



CONCUSSION ACKNOWLEDGEMENT FORM

Name of Student _____

Definition of a Concussion – a complex pathophysiological process affecting the brain caused by a traumatic physical force or impact to the head or body, which may: include temporary or prolonged altered brain function resulting in physical, cognitive, or emotional symptoms or altered sleep patterns; and or involve loss of consciousness.

Prevention - Teach and practice safe play & proper technique

- Follow the rules of play.
- Make sure the required protective equipment is worn for all practices and games.
- Protective equipment must fit properly and be inspected on a regular basis.

Signs and Symptoms of Concussion – No two concussions are the same nor will all the symptoms present. Symptoms may include but are not limited to: Headache, appears to be dazed or stunned, ringing in the ears, fatigue, slurred speech, nausea or vomiting, dizziness, loss or balance, blurred vision, sensitive to light or noise, feel foggy, memory loss or confusion.

Policy – Based on current legislation and current standards of practice, Trinity Valley School requires all athletes sustaining a concussion will need to be evaluated by a physician and complete the return-to-play protocol (RTP) prior to returning to competition. Further information is available on the TVS website.

Treatment of Concussion – The student-athlete shall be removed from practice or competition immediately if suspected to have sustained a concussion. Every student-athlete suspected of a concussion shall be evaluated by a physician prior to returning to athletic participation. The treatment for a concussion is cognitive rest; through limiting external stimulation such as television, smart phones, computers, and texting. The athletic training staff will communicate with the appropriate school official to make adjustments to the student-athlete’s academic affairs. When all symptoms of the concussion have cleared and the student has received written clearance from a physician, the student-athlete may begin the RTP process.

Initial: _____

Return to Play -

A student removed from an athletic activity, either practice or competition, may not be permitted to practice or compete again following the force or impact believed to have caused the concussion until:

- 1) the student has been evaluated, using established medical protocols based on peer-reviewed scientific evidence, by a treating physician chosen by the student or the student’s parent or guardian or another person with legal authority to make medical decisions for the student;
- 2) the student has successfully completed each requirement of the RTP protocol;
- 3) the treating physician has provided a written statement indicating that, in the physician’s professional judgment, it is safe for the student to return to play; and
- 4) the student and the student’s parent or guardian or another person with legal authority to make medical decisions for the student:

A) have acknowledged that the student has completed the requirements of the RTP necessary for the student to return to play;

B) have provided the treating physician’s written statement to the Athletic Training Staff; and

C) have signed a consent form indicating that the person signing:

i) has been informed concerning and consents to the student participation in return to play in accordance with the return-to-play protocol;

ii) understands the risks associated with the student returning to play and will comply with any ongoing requirements in the return-to-play protocol;

iii) consents to the disclosure to appropriate persons, consistent with Health Insurance Portability and Accountability Act of 1996 (Pub. L. No. 104-191), of the treating physician’s written statement under Subdivision 3, and if any, the RTP recommendations of the treating physician

iv) understands that lying or withholding information can lead to death, 2nd impact syndrome, or permanent brain injury.

Parent or Guardian Signature

Date

Student Signature

Date