

Dickson County Board of Education

Monitoring: Review: Annually, in May	Descriptor Term: Prevention and Treatment of Sports Related Concussions	Descriptor Code: 6.413	Issued Date: 02/27/14
		Rescinds:	Issued:

1 A concussion is a traumatic brain injury caused by a direct or indirect blow to the head or body. In order to ensure
2 the safety of students that participate in interscholastic athletics, it is imperative that student athletes, coaches, and
3 parents are educated about the nature and treatment of sports related concussions.

4 The Board recognizes that concussions can be a serious health issue and should be treated as such. The Board
5 adopts the guidelines and other pertinent information and forms developed by the Tennessee Department of Health
6 to inform and educate coaches, school administrators, student athletes, and parent(s) / guardian(s) of the nature, risk
7 and symptoms of concussions and head injuries. These guidelines and materials may be viewed on the Department
8 of Health's website and shall be made available to interested parties through the Central Office.

9 This policy shall govern all activities and those individuals involved in those activities which constitute an organized
10 athletic game or competition against another team or in practice or preparation for an organized game or competition.
11 It does not govern those activities or individuals involved in those activities which are entered into for instructional
12 purposes only or those that are incidental to a nonathletic program or lesson.

14 TRAINING

15 Prior to the annual initiation of practice or competition, the following persons must review and sign a concussion and
16 head injury information sheet approved by the Tennessee Department of Health: the Director of Schools, licensed
17 healthcare professionals (if appointed), each school athletic director, and each coach, employed or volunteer.

18 In addition, prior to the annual initiation of practice or competition, all student athletes and their parent(s) / guardian(s)
19 shall review the concussion and head injury information sheet approved by the Tennessee Department of Health. A
20 form confirming this review shall be signed and returned by the student athlete, if the athlete is eighteen (18) years of
21 age or older; or by the student athlete's parent (s) / guardian (s), for athletes younger than eighteen (18) years of age.

22 The Director of Schools shall recommend that each school's athletic director and coaches, employed or volunteer,
23 annually complete online courses such as the Concussion in Sports – What You Need to Know or the Heads Up
24 - Concussion in Youth Sports. These courses may be accessed online at www.nfhslearn.com or www.cdc.gov/concussion/headsup .

25 All documentation of the completion of a concussion recognition and head injury safety education course program
26 and signed concussion and head injury information sheets shall be maintained by the Director of Schools / designee
27 for a period of three (3) years.

32 REMOVAL FROM ATHLETICS

33 Any student athlete who shows signs, symptoms and/or behaviors consistent with a concussion during an athletic
34 activity or competition shall be immediately removed for evaluation by a licensed healthcare professional, if avail-
35 able, and if not, by the coach or other designated individuals.

36 No student athlete who has been removed from an athletic activity or competition due to a concussion or suspected
37 concussion shall be allowed to return to any supervised team activities involving physical exertion, including games,
38 competitions, or practices, until the student athlete has been evaluated by and received written clearance on forms
39 approved by the Department of Health from a licensed health care provider for a full or graduated return. "Health
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1 care provider" means a Tennessee licensed medical doctor (M.D.), osteopathic physician (D.O.), or a clinical neu-
2 ropsychologist with concussion training.

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4 This requirement for clearance prior to a student athlete returning to an athletic activity shall not apply if there is a
5 legitimate explanation other than a concussion for the signs, symptoms, and/or behaviors observed.

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7 The Director of Schools / designee shall ensure that all protocols approved by the Tennessee Department of Health
8 or required by law relative to the provisions of this policy are followed and implemented within each school.

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