

Concussion Management Program

The Melrose Recreation Department has adopted the following Concussion Management Program to address the identification and proper handling of suspected head injury in participants playing athletic programs. These procedures serve to provide educational awareness, training, and inform parents and community members of the role they play and their responsibilities in addressing the reality of concussions in sports related head injuries.

Coaches - Basic Concussion Training Course (Free)

All coaches are **required** to complete the CDC “Heads Up” Concussion Training upon initial assignment and retake the training every two years. A virtual certificate of completion will be provided at the conclusion of the training and should be submitted to the Recreation Department at [Training - Concussion | Melrose MA \(cityofmelrose.org\)](https://www.cityofmelrose.org/training-concussion). A copy should also be retained for their own personal records. Documentation will be retained with the department for a period of at least 15 years:

[CDC “Heads Up” Concussion Training Course](https://www.cdc.gov/headsup/basic/index.html)

Staff / Participant / Parent - Concussion Awareness Information Sheet

The following CDC Parent / Athlete Concussion Information Sheet should be distributed annually to all staff, participants, and parents with an acknowledged receipt retained at the organization for a period of at least 15 years. This information is publicly available at [Training - Concussion | Melrose MA \(cityofmelrose.org\)](https://www.cityofmelrose.org/training-concussion).

[CDC Concussion Information Sheet](https://www.cdc.gov/headsup/parents/index.html)

Baseline Neurocognitive Testing

It is strongly recommended that each athlete take a baseline neurocognitive test with their health care professional prior to the start of conditioning / training camp. In the event of a concussion, this baseline test will assist the health care professionals in making return to-play decisions.

Identify Suspected Cases of Concussions

The highest medical authority at a practice or game is the person who is in the best position to diagnose a suspected concussion and to make the call. The presence of (or immediate access to) a medical doctor (MD), doctor of osteopathy (DO), EMT, or athletic trainer trained in concussion recognition is ideal. However, in cases where medical professionals are not present or immediately available, a person should be present who can help identify someone who may be suspected of having a concussion or head injury.

Signs Observed by Parents, Guardians, or Staff:

- Appears dazed or stunned
- Is confused about the assignment or position
- Forgets instructions
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows behavior or personality changes
- Can't recall events prior to hit or fall
- Can't recall events after hit or fall

Symptoms Reported by Player:

- Headache or pressure in the head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Does not "feel right"

If athletes report or exhibit one or more of the signs listed above or say they "just don't feel right" after a bump, blow, or jolt to the head or body, they may have a concussion.

Danger Signs: (which require immediate medical attention)

- One pupil larger than the other
- Drowsiness or inability to wake up
- Headache that gets worse and does not go away
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Inability to recognize people or places
- Increasing confusion, restlessness, or agitation
- Unusual behavior, loss of consciousness (even brief)

If one or more of these danger signs occur after a bump, blow, or jolt to the head or body: call 9-1-1 or transport the athlete immediately to the emergency room.

On-field Medical Status Evaluation

Example questions and assessment tools*

Orientation Questions: (ask the athlete)

- What period/quarter/half are we in?
- What stadium/field is this?
- What city is this?
- Who is the opposing team?
- Who scored last?
- Do you remember the hit?
- What team did we play last?
- Repeat the following: girls, dog, green

Concentration: (ask the athlete)

- Repeat the days of the week backwards (starting with today)
- Repeat the months of the year backward (starting with December)
- Repeat these numbers backward 63, (36), 419 (914), 6294 (4926)

Exertional Maneuvers:

- Complete 5 jumping jacks
- Complete 5 sit-ups

Word List Memory: (ask the athlete)

- Repeat the three words from earlier: girls, dog, green

*Other superior assessment tools (some of which require professional administration) are available and should be researched including:

- SCAT5
- Child SCAT5
- ImPACT
- King-Devick test
- HitCheck: Sideline Concussion Test

If a Concussion is Suspected, the Following Actions Should Be Taken

1. **Remove the athlete from play.** If any of the signs and symptoms are observed, remove the athlete from play. When in doubt, sit them out!
2. **Make sure the athlete is evaluated by a licensed physician, licensed neuropsychologist, certified athletic trainer, or other licensed health care professional as determined by the department of public health.** Let the professionals judge the severity.
3. **Inform the athlete's parents / guardians and provide them with the [CDC Concussion Information Sheet](#)** to help them monitor the athlete for signs and symptoms:
4. **Keep the athlete out of play the day of the injury AND until a licensed physician, licensed neuropsychologist, certified athletic trainer, or other licensed health care professional as**

determined by the department of public health provides written return to play permission to Melrose Recreation administration.

No Encouragement of Dangerous Play

Parents, guardians, coaches, trainers, and volunteers should not encourage any dangerous play that violates the age appropriate “No Contact” or “Limited Contact” rules of the program or league.

Proper Fitting and Care of Helmets

All equipment managers and coaches should be trained on the proper fitting and care of helmets. Resources on this topic may be found here: [MomsTeam | Complete Youth Sports Resource Site](#)

Distribution / Acknowledgement / Documentation

An electronic copy of this risk management program should be distributed to each administrator and staff member who will be supervising an athletic program prior to the start of every season. Each should acknowledge in writing (wet or electronic signature) that they have received and carefully reviewed the entire program. The sports organization should maintain documentation on an annual basis of the risk management plan that was distributed as well as the administrator and staff acknowledgements.