's present safety is ensured.
- 3. All reports be submitted using Attachment A unless prevented by emergency circumstances.
- b. The District holds parents/guardians responsible for reporting to their child's coach, Athletic Director or Building Principal any serious injuries, including concussions and Cardiac Events, which their children may have experienced while participating in activities that are not school-sponsored, during or outside of school hours. This information is critical concerning the District's ability to accurately evaluate a student in the event of a repeat injury. It also allows the District to accurately monitor the student in regard to any future, critical symptoms, and to determine if the student needs written medical clearance from an Appropriate Medical Professional before returning to play after a serious injury.

Mandatory Coach Education

- a. Once each school year, a coach shall complete, in whatever convenient location, the (free) online concussion management certification training course offered by the Centers for Disease Control and Prevention, the National Federation of State High School Associations or another provider approved by the Department of Health.
- b. Once each school year, every coach shall complete the sudden cardiac arrest training course offered by a provider approved by the Pennsylvania Department of Health.
- c. A coach shall not coach an athletic activity until the two required training courses have been completed.
- d. A coach shall verify completion of the training courses by way of a course certificate, statement of course completion or other verification provided by the course provider.
- e. A coach found in violation of the mandatory course training requirements shall be subjected to the following penalties:
 - 1. For a first violation, suspension from coaching any athletic activity for the remainder of the season. For a second violation, suspension from coaching any athletic activity for the remainder of the season and for the next season.
 - 2. For a third violation, permanent suspension from coaching any athletic activity.

Employee Disciplinary Consequences

a. Any District employee who fails to follow this administrative regulation and the procedures contained herein in relation to serious injuries to students will be subject to disciplinary consequences as appropriate and/or as allowed under any applicable Collective Bargaining Agreement, the Safety in Youth Sports Act, and the Cardiac Arrest Prevention Act.

b. A District employee's direct supervisor will be responsible for both investigating any alleged failure of an employee to act in compliance with this administrative regulation and for implementing any appropriate disciplinary consequences, which may include warnings, suspensions, and/or termination.

Acknowledgment by Parents/Guardians

No student shall be permitted to participate in any District interscholastic or club sport unless their parents/guardians acknowledge in writing that they have reviewed a copy of this Administrative Regulation and concussion and traumatic brain injury information sheet. It shall be the obligation of the Athletic Director for each building to ensure that these signed acknowledgments have been obtained.

Cross references:

Policy and Administrative Regulation 5406 Administration of Medication to Students Administrative Regulation 6146: Student Athletics

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