

CREIGHTON  
COMMUNITY PUBLIC SCHOOL



JR/SR HIGH SCHOOL  
STUDENT/PARENT  
ACTIVITIES HANDBOOK  
2017-2018

# TABLE OF CONTENTS

<i>Activity Philosophy</i>	3
<i>Activities Defined</i>	3
<i>Warning for Participants and Parents</i>	3
<i>Expectations of Coaches</i>	4
<i>Expectations of Players</i>	4
<i>Expectations of Parents</i>	5
<i>Code of Conduct</i>	6-10
<i>Definitions</i>	6
<i>Violations</i>	6-7
<i>Restrictions Defined</i>	7-8
<i>Investigative Process</i>	8-9
<i>Self-Reporting</i>	9-10
<i>Responsibility if on Restriction</i>	10
<i>Academic Standard</i>	10-11
<i>Concussion Policy</i>	11-12
<i>Extra-Curricular Student Eligibility</i>	13-14
<i>Physical Exams / Parent Permission</i>	14
<i>School Insurance</i>	14
<i>Student Absences Due to Activities/Athletics</i>	14-15
<i>Student Attendance and Participation</i>	15
<i>Student Transportation</i>	15
<i>Social Networking</i>	15
<i>Wednesday Evenings</i>	15
<i>Concussion Fact Sheet for Athletes</i>	16
<i>Concussion Fact Sheet for Parents</i>	17
<i>Nebraska Sports Concussion Network &amp; ImPACT</i>	18-19
<i>Home Instructions for Concussed Athlete</i>	20-21
<i>Return to Play Parental Clearance</i>	22
<i>Handbook Consent Form</i>	23
<i>NSAA Student &amp; Parent Consent</i>	24

## **ACTIVITY PHILOSOPHY**

It is the philosophy of Creighton Community Schools that activities are an integral part of the school's program of education, which provides opportunities that will help students develop mentally, socially, and physically. It is our belief that through student activities, students are provided additional opportunities to experience success, build self-confidence, develop self-discipline, and learn to appreciate the value of hard work and persistence through these activities. The activity experience contributes to the knowledge, skill, and emotional patterns

that they possess, thereby making them better individuals and citizens.

Activities are considered a privilege and not the right of students. Therefore, individuals that take part in student activities will be held to a higher regard and are expected to demonstrate self-control, good sportsmanship, and respect the value of competition. Participation in activities bears with it responsibilities to the team, school, community and to the individual themselves.

### **ACTIVITIES DEFINED**

A wide variety of activities are currently offered and all students are encouraged to participate provided they follow Board, State, NSAA, and Activity guidelines. Extracurricular activities include those events that are school sponsored, which do not count toward graduation, grade advancement, or as a part of an academic class and which participation is not required by the school. Examples of these events include, but are not limited to, sports, organizations, school banquets, music, dances, etc.

### **WARNING FOR PARTICIPANTS AND PARENTS**

The purpose of this warning is to bring to your attention the potential dangers associated with athletic injuries. Participation in any activity may involve injury of some type. The severity of such injury can range from minor cuts, bruises, sprains, and muscle strains to more serious injuries to the body's bones, joints, ligaments, tendons, or muscles, to catastrophic injuries to the head, neck, and spinal cord. On rare occasions, injuries can be so severe as to result in total disability, paralysis or death. Even with appropriate coaching, appropriate safety instruction, appropriate protective equipment and observance of rules, injuries are still a possibility.

### **EXPECTATIONS OF COACHES**

- Be a role model
- Conduct well-planned practice sessions
- Provide a safe environment
- Teach fundamentals, skills, and rules of the activity
- Develop self-confidence
- Maintain positive and effective discipline
- Demonstrate the ability to evaluate the performance of activity participants

- Be knowledgeable and select appropriate strategies and tactics
- Enforce team rules in an equitable and consistent manner
- Maintain appropriate communication with students and parents
- Be able to motivate participants
- Support all activities within the school environment
- Provide constructive criticism when necessary in a positive manner
- Cooperate with administration
- Be responsible for physical forms, eligibility lists, rosters, transportation, uniform and equipment inventories and requisitions, and complete all end of season material

### **EXPECTATIONS OF PLAYERS**

- Represent the team and school in a positive manner
- Follow all school, team, and activity policies and rules
- Demonstrate proper respect for teachers, coaches, parents, officials, teammates, and opponents
- Demonstrate proper sportsmanship and respect towards opponents
- Demonstrate loyalty towards teammates
- Demonstrate pride and sense of caring for the program and school as a whole
- Always give a best effort
- Effectively communicate with coaches/sponsors
- Demonstrate a positive attitude
- Follow the Academic Standard and Code of Conduct
- Be at scheduled practices and events
- Take proper care of equipment

### **EXPECTATIONS OF PARENTS**

- Appreciate the efforts of your child
- Try your best to be completely honest about your child's athletic ability, competitive attitude, sportsmanship and actual skill level
- Be supportive of coaches, programs, and your child
- Teach your child to enjoy being part of an activity that has the intention to help your child grow socially, mentally, and physically
- Demonstrate proper sportsmanship as a spectator

- Always remember that children tend to exaggerate praise and criticism, temper your reaction and investigate before overreacting
- Maintain appropriate communication with the coach(es)
  - ♣ Appropriate concerns to discuss with coaches:
    - The treatment of your child
    - Ways to help your child improve
    - Concerns about your child's behavior
    - Injuries or health concerns
  - ♣ Issues not appropriate to discuss with coaches:
    - Playing time
    - Team strategy
    - Play calling
    - Other student participants
  - ♣ Appropriate procedures for discussing concerns with coaches:
    - Have your child talk to the coach
    - Arrange for a meeting with the coach and your child outside of practice, games, or academic time
  - ♣ What should a parent do if the meeting with the coach did not provide a satisfactory resolution?
    - Contact the Administration and arrange a meeting with coach, parent, and student.
    - An appropriate next step can be determined, if necessary

## **CODE OF CONDUCT AND ACTIVITY ELIGIBILITY**

Part I: Participating and attending activities is a privilege. This privilege carries with it responsibilities to the team, school, and community. The students' performance and devotion to high standards and values make their school and community proud. Participation is dependent upon adherence to this Code of Conduct and the school district's policies, procedures, and rules.

The Code of Conduct applies to all activities. Activities include, but are not limited to: all sports, cheerleading, dance, band, vocal, speech & drama, student council, National Honor Society, FFA, FCCLA, any school organized clubs, dances, and/or banquets.

Participant is defined as a student that participates in an activity or attends, has participated or attended, or will participate in or attend an activity.

Code of Conduct rules will apply any time during the school year, and will also include the time frame which begins with the official starting day of the fall sports season established by the NSAA. Any infractions at the conclusion of a school year will carry over to the following school year.

Code of Conduct rules apply regardless of whether conduct occurs on or off school grounds. If the conduct occurs on school grounds, at a school function, or in a school vehicle, the student may also be subject to additional discipline action found in the Student Handbook. Any student suspended or expelled from attending school will not be permitted to participate or attend activities.

Part II: The following actions and/or conduct are deemed inappropriate for any student who wishes to represent Creighton Schools in an extracurricular activity.

- A. The possession and/or consumption of alcohol beverages.
- B. The possession and/or use of a controlled substance.
- C. The possession and/or use of tobacco in any form.
- D. Engaging in any activity which is classified as a Class III Misdemeanor or more serious offense, as provided by the laws of the State of Nebraska. Offenses include, but are not limited to, assault, threats and intimidation of students and/or faculty, shoplifting, theft, etc.

- E. The failure to abide by the Academic Standard
- F. The refusal to abide by a coach's or sponsor's request concerning actions, appearance, and/or general conduct as a representative of the Creighton Schools.

Part III, Section 1: If a thorough investigation by the Administration establishes that a student is in violation of items A, B, or C as stated above, or any combination of such items, the following disciplinary action will be initiated:

- A. 1<sup>st</sup> offense for an individual school year: student placed on a **6-week** restricted period
- B. 2<sup>nd</sup> offense for an individual school year: student placed under restriction for the remainder of the year to include all activities, not a single activity season.
- C. 3<sup>rd</sup> offense for an individual school year: student will be placed on activity restriction for the remainder of the school year or for 20 weeks, whichever is the greatest period of time. If the activity violation occurs during the last 20 weeks of the current school year, the activity restriction will carry over to the next school year.

**\*\*\*Under this policy, the student does not have to be cited and/or charged by law enforcement, but to be found, through thorough investigation by administration, to be in the possession of alcohol, drugs, or tobacco.**

The restricted period will begin with notification from the Principal and should run in consecutive weeks. It will begin at midnight of the day of the violation or the day of discovery by school officials as the case dictates, and will end at midnight of the appropriate day.

Section 2: If a thorough investigation by the Administration establishes that a student has been cited or charged for any crime considered a Class III Misdemeanor or more serious, in accordance to the Laws of the State of Nebraska, the following disciplinary action will be taken.

- A. 1<sup>st</sup> offense for an individual school year: student placed on a 6-week restricted period
- B. 2<sup>nd</sup> offense for an individual school year: student placed

under restriction for the remainder of the year to include all activities, not a single activity season.

- C. 3<sup>rd</sup> offense for an individual school year: student will be placed on activity restriction for the remainder of the school year or for 20 weeks, whichever is the greatest period of time. If the activity violation occurs during the last 20 weeks of the current school year, the activity restriction will carry over to the next school year.

\*\*\*Under this policy, the student does not have to be found guilty in the Court of Law, but cited and/or charged for their activity.

\*\*\*Committing any act which is classified as a felony by the State of Nebraska will be considered a 2<sup>nd</sup> or 3<sup>rd</sup> offense.

The restricted period will begin with notification from the Principal and should run in consecutive weeks. It will begin at midnight of the day of the violation or the day of discovery by school officials as the case dictates, and will end at midnight of the appropriate day.

Section 3: Failure to adhere to the Academic Standard will result in an activity restriction further defined in the Academic Standard rules in the Activities Handbook.

Section 4: A confirmed violation of Item (F) in Part II, is punishable in accordance to criteria found in other appropriate sections of the Activity Handbook, Parent/Teacher Handbook, School Board Policy, or as developed by the various sponsors of these extracurricular activities.

Part IV, Section 1: A thorough investigative process will be made by Administration when it appears that a violation has occurred. The following process will be utilized to confirm a violation.

- A. The Administration will make an investigation to gather facts about the alleged violation.
- B. If the evidence suggests a student has been in violation, the student will be provided with an oral or written notice of the evidence against him or her and an opportunity to present his or her version of the situation.



- C. The Administration may restrict or suspend the student from activities after it has been determined whether or not a violation occurred.
- D. The student and parents will be notified of the action taken.
- E. If the student or parents of the student disagree with the decision that has been made, the parents may request an informal meeting before the Superintendent.
  - a. A hearing must be requested in writing within five (5) calendar days after the parents have been notified of the action taken.
  - b. Once a hearing has been requested, the hearing must take place within five (5) calendar days upon receipt of the hearing request, subject to extension for good cause as determined by the Superintendent.
    - i. The Superintendent will notify the participants of the time and place of the hearing in advance.
    - ii. The Superintendent may request additional Administration present at the hearing or additional individuals pertinent to the violation in question.
  - c. Upon conclusion of the hearing, a written decision will be provided to the parents within five (5) calendar days.
  - d. The activity restriction, imposed by Administration, will continue to be in effect until the hearing has been completed and a decision has been rendered by the Superintendent.

Section 2: The Student may be found in violation of the rules by the following:

- a. A faculty or staff member that sees and encounters a student violating a Code of Conduct policy and reports it to the Administration.
- b. Intervention by the law or legal authorities.
- c. Admission of guilt.
- d. Any source deemed reliable and factual by the Administration.

Part V, Section 1: **For a first offense violation**, a student has **two** options that may reduce the students restricted period:

**A. Come forward and confess his or her guilt to the sponsor of the appropriate activity or administration within three calendar days of the violation and have the restricted time reduced to three weeks.**

B. The student may have successful treatment for four weeks at a treatment center for the chemically dependent or regularly attend Alcoholics Anonymous or some verified, similar organization for four weeks or completes the SCIP referral and evaluation process.

Section 2: For a second offense violation, during an academic year, the student may be reinstated after completing a 6-week restrictive period and completing a successful treatment for four weeks at a treatment center for the chemically dependent or regularly attend Alcoholics Anonymous or some verified, similar organization for four weeks or completes the SCIP referral and evaluation process.

Section 3: If a student is cited / charged with a second misdemeanor, as defined by the Laws of the State of Nebraska, the student will not have the opportunity to reduce the restriction penalty unless the charges are dropped or the student is found innocent in the Court of Law, for one or both of the citations.

Section 4: If a student is cited / charged with a felony, as defined by the Laws of the State of Nebraska, the student will not have the opportunity to reduce the restriction penalty unless the charges are dropped or the student is found innocent in the Court of Law.

Part VI: Should a student be placed on restriction, he or she may not participate in any competitions, field trips, activities, or events related to the extracurricular activity. The student may continue to attend practices and/or meetings during the restrictive period. Activities as part of a curricular class are not considered to be extracurricular.

## **ACADEMIC STANDARD**

Because academics are the primary reason for attending school, students who are failing in more than one class will be ineligible to participate in school activities for a one-week period. Beginning the third week of the year and the last school day of the week following, teachers will submit names of those students who are near failing or are failing in their classes. Those students that are failing two or more classes will be placed on probation for one week. While on probation or ineligible, the student, must attend a 1/2 hour per class after school session for each class the student is failing. If the student does not comply with the rules of probation, the student will be deemed

ineligible. If the student remains failing in two or more classes at the end of the probationary week, they will be deemed ineligible in one-week increments until they are failing fewer than two classes. A student deemed ineligible could continue to practice but may not participate in activity events for the following week (Monday through Sunday). A student that is ineligible at the end of the semester will be ineligible until the first day of the next semester.

## **CONCUSSION POLICY**

**Overview:** The recognition and treatment of athletes that have suffered a concussion is a priority for the Creighton Community Public Schools. In cooperation with ImpACT and the Nebraska Sports Concussion Network, the district has implemented and developed a concussion policy that will aid in the diagnosis and treatment of reasonably suspected brain injuries.

**Information:** The district will provide information on concussions and brain injuries to athletes and their parents or guardians prior the beginning of practice or competition. Information may include:

1. The signs and symptoms of concussions
2. The risks posed by sustaining a concussion
3. The actions a student should take in response to sustaining a concussion, including the notification of his or her parents.

**Training:** Training to recognize the symptoms of concussions and brain injuries and how to seek their proper medical treatment shall be made available to all coaches of the district's athletic teams.

**Suspected Concussion and Removal:** A student who participates on a school athletic team shall be removed from practice or a game when he or she is reasonably suspected of having sustained a concussion or brain injury in such practice or game after observation by a coach or a licensed health care professional who is professionally affiliated with the school.

**Parent Notification:** If a student is reasonably suspected after observation of having sustained a concussion or brain injury and is removed from an athletic activity as required above, the parent or guardian of the student shall be notified by a coach or designee of the date and approximate time of the injury suffered by the student, the signs and symptoms of a concussion or brain injury that were observed, and any actions taken to treat the student.

**Return to Play:** The injured student shall not be permitted to participate in any school supervised team athletic activities involving physical exertion, including, but not limited to, practices or games, until the student:

1. Has been evaluated by a licensed health care professional,
2. Has received written and signed clearance to resume participation in athletic activities from the licensed health care professional,
3. Has submitted the written and signed clearance to resume participation in athletic activities to the school accompanied by written permission to resume participation from the student's parent or guardian.

The ImPACT program provides a formal return to play protocol for athletes to return to play.

**Return To Learn:** The Superintendent or designee shall develop a return to learn protocol for students who have sustained a concussion. The return to learn protocol shall recognize that students who have sustained a concussion and returned to school may need informal or formal accommodations, modifications of curriculum, and monitoring by medical or academic staff until the student is fully recovered.

**Students and Parents:** It is recognized that coaches cannot be aware of every incident in which a student has symptoms of a possible concussion or brain injury. As such, students and their parents have a responsibility to honestly report symptoms of a possible concussion or brain injury to the student's coaches on a timely basis.

**Legal Reference:** LB 260 Concussion Awareness Act

**Date of Adoption:** June 11<sup>th</sup>, 2012

## **EXTRA-CURRICULAR STUDENT ELGIBILITY**

The Creighton Board of Education recognizes the value of extra-curricular activities in the overall development of our youth.

Participation in these activities is voluntary and considered a privilege made available by the school district. The following policy emphasizes the value of academics over activities while providing extra support for the classroom

### Requirements of Creighton Board of Education

1. Attendance at practice is required unless excused by the coach or because of illness
2. Athletes will be neat, clean, and well groomed, and will display personal conduct of good sportsmanship in situations where they are representing the school.

### Requirements of the NSAA/District

1. Physical examination – satisfactory medical finding must be met (cost of the physical examination will be paid by the student).
2. Parent/Guardian Permission
3. Insurance statement – insurance requirements must be fulfilled.
4. Eligibility requirements – scholastic standards of association.

### Eligibility requirements

1. Student must be an undergraduate.
2. Student must be enrolled in at least twenty hours per week and in regular attendance.
3. Student must be enrolled in some high school on or before the 11<sup>th</sup> school day of the current semester.
4. Student is ineligible if 19 yrs. of age before September 1 of the current school year.
5. Student is ineligible if he/she has attended a four-year high school more than 8 semesters.
6. Student must have been enrolled in school the immediate preceding semester.
7. Student must have received 20 semester hours of credit the immediate preceding semester.
8. Student shall not compete in any athletic contest during the season of the sport involved either as an individual or a member of a team unless he/she is representing his or her school.
9. A student may not participate on an all-star team while a high school undergraduate.

- 10.If the student is transferring from a home school and is accepted at a member high school as a tenth, eleventh, or twelfth grade student, he/she is considered a transfer student and shall be ineligible for varsity competition for ninety school days unless the home school is located in the same school district as the high school to which the student is transferring.
- 11.Those students who do not have their Enrollment Option applications signed, filed and approved prior to March 15 shall be ineligible for 90 school days, with such transfers being subject to hardship waiver guidelines.
- 12.A student shall not compete in a contest under an assumed name.
- 13.A student must maintain his/her amateur status.
- 14.Any other eligibility guidelines, bylaws, and/or rulings made by the NSAA.

### **PHYSICAL EXAMS/PARENT PERMISSION**

Before a student may practice or compete in competitive interscholastic athletics, activities sponsored by the NSAA, or cheerleading or dance, the student must have a physical examination administered by a licensed physician and submitted on a prescribed form and a signed parent permission consent must be on file.

### **SCHOOL INSURANCE**

Students are advised that the school is not financially responsible for injuries the student may receive while participating in school activities. Students are advised to carry an insurance plan available to them.

### **STUDENT ABSENCES DUE TO ACTIVITIES/ATHLETICS**

Excessive student absences from classroom instruction due to participation in extracurricular activities shall not be allowed in this district. Occasionally, however, students may be required to miss classroom instruction due to participation in a school-sanctioned activity. This shall occur only when scheduling of that activity has been approved by the school administration and advance provisions have been made for the make-up work of class work missed during the approved absence. Each participant of a club/activity/sport will be allowed a maximum of five (5) days absent from school during the school year per club/activity/sport. State competitions are exempt from the five days allotted to each individual. Only students that qualify for state competition will be allowed to attend. Varsity team

sports will only take those students on the state roster to the state tournament. Students will not be allowed to miss consecutive full days of school for activities without administrative approval. Absences will be recorded in ¼ day increments.

## **STUDENT ATTENDANCE AND PARTICIPATION**

In order to participate in any school activity, afternoon or evening, a student must have been in class attendance for at least half of the school day of the activity (11:42am-3:32pm). A student may be excused for a funeral, doctor's appointment, or other special situations with prior Administrative approval.

## **STUDENT TRANSPORTATION**

Students must ride the activity bus or vehicle to activities and home. Exceptions may include:

- A. Students may ride home from an activity with their parents. The parent must see the sponsor, in person, to sign off his or her child.
- B. Students may ride home from an activity with an adult provided that the parents have presented a note to the administration ahead of time. The administrator must have the note in advance of the trip so that it can be verified.

## **SOCIAL NETWORKING**

Students who participate in extracurricular activities are particularly vulnerable to social networking postings. It is encouraged that all activity participants are careful about what they post or have posted on social networking websites. What is posted on social networking websites is public and can be accessed by others to view. Postings have and can lead to issues, including but not limited to, discipline, legal issues, employment, and/or scholarship eligibility.

## **WEDNESDAY EVENINGS**

Wednesday evenings are considered family evenings. Activity practices will conclude prior to 6 pm and participants will be given ample time to leave the school building prior to 6:00pm. Contests will not be scheduled on Wednesday evenings with the exception of district, state, or unavoidable contests. No groups or clubs will be allowed in the building after 6 pm.

# HEADS×UP

## CONCUSSION IN HIGH SCHOOL SPORTS

A FACT SHEET FOR **ATHLETES**

### What is a concussion?

A concussion is a brain injury that:

- Is caused by a bump, blow, or jolt to the head or body.
- Can change the way your brain normally works.
- Can occur during practices or games in any sport or recreational activity.
- Can happen even if you haven't been knocked out.
- Can be serious even if you've just been "dinged" or "had your bell rung."

All concussions are serious. A concussion can affect your ability to do schoolwork and other activities (such as playing video games, working on a computer, studying, driving, or exercising). Most people with a concussion get better, but it is important to give your brain time to heal.

### What are the symptoms of a concussion?

You can't see a concussion, but you might notice **one or more** of the symptoms listed below or that you "don't feel right" soon after, a few days after, or even weeks after the injury.

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Bothered by light or noise
- Feeling sluggish, hazy, foggy, or groggy
- Difficulty paying attention
- Memory problems
- Confusion

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

- **Tell your coaches and your parents.** Never ignore a bump or blow to the head even if you feel fine. Also, tell your coach right away if you think you have a concussion or if one of your teammates might have a concussion.
- **Get a medical check-up.** A doctor or other health care professional can tell if you have a concussion and when it is OK to return to play.
- **Give yourself time to get better.** If you have a concussion, your brain needs time to heal. While your brain is still healing, you are much more likely to have another concussion. Repeat concussions can increase the time it takes for you to recover and may cause more damage to your brain. It is important to rest and not return to play until you get the OK from your health care professional that you are symptom-free.

### How can I prevent a concussion?

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

- Use the proper sports equipment, including personal protective equipment. In order for equipment to protect you, it must be:
  - The right equipment for the game, position, or activity
  - Worn correctly and the correct size and fit
  - Used every time you play or practice
- 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 and to order additional materials **free-of-charge**, visit: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR DISEASE CONTROL AND PREVENTION



June 2010



# HEADS\*UP

## CONCUSSION IN HIGH SCHOOL SPORTS

### A FACT SHEET FOR PARENTS

#### What is a concussion?

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

#### What are the signs and symptoms?

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 after the injury. If your teen reports **one or more** symptoms of concussion listed below, or if you notice the symptoms yourself, keep your teen out of play and seek medical attention right away.

Signs Observed by Parents or Guardians	Symptoms Reported by Athlete
<ul style="list-style-type: none"> <li>• Appears dazed or stunned</li> <li>• Is confused about assignment or position</li> <li>• Forgets an instruction</li> <li>• Is unsure of game, score, or opponent</li> <li>• Moves clumsily</li> <li>• Answers questions slowly</li> <li>• Loses consciousness (even briefly)</li> <li>• Shows mood, behavior, or personality changes</li> <li>• Can't recall events <i>prior</i> to hit or fall</li> <li>• Can't recall events <i>after</i> hit or fall</li> </ul>	<ul style="list-style-type: none"> <li>• Headache or “pressure” in head</li> <li>• Nausea or vomiting</li> <li>• Balance problems or dizziness</li> <li>• Double or blurry vision</li> <li>• Sensitivity to light or noise</li> <li>• Feeling sluggish, hazy, foggy, or groggy</li> <li>• Concentration or memory problems</li> <li>• Confusion</li> <li>• Just not “feeling right” or is “feeling down”</li> </ul>

#### How can you help your teen prevent a concussion?

Every sport is different, but there are steps your teens can take to protect themselves from concussion and other injuries.

- Make sure they wear the right protective equipment for their activity. It should fit properly, be well maintained, and be worn consistently and correctly.

- Ensure that they follow their coaches' rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.

#### What should you do if you think your teen has a concussion?

1. **Keep your teen out of play.** If your teen has a concussion, her/his brain needs time to heal. Don't let your teen return to play the day of the injury and until a health care professional, experienced in evaluating for concussion, says your teen is symptom-free and it's OK to return to play. A repeat concussion that occurs before the brain recovers from the first—usually within a short period of time (hours, days, or weeks)—can slow recovery or increase the likelihood of having long-term problems. In rare cases, repeat concussions can result in edema (brain swelling), permanent brain damage, and even death.
2. **Seek medical attention right away.** A health care professional experienced in evaluating for concussion will be able to decide how serious the concussion is and when it is safe for your teen to return to sports.
3. **Teach your teen that it's not smart to play with a concussion.** Rest is key after a concussion. Sometimes athletes wrongly believe that it shows strength and courage to play injured. Discourage others from pressuring injured athletes to play. Don't let your teen convince you that s/he's “just fine.”
4. **Tell all of your teen's coaches and the student's school nurse about ANY concussion.** Coaches, school nurses, and other school staff should know if your teen has ever had a concussion. Your teen may need to limit activities while s/he is recovering from a concussion. Things such as studying, driving, working on a computer, playing video games, or exercising may cause concussion symptoms to reappear or get worse. Talk to your health care professional, as well as your teen's coaches, school nurse, and teachers. If needed, they can help adjust your teen's school activities during her/his recovery.

#### 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 and to order additional materials **free-of-charge**, visit: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR DISEASE CONTROL AND PREVENTION



June 2010



## Neurocognitive Concussion Testing & The ImPACT™ Test

At the forefront of concussion management is the implementation of neurocognitive testing in athletic programs. Such evaluation can help to objectively evaluate the concussed athlete's post-injury condition and track recovery for safe return to play, thus preventing the cumulative effects of concussion or returning an athlete to play too soon who has not fully recovered.

Neurocognitive testing can be in the form of a pencil-and-paper test (SAC, SCAT2) or a computerized test (ImPACT, ANAM, Headminder, CogSport). Pencil-and-paper tests remain an effective tool for coaches to use on the sideline to assess athletes with potential head injury. But pencil-and-paper tests lack sufficient sensitivity over an extended period of time for medical and healthcare professionals to base critical management and return to play decisions. After 2-3 days post-injury, pencil-and-paper tests are ineffective and may not reveal the presence of a concussion injury (false-negative). While concussion recovery often necessitates 1-3 weeks, some require more time where computerized neurocognitive testing is much more sensitive to brain function for many weeks and months post-injury.

Computerized applications have been available in recent years to individual schools and teams at an annual cost of \$500-\$800, making it cost-prohibitive for many schools. Recently, ImPACT Testing Services, Inc. fashioned a testing program model for healthcare networks having met specific medical criteria with access to specific resources. Such testing is now more cost-effective for schools, where many schools have their testing funded through local/area resources. As a result, the Nebraska Sports Concussion Network & Testing Program (NSCN) was developed and will assist schools to implement, and where possible, fund a concussion testing program using the ImPACT Test.

### **ImPACT Test™**

ImPACT (Immediate Post-Concussion Assessment and Cognitive Testing) is an on-line, user-friendly computer-based testing program specifically designed for the management of sports-related concussion. ImPACT is a research-based software tool developed at the University of Pittsburgh Medical Center that evaluates multiple aspects of neurocognitive function, including memory, attention, brain processing speed, reaction time, and post-concussion symptoms.

Current ImPACT clients include all NFL & NHL teams, MLB, including all umpires, and numerous NCAA Division I Football Programs, including the University of Nebraska-Lincoln. Other athletic programs in Nebraska currently implementing the program include: Doane College, Concordia Univ., Peru State College, UNK, UNO, all 6 Lincoln Public Schools high schools, Aurora HS, Bellevue East HS, Columbus HS, Columbus Scotus HS, Elkhorn HS, Norris HS, Lincoln Pius X HS, North Platte HS, Ogallala HS, South Sioux City HS, and Waverly HS, in addition to nearly 100 other high schools in Nebraska since 2010.

### **Baseline Testing**

*Baseline Testing* refers to neurocognitive testing under normal conditions before injury, often conducted in the pre-season. The baseline test gives us a snapshot of how one's brain functions in normal,

everyday circumstances. Baseline testing is conducted on-site at schools by trained school staff with assistance from athletic trainers trained in ImPACT testing. Using a school's computer lab and internet to log onto an on-line testing website, multiple users (~10-20) can be tested at the same time. It takes ~25 minutes to complete the baseline test. The testing application formulates "baseline data" which are stored on a secure server at ImPACT Testing Services, Inc. which can be retrieved anytime at a later date if an athlete sustains a concussion.

#### **Post-Injury Testing**

In the event an athlete sustains a concussion, the athlete is tested again post-injury. *Post-injury testing composite scores* are then compared to the baseline scores acquired earlier before a concussion injury affected brain function. Therefore, baseline testing only becomes of value when post-testing is utilized after a concussion injury. We estimate 10% of athletes on average in collision and contact sports (15%-20% of football players) will risk concussion injury necessitating post-injury testing.

*Post-Injury Testing* is conducted by medical or appropriate healthcare professionals having specialized training and credentialing by ImPACT to interpret and evaluate post-testing composite scores for deficiencies or abnormalities. These trained professionals will objectively base their management and return to play decisions on post-test comparisons, depending on when post-test scores return to baseline, among other clinical considerations. Hence, better, safer, and more consistent decisions can then be made about an injured athlete returning to play. Subjectivity is much less apparent, and an athlete can potentially be allowed back sooner, rather than their return to play being delayed by uncertainty or overly conservative measures.

*Post-Injury Testing* may be conducted as early as 24-72 hrs. post-injury, but is often conducted once a concussed athlete is symptom-free (asymptomatic), depending on the clinician managing the athlete's condition. When post-concussion testing is opted for on-line, another form of the test is selected having a different word and design list, as well as other randomized stimuli. This feature is incorporated into ImPACT to help reduce the practice or learning effects often associated with neuropsychological measures. Given this issue, multiple forms are utilized for each post-injury testing session. On occasion, multiple post-injury tests (serial testing) may be conducted to monitor an athlete's recovery over time.

If post-injury testing scores have not recovered in sufficient time (usually within 3-4 weeks), the athlete may be referred to a neuro-specialist with advanced, formal training in treating head injuries, i.e. Neurosurgeon or Neuropsychologist.

#### **Testing Cycle**

Baseline testing offered through the Nebraska Sports Concussion Network will be available to 9<sup>th</sup> through 12<sup>th</sup> grade athletes participating in collision and contact sports having the highest incidence of concussions [football, volleyball, basketball, wrestling, diving, soccer, track-jumpers, baseball, and softball]. Schools wanting to baseline test non-contact sports [cross-country, golf, tennis, swimming, track-runners] or any other groups, i.e. middle school athletes, will have the option to arrange for and purchase baseline tests at a cost of \$5/test.

During a school's 1<sup>st</sup> year of testing, baseline testing will be conducted on everyone within the identified groups. Thereafter, an athlete's baseline testing is then conducted on a 2-year cycle, with testing of incoming 9<sup>th</sup> graders, and those entering 11<sup>th</sup> grade performed each year. Any newcomers to an athletic program, or those having sustained a concussion the previous year, will be tested each year as well.

# Nebraska Sports Concussion Network



www.NebSportsConcussion.org

## Home Instructions for Parents & Concussed Athlete

Athlete \_\_\_\_\_ Date of Injury \_\_\_\_\_ Sport/Activity \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Phone \_\_\_\_\_

1. Your son/daughter is suspected of having sustained a concussion. Today, the following signs and symptoms of a concussion were observed:

### SIGNS - observed by Coach/others

- ☐ Loss of Consciousness
- ☐ Seizure activity
- ☐ Can't recall events prior to injury
- ☐ Can't recall events after injury
- ☐ Disoriented (as to self, place, time)
- ☐ Confusion (as to injury, plays)
- ☐ Moves clumsily, unsteady
- ☐ Appears dazed, stunned
- ☐ Memory Problems
- ☐ Answers questions slowly
- ☐ Asks same question repeatedly
- ☐ Vacant stare, glassy eyed
- ☐ Easily distracted
- ☐ More emotional
- ☐ Behavior/Personality changes
- ☐ Unusually Irritable

### SYMPTOMS - reported by Athlete

- ☐ Headache
- ☐ Nausea, vomiting
- ☐ Dizziness or Balance Problems
- ☐ Difficulty concentrating
- ☐ Feeling sluggish or "slowed-down"
- ☐ Feeling "in a fog" or "foggy"
- ☐ Difficulty remembering things
- ☐ Double or Blurred Vision
- ☐ Bothered by light or noise
- ☐ Drowsiness
- ☐ Fatigue
- ☐ Difficulty falling asleep
- ☐ Sleeping less than usual
- ☐ Sleeping more than usual
- ☐ Nervousness
- ☐ Sadness

2. The following steps were taken for your son/daughter by coaches or school personnel:
  - ☐ Removed from participation
  - ☐ Checked for a neck/spinal injury
  - ☐ Checked if immediate emergency care was needed
  - ☐ Assessed orientation, memory, concentration, and balance
  - ☐ Restricted from any further participation and exertional activities
  - ☐ Continued to be observed and monitored by coaches and school staff
  - ☐ Informed them of the need to be evaluated by appropriate licensed healthcare professional (MD, DO, Athletic Trainer, Neuropsychologist)
3. The school directs your son/daughter to be evaluated by an appropriate licensed healthcare professional (LHCP), i.e. MD, DO, Neuropsychologist, or Athletic Trainer, **AND** your son/daughter will need written clearance from a LHCP, and written clearance from you - the parents/guardian, before your son/daughter can be allowed to return to activity or athletic participation (*LB260 Nebraska Concussion Awareness Act, July 2012*).

Recommendations provided to: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Recommendations provided by: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Please Review Reverse Side for Additional Information Regarding Concussions**

### **Observing and Monitoring Signs & Symptoms of a Concussion**

In some instances, Signs & Symptoms of a concussion may not become apparent until several hours or even days after the injury. Therefore, your son/daughter should be monitored closely over time, and checked for any of Signs and Symptoms listed on the front side of this form. A good guideline is to note signs/symptoms that worsen, and behaviors that seem to represent a change in your son/daughter. Please be especially observant for Signs and Symptoms listed below. The following indicate the need to report immediately to the nearest emergency department for medical care, or in an emergency, to activate Emergency Medical Services (EMS) by dialing 911:

1. Headaches that increase in intensity
2. Vomiting
3. Decreased or irregular pulse OR respiration
4. Unequal, dilated, unreactive pupils
5. Slurred speech
6. Seizure activity
7. Changes in level of consciousness, very drowsy, difficulty awakening, or losing consciousness
8. Can't recognize people or places, or becomes increasingly confused

If you have any question or concern about the signs or symptoms you are observing, contact your family physician for instructions, or seek medical attention at the closest emergency department. Otherwise, you can follow the instructions outlined below.

#### **It is OK to:**

- Go to sleep
- Rest; periodic naps when fatigued/tired
- Use acetaminophen (Tylenol) for headaches
- Use ice pack on head & neck for comfort
- Eat a light diet, carbohydrates
- Drink fluids, stay hydrated

#### **There is NO need to:**

- Check eyes with a flashlight
- Wake up every hour
- Test reflexes
- Stay in bed

#### **DO NOT:**

- DO NOT exercise or lift weights
- DO NOT do strenuous activity including PE, at work, play sports, video games, texting, or use computer
- DO NOT take ibuprofen, aspirin, naproxen or other non-steroidal anti-inflammatory medications (NSAID)
- DO NOT drive vehicle while having symptoms
- DO NOT drink alcohol

Adapted from National Athletic Trainers Association Position Statement: Management of Sports-Related Concussion. J Athl. Trng. 2004;39(3):280-297.

### **Returning to School**

In some circumstances, the following recommendations may be indicated by the licensed healthcare professional (LHCP) treating your son/daughter, with supportive accommodations provided by school personnel.

1. No school; shortened school day; time restriction on school day.
2. Shortened class time; limit work on computer, focused reading, or analytical problem solving; withhold from PE.
3. Extra time to complete coursework/assignments/tests; assistance with instruction.
4. Reduced homework load; time restriction on homework.
5. Refrain from significant test taking, or standardized testing.
6. Frequent rest breaks during day as needed.
7. Consider Individualized Educational Plan (IEP) or 504 Plan if recovery is likely to be prolonged.

Symptoms are to be monitored regularly during recovery. Gradually increase school activity when symptoms begin to subside/decrease. Decrease school activity if symptoms increase or return at any time.

### **Returning to Sport**

Anytime an athlete is removed from activity due to a suspected concussion, they **must** follow these steps for returning to sports participation.

1. Evaluation by an appropriate licensed healthcare professional (LHCP), i.e. MD/DO, Athletic Trainer, or Neuropsychologist.
2. Athlete must first be symptom-free at rest, then remain symptom-free during physical and mental exertion.
3. Written clearance from designated LHCP, and written clearance from parent/guardian.
4. When available, Post-Injury Neurocognitive Test Scores (ImPACT) return to normal (baseline).
5. Follow and complete "Stepwise Progressive Return to Play Program" while remaining symptom-free.

### **Stepwise Progressive Return to Play Program**

After Step 1, allow 24-48 hours is to elapse between steps, as directed by your LHCP.

1. Symptom-free at rest. Rest - no physical or mentally taxing activity;
2. Light aerobic, low level activity; no weight-lifting or resistance training;
3. Sport/Position specific condition drills, light-to-moderate weight-lifting and resistance training.
4. Restricted practices, non-contact, non-live practice drills.
5. Full, unrestricted practices, live scrimmage drills.
6. Full game/competition play.

## CREIGHTON COMMUNITY PUBLIC SCHOOL



Any student-athlete suspected of suffering a concussion should be removed from the game or practice. No student-athlete may return to activity after an apparent head injury or concussion without the written permission of a licensed health care provider and the written permission of a parent or guardian.

\_\_\_\_\_  
Student-Athlete Name Printed

\_\_\_\_\_  
Parent or Legal Guardian Printed

\_\_\_\_\_  
Parent or Legal Guardian Signature

\_\_\_\_\_  
Date

The above athlete has been cleared to return to play by a licensed health care provider, after suffering a suspected head injury. My signature indicates that I understand the risks of returning to play, after sustaining a suspected head injury. Further, my signature gives permission to the Creighton Community Public School District and the coaching staffs of the Creighton Community Public School District to permit my son or daughter to return to practice and competition.

\_\_\_\_\_  
Student-Athlete Signature

\_\_\_\_\_  
Date

My above signature indicates that I understand the risks of returning to play, after suffering a suspected head injury. Further, my signature indicates that I would like to return to play after evaluating and fully understanding those risks.

## **CREIGHTON COMMUNITY SCHOOLS**



### **ACTIVITIES CONSENT PAGE**

A. Activities are considered a privilege and not the right of students. Therefore, individuals that take part in student activities will be held to a higher regard and are expected to demonstrate self-control, good sportsmanship, and respect the value of competition. Participation in activities bears with it responsibilities to the team, school, community and to the individual themselves.

I have accessed a copy of the Creighton Community Schools Activities Handbook. I have had the opportunity to examine this handbook and understand its contents. I also understand that there are other board policies which govern school operations and that the handbook is not intended to be all inclusive.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*\*To access the Activity Handbook, via the Internet, please go to [creightonpublicschools.org](http://creightonpublicschools.org) and click the Handbook Tab on top of the screen. If you cannot access the handbook, via the Internet, copies are available in the office.**

B. I hereby acknowledge having received education about the signs, symptoms, and risks of sports related concussions. I also acknowledge by responsibility to report any signs or symptoms of a concussion that my son or daughter may have suffered to the coach.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

C. The school district does not purchase any type of health insurance to cover injuries incurred by your child at school or while involved in school activities. We encourage all families to have accident coverage for their children.

My signature indicates that I/we understand the risks and potential dangers associated with participation in activities. We feel that we have adequate insurance protection for our son/daughter or have made alternative arrangements.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

D. I understand that the Creighton Community Schools, on occasion, provides transportation for students when attending school related activities such as, but not limited to, activities and athletic events in which my child is involved. My signature below indicates that I give permission for my son/daughter to be transported by school transportation for these types of activities.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To be completed for  
students participating in  
all NSAA activities.



NEBRASKA SCHOOL ACTIVITIES ASSOCIATION (NSAA)  
Student and Parent Consent Form

School Year: 20\_\_\_\_-20\_\_\_\_ Member School: \_\_\_\_\_

Name of Student: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

The undersigned(s) are the Student and the parent(s), guardian(s), or person(s) in charge of the above named Student and are collectively referred to as "Parent".

The Parent and Student hereby:

(1) Understand and agree that participation in NSAA sponsored activities is voluntary on the part of the Student and is a privilege;

(2) Understand and agree that (a) by this Consent Form the NSAA has provided to the Parent and Student of the existence of potential dangers associated with athletic participation; (b) participation in any athletic activity may involve injury of some type; (c) the severity of such injury can range from minor cuts, bruises, sprains, and muscle strains to more serious injuries to the body's bones, joints, ligaments, tendons, or muscles, to catastrophic injuries to the head, neck and spinal cord, and on rare occasions, injuries so severe as to result in total disability, paralysis and death; and, (d) even the best coaching, the use of the best protective equipment and strict observance of rules, injuries are still a possibility;

(3) Consent and agree to participation of the Student in NSAA activities subject to all NSAA by-laws and rules interpretations for participation in NSAA sponsored activities, and the activities' rules of the NSAA member school for which the Student is participating; and,

(4) Consent and agree to (a) the disclosure by the Member School at which the Student is enrolled to the NSAA, and subsequent disclosure by the NSAA, of information regarding the Student, including the student's name, address, telephone listing, electronic mail address, photograph, date of and place of birth, major fields of study, dates of attendance, grade level, enrollment status (e.g., full-time or part-time), participation in officially recognized activities and sports, weight and height as a member of athletic teams, degrees, honors and awards received, statistics regarding performance, records or documentation related to eligibility for NSAA sponsored activities, medical records, and any other information related to the Student's participation in NSAA sponsored activities; and, (b) the Student being photographed, video taped, audio taped, or recorded by any other means while participating in NSAA activities and contests, consent to and waive any privacy rights with regard to the display of such recordings, and waive any claims of ownership or other rights with regard to such photographs or recordings or to the broadcast, sale or display of such photographs or recordings.

I acknowledge that I have read paragraphs (1) through (4) above, understand and agree to the terms thereof, including the warning of potential risk of injury inherent in participation in athletic activities.

DATED this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_.

\_\_\_\_\_  
Name of Student [Print Name]

\_\_\_\_\_  
Student Signature

(I am)(We are) the Student's [circle appropriate choice] (Parent) (Guardian). (I)(We) acknowledge that (I)(We) have read paragraphs (1) through (4) above, understand and agree to the terms thereof, including the warning of potential risk of injury inherent in participation in athletic activities. Having read the warning in paragraph (3) above and understanding the potential risk of injury to my Student, (I)(we) hereby give (my)(our) permission for \_\_\_\_\_ [insert student name] to practice and compete for the above named high school in activities approved by the NSAA, **except those crossed out below:**

Baseball	Golf	Tennis	Play Production	Basketball	Swimming/Diving
Track	Football	Speech	Cross County	Soccer	Volleyball
Music	Unified Bowling	Softball	Wrestling	Debate	Journalism

DATED this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_.

\_\_\_\_\_  
Parent [Print Name]

Revised June 2016

\_\_\_\_\_  
Parent Signature