

Concussion Management Model for Schools and Teams

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Pre Season Baseline Testing and Education

Educate athletes, parents, coaches, teachers on concussion

Have a Concussion
Management Protocol
on-hand and have your
team of health professionals
(listed below) ready to treat

Athlete roles/duties should be established

Have parents sign permission slip

Schedule supervised baseline, tests

Step 2

Concussion is Suspected

Sideline assessment

If concussion is suspected - immediate removal play/ activity

Health professionals sets up referral for concussion specialist (MD/DO/PhD)

Vestibular screening

At the discretion of trained medical personnel...Optimal Brain imaging if needed

Step 3

Post Injury Testing & Treatment Plan

Athlete to take supervised Post Injury Test 24-48 hours after injury supervised health professionals continues to coordinate concussion specialist (MD/ Do/PhD) referral

Team coordinates care between athlete, parent, doc, therapist/coach

Does the athlete need additional and more extensive neuropsychological testing? If so, refer to neuropsychologist

Step 4

Is Athlete Ready for Non Contact Activity

Criteria:

A: Symptom free @ rest and with cognitive exertion

B: Post SCAT2 Test: Within normal range of baseline

C: Written clearance for progression to activity by supervising doctor (non-ER doctor)

Normal vestibular evaluation

IF NOT, return to Step 3

If YES: Stepwise Return-to-Play progression beginning with light non-contact activity, progressing to full non-contact exertion

Step 5

Determing Safe Return-to-Play

Return-to-Play decisions should always be made by a concussion specialist (doctor)

No recurring symptoms at rest or following physical or cognitive exertion

SCAT2 test scores back to baseline

After return to play, athlete's final SCAT2 score is set as their new baseline