Concussion Response Plan

Reed-Custer Community Unit School District #255U



Developed: June 2016

Approved by the Reed-Custer Board of Education:

Implemented: August 2016 Updated: January 2025 The following procedures are for all athletes and athletic teams at Reed-Custer High School (RCHS) District 255. The District employs a full-time school nurse; additionally, RCHS employs a certified athletic trainer for the purpose of providing sports medicine coverage. The following procedures are based on the Consensus Statement on Concussion in Sport: The 6th International Conference on Concussion in Sport Held in Amsterdam October 2022. It can be found in the British Journal of Sports Medicine Volume 57, Issue 11.

Concussion Management Background and Purpose

With the start of the 2010-2011 school term, the National Federation of State High School Associations (NFHS) implemented a new national playing rule regarding potential head injuries. The rule requires "any player who exhibits signs, symptoms, or behaviors consistent with a concussion (such as loss of consciousness, headache, dizziness, confusion, or balance problems) shall be immediately removed from the game and shall not return to play until cleared by an appropriate health care professional." In applying this rule in Illinois, the Illinois High School Association (IHSA) has determined that only physicians licensed to practice medicine in all its branches (MD/DO) in Illinois, and/or a Certified Athletic Trainer operating under the direction of a physician licensed to practice medicine in all its branches in Illinois can clear an athlete to return to play after the athlete has been removed from the contest for a possible head injury.

After sustaining a head injury, the athlete will be evaluated, and if determined to exhibit signs, symptoms, or behaviors listed above, will not return to play. Athletes will then be re-evaluated at the next possible time, either the next day, or on Monday if the injury was sustained on a Friday or Saturday. If determined to have a concussion, the athlete will complete the graduated return to learn (RTL) and return to play (RTP) procedures listed on the following pages.

In 2015, Public Act 99-0245 was enacted mandating that each school adopt a board-approved "Return to Learn" protocol which needed to be in place by September 2016. In addition, the Act mandates a "concussion oversight committee" whose job is to meet, draft, and implement the school board-approved concussion response plan. On the following pages appears the Reed-Custer CUSD #255U Concussion Response Plan.

This document includes the following:

- Return to Learn Protocol and accompanying documentation
- Return to Play Protocol and accompanying documentation

Reed-Custer CUSD #255 Concussion Oversight Committee is comprised of the following:

Reed-Custer Nurses

Reed-Custer High School Administrator

Reed-Custer District Athletic Director

Reed-Custer High School Teacher

Reed-Custer Elementary School Assistant Principal

Certified Athletic Trainer

Reed-Custer Student Athlete Return To Learn/Return to Play Plan

Student-Athlete Name								Grad	le	
Date of Birth					Gender	•		M		F
Date of Concussion					Locatio	n				
Sport							In Season		Oı	ut of Season
School										
Initially Diagnosed by										
Clinical Designation	MI	DO	PAC	AT	C ARN	ЛР	PT	Other:		
School Nurse										
Athletic Trainer						Pho	one:			

The above Student Athlete has been evaluated and presented with signs and symptoms of concussion. Illinois State Law requires Student Athletes exhibiting signs and symptoms of concussion must be removed from sport related activity on that day and may not return to play until cleared by a medical provider trained in the assessment and management of concussions or a Certified Athletic Trainer working under the direct supervision of a medical provider trained in the assessment and management of concussions. Student Athletes should not begin graduated return to play protocol until completing to return to learn protocol.

The Return to Learn Checklist follows on the back side of this paper

REED-CUSTER GRADUATED RETURN TO LEARN PROTOCOL

The CDC recommends students progressively return to school. Students who return to full cognitive load, can exacerbate the symptoms and disrupt the recovery process. It is essential for students to recover academically before returning to play. The following progression should be completed by a school nurse and/or Certified Athletic Trainer before beginning Return to Play protocol. That said, if the student remains symptom free for a 24 hour period, they may be cleared from Return to Learn and graduated to Return to Play protocol. Also, a student may graduate to Return to Play when a doctor's note is received that clears the student to begin Return to Play and nursing staff/athletic training staff agree that is appropriate.

Student-Athlete Name			Grade	
Phase Description		Activity		Completed Date/Initials
1	Resume Daily Activities (as long as they do not worsen symptoms)	May perform normal daily tasks (walking, light chores, etc.) Limit screen-time for 24-48 hours.		
2	Gradual reintroduction of school work	No school attendance — May complete homework, reading and other cognitive activities		
3	School re-entry or increased school activity at home	Part day of school OR extended schoolwork at home equaling a half of a school day (3.5 hours)		
4	Gradual reintegration into normal school day	Increase to full day of school.		
5	Full Inclusion	Student shows no signs or symptoms of concussion Graduate to Return to Play protocol		

It is my professional opinion that the above-named student has cleared all of the phases of the Reed-Custer Return to Learn protocol and may now move in the Return to Play Protocol if participating in athletics.

Signature:	Date:	
Position/Clinical Designation:		
Student:	Date:	
Parent/Guardian:	Date:	

Students should begin at their highest symptom-free step in the progression

All steps should be conducted at a sub-symptom threshold. This is defined as performing activities without symptoms, or with symptoms as long as current symptoms are not increased and no new symptoms occur. If symptoms become aggravated, the student should discontinue activity and rest; make adjustments, and try the next day at the same step, or one step lower. Symptoms should be monitored by a school nurse or Certified Athletic Trainer with an approved concussion monitoring tool.

REED-CUSTER GRADUATED RETURN TO PLAY PROTOCOL

In order to begin Return to Play protocol, a student <u>MUST</u> receive a note from a doctor or other qualified health-care professional clearing them to resume physical activities. The student must also be symptom free for 24 hours before beginning Return to Play.

Student Athlete Name				Grade	
Phase	Description	Activity	Objective		Completed Date/ Initials
1	Symptom limited activity	Daily activities that do not worsen symptoms	Recovery		
2	Light aerobic exercise	10 minutes walking, or stationary cycling; keeping intensity <70% maximum permitted heart rate	Increase heart rate		
3	Aerobic exercise with agility drills/ Sport specific exercise	Walking/Running/Cycling followed by agility drills; No head impact activities	Add movement		
4	Light practice	½ sports practice or ½ gym class; No head impact activities	Higher intensity exercise, coordination and cognitive load		
5	Full-contact practice	Normal training activities in practice or full gym class	Restore cor and ass functional s coach	sess skills by	
6	Return to Play	Normal game play	No restric	etions	

It is my professional opinion that the above-named student has cleared all of the phases of the Reed-Custer Return to Play protocol and is cleared for all full-contact activities.				
Signature:				
Position/Clinical Designation:	_			
Student:				
Parent/Guardian:				

Important Phone Numbers				
Emergency Number	911			
Riverside Medical Center, Kankakee	(815) 933-1671			
Ascension St. Mary Hospital, Kankakee	(815) 937-2400			
Ascension St. Joseph Hospital, Joliet	(815) 725-7133			
Morris Hospital, Morris	(815) 942-2932			
Athletic Director's Office	(815) 458-4130			
Athletic Trainer, Amber Vicic	(815) 878-4835			
RCHS Office	(815) 458-2166			
RCMS Office	(815) 458-2868			
District Office	(815) 458-2307			

Emergency Equipment and Telephone Locations

The following list delineates the location of various emergency equipment and the nearest landline in case of an emergency at various Reed-Custer athletic sites.

Location	AED Location	Landline Location
RCHS Soccer Field	Trainer golf cart Bus barn south door	Bus barn office or field house office
RCMS Baseball Field	Field house long hallway near commons	Field house office RCMS loading dock
RCHS Football, Baseball, And Softball Stadiums	Trainer golf cart Football locker room	Football locker rooms x3330(V) or x3328(JV)
RCHS Football Practice Field	Trainer golf cart Football locker room	Football locker rooms x3330(V) or x3328(JV)
Fieldhouse Courts	Field house long hallway near commons	Fitness center office Field house office
Fitness Center/ Weight Room	Field house long hallway near commons	Fitness center office x3047
RCMS Gym Hall to band room near main entrance		RCMS coaches' offices x3215 (boys) x3216 (girls)
RCHS Gym Gym wall next to girls' locker room		RCHS office Assistant AD office Loading dock

In addition to the above locations, there are also AEDs located in the following locations: Auditorium (near the ticket counter), Elementary school (upstairs near science lab, cafeteria between storm doors, front hall by office by storm doors), High school (outside woodshop, new café on NE wall)