

Trinity College School Concussion Policy

The Trinity College School Concussion Policy was developed in collaboration with the Concussion Centre from Holland Bloorview Kids Rehabilitation Hospital.

The purpose of this policy is to increase education and awareness for faculty, school staff, parents/guardians, and students on the signs and symptoms of concussion and the specific protocols for managing concussion in the school setting. It is designed to keep students safe, be proactive, align with current evidence and Rowan's Law, and support the staff and students of Trinity College School.

Jurisdiction: The policy applies to students participating in any school sanctioned activities.

Concussion Awareness. All students, parents/guardians, teachers, coaches, and supervisors must review the government's concussion awareness resources as may be prescribed under *Rowan's Law* (Ontario.ca/concussion) at the start of each school year annually. Stakeholders must sign *Receipt of Review of a Concussion Awareness Resource* to confirm their review.

Concussion Code of Conduct: All students (and their parent or guardian, if the student is under 18) and coaches/team therapist must review and sign the TCS Concussion Code of Conduct before the start of the school year annually and provide to the Frances Price Athletic Therapy Clinic.

Training: The school will provide training on concussion awareness, prevention, identification, and management for all teachers/coaches/supervisors and others who are involved in intramural or inter-school athletics or any part of the TCS health and physical education curriculum.

Concussion Prevention: TCS staff are responsible for ensuring student safety during school activities through appropriate application of any and all employee policies in situations including but not limited to: the playing surface, equipment, injury, fouls, violence, and unsportsmanlike conduct.

Policy Evaluation: TCS will evaluate the effectiveness of the policy's implementation annually and make changes as necessary.

STEP 1: Recognizing a suspected concussion

- a) ***What is a concussion?*** A concussion is a form of a traumatic brain injury induced by biomechanical forces that results in signs and symptoms after a blow to the head or the body that typically resolve spontaneously within 1-4 weeks of injury. A concussion can result in non-specific physical, cognitive, sleep and emotional symptoms. Symptoms of concussion typically appear immediately but may be delayed and evolve within the first 24-48 hours.

- b) ***When should a concussion be suspected?*** All students who experience any concussion reported symptoms (Figure 1) or visual/observable signs (Figure 2) following a blow to the head or another part of the body is considered to have a suspected concussion and must stop participation in the sport or school activity immediately. School activities could include: recess, athletes, Phys Ed, field trips, classroom, assembly, co-curricular, etc.

- c) ***A suspected concussion can be identified in three ways:***
 - i. Student self-reported symptoms; even if only one symptom (*Figure 1*)
 - ii. Observed signs by any TCS school member and/or official (*Figure 2*)
 - iii. Peer-reported signs and symptoms (*Figure 1 and 2*)
 - iv. If a student experiences a sudden onset of any of the “red flag symptoms”, **911** should be called immediately (*Figure 3*).

FIGURE 1: GENERAL CONCUSSION SYMPTOMS		
Headache	Feeling mentally foggy	Sensitive to light
Nausea	Feeling slowed down	Sensitive to noise
Dizziness	Difficulty concentrating	Irritability
Vomiting	Difficulty remembering	Sadness
Visual problems	Drowsiness	Nervous/anxious
Balance problems	Sleeping more/less than usual	More emotional
Numbness/tingling	Trouble falling asleep	Fatigue

FIGURE 2: VISUAL/OBSERVABLE SIGNS
Lying down motionless on the playing surface
Slow to get up after a direct or indirect hit
Disorientation or confusion, or inability to respond appropriately to questions
Blank or vacant look
Balance, gait difficulties motor incoordination, stumbling, slow labored movements
Facial injury after head trauma

McCrory P, et al. Consensus statement on concussion in sport: [the 5th international conference on concussion](#) in sport held in Berlin, Oct 2016. British Journal of Sports Medicine 2017 0:1-10.
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FIGURE 3: RED FLAG SYMPTOMS (Call 911 immediately to go to nearest emergency department)

Headaches that worsen	Can't recognize people or places
Seizures or convulsion	Increasing confusion or irritability
Repeated vomiting	Weakness/tingling/burning in arms or legs
Loss of consciousness	Persistent or increasing neck pain
Looks very drowsy/can't be wakened	Unusual behavioural change
Slurred speech	Focal neurologic signs (i.e.: paralysis, weakness, etc.)

STEP 2: REMOVAL FROM SPORT/ACTIVITY

All school staff hold a responsibility to recognize the signs and symptoms of concussion. If there is doubt whether a concussion has occurred, it is to be assumed that it has and the student is to be removed from play. **If in doubt, sit them out.**

Once a concussion is suspected, the most responsible school staff member (athletic therapist, teacher, coach, or supervisor) present/on-site at the time must remove the student from sport or school activity.

- a) Remove the student from the current activity and do not let them return.
- b) Contact the TCS duty nurse to communicate suspected injury.
- c) Monitor the student with a suspected concussion until transferred to the TCS duty nurse or TCS athletic therapist. Do not leave the student alone or let them drive or transport themselves independently. Monitor and document any changes (i.e. physical, cognitive, emotional/behavioural) in the student. Once care is transferred a SCAT 5 or a Child SCAT 5 will be completed by the TCS duty nurse or TCS athletic therapist.
- d) Recommend to the student's parent or guardian that they seek a medical assessment as soon as possible, if the student's care is transferred to a parent. If care is transferred to the duty nurse at the TCS Health Centre, the Health Centre staff will arrange for the student to be assessed. If a SCAT5 is completed, provide this information to family to take to medical appointment.

Note: All students with a suspected concussion must be evaluated by a medical doctor or nurse practitioner to determine a concussion diagnosis. In addition to nurse practitioners, the types of medical doctors that are qualified to evaluate patients with a suspected concussion include: **family physician, pediatrician, emergency room physician, sports-medicine physician, neurologist or internal medicine and rehabilitation physiatrists.** Documentation from any other source is not acceptable.

Emergency Medical Assessment: If there are any signs or suspicion of a more serious head, neck, or spine injury (i.e. red flag symptoms in Figure 3) then the emergency action plan should be initiated by calling **911** to transfer the student to the nearest emergency department. TCS staff, coaches, parents and/or sport officials should not make any effort to remove equipment or move the student until the ambulance has arrived. The student should not be left alone until EMS arrives.

If any red flags symptoms are observed or reported within 48 hours of an injury, then the student should be transported for urgent medical assessment to the nearest emergency department.

Offsite protocol:

- a) If a TCS student is suspected to have sustained a concussion while travelling with the school, it is the responsibility of the coach or staff member to complete the above steps, and communicate with the TCS Health Centre duty nurse either:
 - i. Upon arrival back to TCS, the coach or staff member must accompany the student to the TCS Health Centre
 - ii. If the student's care is transferred to a parent/guardian while away from TCS, the coach or staff member must communicate the injury and transfer of care to the TCS Health Centre duty nurse, upon arrival back to TCS.
- b) If a student is suspected to have sustained a concussion from non-school related activities, it is the responsibility of the parent/guardian providing care to report the incident to the duty nurse at the TCS Health Centre. The parent/guardian must provide documentation confirming the diagnosis of a concussion by a doctor or nurse practitioner to the TCS Health Centre nursing staff.

STEP 3: Initial Medical Assessment

If a student has been deemed to have sustained a suspected concussion, it is the responsibility of the TCS staff (coach, athletic therapist) to report the injury to the TCS Health Centre nursing staff and the nursing staff to arrange a visit to a medical doctor or nurse practitioner.

If the student is in the care of his/her parents/guardians following a suspected concussion, it is the parent's/guardian's responsibility to take the student to a medical doctor or nurse practitioner.

Students are not permitted to return to school or any school activities after a suspected concussion until they have sought medical attention from a medical doctor or nurse practitioner. This is to ensure all students with a suspected concussion seek medical assessment for a proper diagnosis and follow a gradual return to learn and return to sport protocol if diagnosed with a concussion. Written positive or negative diagnosis must be obtained and documentation provided to the TCS Health Centre staff.

- a) **If a concussion was diagnosed:** Begin concussion protocol. Communication and coordination plan will be implemented by the TCS Frances Price Athletic Therapy Clinic and the Academic Support departments.
- b) **If a concussion was not diagnosed:** In the event a concussion is not diagnosed by a medical doctor or nurse practitioner, the student should follow the recommendations given by the medical doctor or nurse practitioner. TCS staff and or parent/guardian should continue to

McCrory P, et al. Consensus statement on concussion in sport: [the 5th international conference on concussion](#) in sport held in Berlin, Oct 2016. *British Journal of Sports Medicine* 2017 0:1-10.

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monitor the student for at least 24-48 hours after the injury, as signs and symptoms may take hours or days to appear.

STEP 4: Recovery and Clinical Support

An initial period of 24-48 hours of rest is recommended following a concussion with limited physical and cognitive activity. After an initial period of rest, it is recommended that low to moderate levels of physical and cognitive activity be gradually started at a level that does not result in exacerbation of symptoms. Activities that pose no/low risk of sustaining a concussion should be resumed even if mild residual symptoms are present or whenever acute symptoms improve sufficiently to permit activity. Students should avoid activities associated with a risk of contact, fall, or collisions such as high speed and/or contact activities and full-contact sport that may increase the risk of sustaining another concussion during the recovery period until clearance by a medical doctor or nurse practitioner.

Most students (70%) who sustain a concussion will be able to return to full school and sport activities generally within four weeks of injury. However, approximately 15-30 % will experience symptoms that persist beyond that timeframe. Students who experience persistent concussion symptoms for >4 weeks require referral to a medically supervised multidisciplinary concussion centre. Students who have [several delayed modifiers](#) present would benefit from a referral for specialized concussion care in the first 4 weeks post injury.

Our school is partnered with the Concussion Centre at Holland Bloorview Kids Rehabilitation Hospital to provide students with concussion care for those families who choose to access this either in person or via telemedicine. Information can be found online at www.hollandbloorview.ca/concussion

STEP 5: Gradual Return to Learn and Sport Protocol

After the initial rest period of 24-48 hours the student should commence stage 2 of the Return to Learn and Sport Protocol which includes symptom-limited activities. An individualized and gradual plan should be developed for each student. These protocols may happen simultaneously, however all students should return to full school schedule and academic workload, including exams, prior to returning to stage 5 or 6 (contact practice and competitive play).

TCS Return to Learn Protocol (RTL)

Progression is individual and all concussions vary.

Supported by: Academic Support and Health Centre in addition to healthcare professional recommendations.

Stage	Activity Guidelines	Action
<p>1) Symptom Limited Activity</p> <p>Goal is a gradual return to typical activities</p>	<ul style="list-style-type: none"> ● Daily activities at home/Health Centre that do not provoke symptoms (e.g. reading, texting, screen time). Start with 5-15 minutes at a time and gradually build up as tolerated 	<p>After 24-48 hours of relative physical and cognitive rest post-injury, student may begin very light cognitive and light aerobic activity.</p>
<p>2) Light Cognitive Work</p> <p>Goal is increased tolerance to cognitive work</p>	<ul style="list-style-type: none"> ● Student to work in Academic Support to start organizing and planning under supervision ● Minimal cognitive tasks as tolerated ● No academic assessments 	<p>Academic Support communicates Return to Learn plan to teachers, housemaster, advisor, Health Centre staff, Athletic Therapy staff, parents/guardians.</p>
<p>3) Part Time School</p> <p>Goal is increased academic activities.</p>	<ul style="list-style-type: none"> ● Trial classes and attendance as tolerated ● School work as tolerated in gradual increments ● Flexibility for essential assessments as tolerated 	<p>Academic Support and Athletic Therapy communicate recommendations from medical and healthcare appointments and implement and communicate necessary accommodations to support return.</p>

<p>4) Full time School</p> <p>Goal is a return to full academic activities and catch up on essential work as determined through Academic Support.</p>	<ul style="list-style-type: none"> ● Progress to full day class attendance ● Gradually decrease accommodations as tolerated for full days and increase workload ● Accommodations related to concussion must be complete before medical clearance is sought for a full Return to Sport ● Flexibility for essential assessments 	<p>Return to full academic activities and catch up on missed work.</p>
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A student who has been assessed and diagnosed with a concussion may return to school with accommodations. The Academic Support office, Athletic Therapy Clinic and Health Centre will serve as the main point of contact for the student, the parents/guardians, teachers, school coaches and other school staff to coordinate the return to school supports. The Academic Support office, Athletic Therapy Clinic and Health Centre will monitor the student’s progress through the return to learn protocol. This may include identification of the student’s symptoms and how the student responds to various activities in order to develop and/or modify appropriate strategies and approaches that meet the changing needs of the student. Prolonged absence from the school environment during concussion recovery is not recommended for children and youth.

Students who return to school may require individualized classroom strategies and/or approaches to return to learning activities, which will need to be adjusted throughout recovery. Academic Support and Health Centre will support the student and make teachers aware of the possible difficulties (i.e. cognitive, emotional, or behavioural) and accommodations that student may require when returning to learning activities following a concussion. These difficulties may be subtle and temporary, but may significantly impact a student’s performance.

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TCS Return to Sport Protocol (RTS)

Progression is individual and all concussions vary.

Supported by: Health Centre and Athletic Therapists in addition to healthcare professional recommendations and medical clearance by a medical doctor or nurse practitioner.

Cognitive testing may be conducted prior to beginning Return to Sport Protocol, and compared to baseline values.

Stage	Aim	Activity	Goal of each step
1	Symptom-limited activity	After 24-48 hours of rest, light cognitive and physical activity can begin, as tolerated. Starting with daily activities around the house, and simple chores. No physical education at school and no organized sports.	Gradual reintroduction of light cognitive physical activity.
2	Light aerobic exercise	Light exercise such as walking or stationary cycling as tolerated is helpful for concussion recovery. Start at 15 minutes, duration and intensity can be increased if symptoms do not worsen and no new symptoms appear during or following exercise. No resistance training. Progress to stage 3 if no new or worsening symptoms appear with in 24 hours.	Increase heart rate
3	Individual sport-specific exercise	Activities such as running or throwing can begin as tolerated. There should be no body contact. These activities to be done individually and supervised in a controlled environment. No resistance training. Progress to stage 4 if no new or worsening symptoms appear with in 24 hours.	Add movement
4	Non-contact training drills and modified physical education	Begin agility, reaction and sport specific drills. Modified physical education with minimal risk of contact (dance, badminton, running, swimming) permitted. No contact activities (body checking or heading the ball, etc). Begin resistance training. "On field" practice is permitted with these appropriate accommodations.	Exercise, coordination and increased thinking
Medical Clearance by medical doctor or nurse practitioner			

McCorry P, et al. Consensus statement on concussion in sport: [the 5th international conference on concussion](#) in sport held in Berlin, Oct 2016. British Journal of Sports Medicine 2017 0:1-10.

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5	Full contact practice	Must be symptom-free. Full contact practice and/or unrestricted physical education participation. Following clearance by a medical doctor or nurse practitioner. “On-field” full practices and physical education with contact is permitted. Work with coach to return to pre-injury skill level and conditioning levels prior to competition or game play.	Restore confidence and assess functional skills by coaching staff
6	Return to sport	Must be symptom-free. Full return to sport/physical activity. Student can compete in intramural or interschool sport games or competition.	Return to unrestricted activities/full game play

The Health Centre and athletic therapist will serve as the main point of contact for the student, parents/guardians, teachers, school coaches and other school staff to coordinate return to sport in the school environment. Children and adolescents should not return to Stage 5 until they have successfully returned to a full academic schedule and workload. Early introduction of symptom-limited physical activity is appropriate. (Stage 2 of Return to Sport)

A student should complete each stage of the Return to Sport Protocol and then rest from physical activity for 24 hours. If new or worsening symptoms appear at a particular stage, a student should return to the previously completed successful stage.

STEP 6: Medical Clearance for Stages 5 and 6 Physical activity.

Prior to returning to full contact practice or physical education participation within the school environment (Stage 5 and 6), a student will be provided with a medical clearance letter from Trinity College School that must be completed and signed by a medical doctor or nurse practitioner.

The student/parent/guardian must provide this medical clearance letter to the Frances Price Athletic Therapy Clinic and/ or TCS Health Centre who will communicate to teacher/coach/supervisor regarding the student’s progression to unrestricted physical activity participation in the school environment.

Students must complete a full team practice (Stage 5) before competition/game play. Some students may have been out of sport participation for long periods depending on their recovery timeframe. Do no progress to game play until the player has regained their pre-injury skill level and the player is confident in their ability to return to game play.

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Receipt of Review of Concussion Awareness Resource for Parents and Students

Thank you for completing your review of the Concussion Awareness Resource.

- Under *Rowan's Law*, as a student of Trinity College School, please confirm that you have reviewed one of the Concussion Awareness Resources on this website (Ontario.ca/concussions) before you can participate in a physical activity.
- Under *Rowan's Law*, as a parent/guardian of a student at Trinity College School, please confirm that you have reviewed one of the Concussion Awareness Resources on this website (Ontario.ca/concussions).
- In compliance with *Rowan's Law*, an annual review of the Concussion Awareness Resources is required.

Receipt of Review

I, _____ (name) confirm that I have reviewed a Concussion Awareness Resource.

Student Signature

Date

Parent/Guardian Signature

Date

Disclaimer: Your completion of this form will not constitute confirmation that you have reviewed the concussion awareness resources for the purpose of *Rowan's Law* (Concussion Safety), 2018. If you want to use this form to show that you have reviewed the concussion awareness resources, you must provide the completed form to your sport organization(s). This form will not be saved by the Government of Ontario and the Government of Ontario assumes no responsibility for confirming that you have reviewed the concussion awareness resources.



Concussion Code of Conduct For TCS Students

Trinity College School concussion health and safety is a priority. All coaches and responsible adults are committed to modelling and facilitating safe play and practices, and abide by the guidelines articulated in the Trinity College School Concussion Policy.

I will help prevent concussions by:

- Wearing the proper equipment for my sport and wearing it correctly.
- Developing my skills and body strength so that I can participate to the best of my ability.
- Respecting the rules of my sport, and fair play.
- My commitment to fair play and respect for all (respecting other athletes, coaches, medical staff and officials).

I will care for my health and safety by taking concussions seriously, and I understand that:

- A concussion is a serious brain injury that can have both short- and long-term effects.
- I do not need to lose consciousness to have had a concussion.
- A blow to the head, face, or neck, or a blow to the body may cause the brain to move around inside the skull and result in a concussion.
- I have a commitment to concussion recognition and reporting, including self-reporting of a possible concussion and reporting to an adult when you suspect that another individual may have sustained a concussion.
- I suspect I might have a concussion I should stop playing the sport and activity immediately.
- Continuing to participate in further training, practice or competition with a possible concussion increases my risk of more severe, longer lasting concussion symptoms, as well as increases my risk of other injuries.

I will not hide concussion symptoms. I will speak up for myself and others.

- I will not hide my symptoms. I will tell my coach, medical staff, parent, or other responsible adult.
- If someone else tells me about concussion symptoms, or I will tell a coach, medical staff, parent or another responsible adult I trust so they can help.
- I understand that if I have a suspected concussion, I will be removed from sport or activity and that I will not be able to return to training, practice or competition until I undergo a medical assessment. If a concussion is diagnosed by a doctor or nurse practitioner, I must be medically cleared to return to training, practice or competition.
- I have a commitment to sharing any pertinent information regarding incidents of removal from sport or activity with my school and any other sport organization.

I will take the time I need to recover, because it is important for my health.

- I understand my commitment to supporting the TCS Return to Learn Protocol and the TCS Return to Sport Protocol.
- I understand I will have to be cleared by a medical doctor or nurse practitioner, preferably one with experience in concussion management, prior to returning to unrestricted activity.

Respect Others:

- I will respect the rules of the game.
- I will respect my opponents and fair play.
- I will not fight or attempt to injure anyone on purpose.
- I will respect my coaches, TCS staff, parents and the medical professionals and any decisions made concerning my health and safety.

Student name: _____ Student signature: _____

Date: _____





Concussion Code of Conduct For TCS Coaches and Medical Staff

Trinity College School concussion health and safety is a priority. All coaches and responsible adults are committed to modelling and facilitating safe play and practices, and abide by the guidelines articulated in the Trinity College School Concussion Policy.

I can help prevent concussions through my:

- Efforts to ensure that my athletes wear the proper equipment and wear it correctly.
- Efforts to ensure that my athletes develop their skill and body strength so they can participate to the best of their abilities.
- Respect for the rules of my sport or activity and efforts to ensure that my athletes do, too.
- Commitment to fair play and respect for all (respecting others athletes, coaches, medical staff and officials and ensuring that my athletes respect others and play fair).

I will care for my health and safety of all participants by taking concussions seriously. I understand that:

- A concussion is a serious brain injury that can have both short- and long-term effects.
- A person does not need to lose consciousness to have had a concussion.
- A blow to the head, face, or neck, or a blow to the body may causes the brain to move around inside the skull and result in a concussion.
- An athlete with a suspected concussion should stop participating in training, practice or competition immediately.
- I have a commitment to concussion recognition and reporting, including self-reporting of a possible concussion and reporting to a designated person when an individual suspect's that another individual may have sustained a concussion.
- Continuing to participate in further training, practice or competition with a suspected concussion increases a person's risk of more severe, longer lasting symptoms and increases their risk of other injuries or even death.

I will create an environment where participants feel safe and comfortable speaking up. I will:

- Encourage athletes not to hide their symptoms, but to tell me, an official, medical staff, parent or another adult they trust if they experience any symptoms of a concussion after an impact.
- Lead by example. I will tell a fellow coach, official, medical staff and seek medical attention by a doctor or a nurse practitioner if I am experiencing any concussion symptoms.
- Understand and respect that any athlete with a suspected concussion must be removed from sport and not permitted to return.
- Athletes must be accompanied to the TCS Health Centre or Francis Price Athletic Therapy Clinic for assessment. If a concussion is diagnosed by a medical doctor or nurse practitioner, athletes must be medically cleared to return to unrestricted play.
- *For coaches only:* Commit to providing opportunities before and after each training, practice and competition to enable athletes to discuss potential issues related to concussions.

I will support all participants to take the time they need to recover.

- I understand my commitment to supporting the TCS Return to Learn Protocol and the TCS Return to Sport Protocol.
- I understand that the athletes will have to be medically cleared by a doctor or nurse practitioner before returning to unrestricted sport.
- I will respect my fellow coaches, medical staff, parents, and medical doctors and nurse practitioners, regarding the health and safety of the athletes.

Name: _____ **Signature:** _____

Date: _____





Concussion Code of Conduct For TCS Parents/Guardians

Trinity College School concussion health and safety is a priority. All coaches and responsible adults are committed to modelling and facilitating safe play and practices, and abide by the guidelines articulated in the Trinity College School Concussion Policy.

I will help my child/children prevent concussions through my:

- Efforts to ensure that my child/children wear the proper equipment and wear it correctly.
- Efforts to ensure that my child/children develop their skill and body strength so they can participate to the best of their abilities.
- Respect for the rules of my child/children's sport or activity and efforts to ensure that my child/children do, too.
- Commitment to fair play and respect for all (respecting other children, coaches, medical staff and officials and ensuring that my child/children respect others and play fair).

I will be aware of the signs and symptoms of concussion in my child/children and take concussions seriously. I understand that:

- A concussion is a serious brain injury that can have both short- and long-term effects.
- A person does not need to lose consciousness to have had a concussion.
- A blow to the head, face, or neck, or a blow to the body may cause the brain to move around inside the skull and result in a concussion.
- A child with a suspected concussion should stop participating in training, practice or competition immediately.
- I have a commitment to concussion recognition and reporting when I suspect my child/children may have sustained a concussion.
- Continuing to participate in further training, practice or competition with a suspected concussion increases a person's risk of more severe, longer-lasting symptoms and increases their risk of other injuries or even death.

I will ensure my child/children feel comfortable speaking up if they experience any signs or symptoms of a concussion. I will:

- Encourage my child/children not to hide their symptoms, but to tell a teacher, an official, medical staff, me or another adult they trust if they experience any symptoms of a concussion after an impact.
- Lead by example. I will tell a fellow parent/guardian, official, medical staff and seek medical attention by a doctor or a nurse practitioner if I am experiencing any concussion symptoms.
- Understand and respect that any child with a suspected concussion must be removed from sport and not permitted to return.
- Students must be accompanied to the TCS Health Centre or Francis Price Athletic Therapy Clinic for assessment. If a concussion is diagnosed by a medical doctor or nurse practitioner, students must be medically cleared to return to unrestricted play.

I will support my child's recovery and ensure that they do not return to sport or other physical activity until they are fully recovered.

- I understand my commitment to supporting the TCS Return to Learn Protocol and the TCS Return to Sport Protocol.
- I understand that my child/children will have to be medically cleared by a doctor or nurse practitioner before returning to unrestricted sport.
- I will respect the coaches, medical staff, teachers, medical doctors and nurse practitioners, regarding the health and safety of my child/children.

[signatures may be electronic and/or email addresses collected through google forms or other electronic attestation]

Child/Children's Name: _____

Child/Children's Grade: _____

Parent/Guardian Name: _____ **Signature:** _____

Date: _____





Medical Assessment Letter

Date: _____

Name: _____

History

Signature/print: _____ R.Kin / CAT(C)

To whom it may concern,

Children and youth who sustain a suspected concussion should be managed according to the Canadian Guideline on Concussion in Sport. Accordingly, I have personally completed a Medical Assessment on this patient.

Results of Medical Assessment

- This patient has not been diagnosed with a concussion and can resume full participation in school, work, and sport activities without restriction.
- This patient has not been diagnosed with a concussion but the assessment led to the following diagnosis and recommendations:

- This patient has been diagnosed with a concussion.

The goal of concussion management is to allow complete recovery of the patient's concussion by promoting a safe and gradual return to school and sport activities. The patient has been instructed to avoid all recreational and organized sports or activities that could potentially place them at risk of another concussion or head injury. I would ask that the patient be allowed to participate in school and low-risk physical activities as tolerated and only at a level that does not worsen their concussion symptoms, as deemed by the TCS Concussion Policy. The above patient should not return to any full contact practices or games until the Frances Price Athletic Therapy Clinic has been provided with a Medical Clearance Letter provided by a medical doctor or nurse practitioner in accordance with the Canadian Guideline on Concussion in Sport.

Thank-you very much in advance for your understanding.
Yours Sincerely,

Signature/print _____ M.D. / N.P. (circle appropriate designation)*

**In rural or northern regions, the Medical Assessment Letter may be completed by a nurse with pre-arranged access to a medical doctor or nurse practitioner. Forms completed by other licensed healthcare professionals should not otherwise be accepted.*

We recommend that this document be provided to the individual without charge

Source: PARACHUTE | Canadian Guideline on Concussion in Sport, Page 31



Medical Clearance Letter

Concussion Date: _____

Student's Name: _____

Progressed History:

Signature/print: _____ R.Kin / CAT(C)

To whom it may concern,

Individuals who are diagnosed with a concussion should be managed according to the Canadian Guideline on Concussion in Sport including the TCS Return to Learn and Return to Sport Protocols. Accordingly, the above individual has been medically cleared to participate in the following activities as tolerated:

- Stage 5:** Full-contact practice and/or unrestricted physical education participation (Including gym class activities with risk of contact and head impact, e.g. soccer, dodgeball, basketball), followed by 24 hours of asymptomatic rest, prior to full return to sport play or competition (**Stage 6**).

What if symptoms reoccur? Any student at Trinity College School who has been cleared for physical activities, gym class or non-contact practice, and who has a reoccurrence of symptoms, should immediately remove him or herself from the activity and inform the teacher or coach.

Individuals who have been cleared for full contact practice or game play must be able to participate in full-time school schedule and workload (or normal cognitive activity) as well as high intensity resistance and endurance exercise (including non-contact practice) without symptom recurrence (stages 1-4 of return-to-sport protocol).

Any individual who has been cleared for full-contact practice or full game play and has a reoccurrence of symptoms, should immediately remove him or herself from play, inform their teacher or coach, and undergo medical assessment by a medical doctor or nurse practitioner before returning to full-contact practice or games.

Any individual who returns to practices or games and sustains a new suspected concussion should seek medical assessment by a medical doctor or nurse practitioner.

Thank you very much in advance for your understanding.

Yours Sincerely,

Signature/print _____ M.D. / N.P. (circle appropriate designation)*

**In rural or northern regions, the Medical Assessment Letter may be completed by a nurse with pre-arranged access to a medical doctor or nurse practitioner. Forms completed by other licensed healthcare professionals should not otherwise be accepted.*

We recommend that this document be provided to the individual without charge



Suspected Concussion Injury Report Form

Date of injury: _____ Time: _____

Date you were aware of suspected injury: _____

Injury scenario and description:

REPORTED SYMPTOMS (CHECK ALL THAT APPLY)

<input type="checkbox"/> Visual problems	<input type="checkbox"/> Balance problems	<input type="checkbox"/> Drowsiness	<input type="checkbox"/> Irritability
<input type="checkbox"/> Nausea	<input type="checkbox"/> Feeling mentally foggy	<input type="checkbox"/> Sleeping more/less than usual	<input type="checkbox"/> Sadness
<input type="checkbox"/> Dizziness	<input type="checkbox"/> Feeling slowed down	<input type="checkbox"/> Trouble falling asleep	<input type="checkbox"/> Nervous/anxious
<input type="checkbox"/> Vomiting	<input type="checkbox"/> Difficulty concentrating	<input type="checkbox"/> Sensitive to light	<input type="checkbox"/> More emotional
<input type="checkbox"/> Headache	<input type="checkbox"/> Difficulty remembering	<input type="checkbox"/> Sensitive to noise	<input type="checkbox"/> Fatigue

RED FLAG SYMPTOMS (CHECK ALL THAT APPLY): CALL 911 IMMEDIATELY WITH A SUDDEN ONSET OF ANY OF THESE SYMPTOMS

<input type="checkbox"/> Severe or increasing headache	<input type="checkbox"/> Neck pain or tenderness	<input type="checkbox"/> Seizure or convulsion
<input type="checkbox"/> Double vision	<input type="checkbox"/> Loss of consciousness	<input type="checkbox"/> Repeated vomiting
<input type="checkbox"/> Weakness or tingling/burning in arms/legs	<input type="checkbox"/> Deteriorating conscious state	<input type="checkbox"/> Increasingly restless, agitated or combative

Are there any other symptoms or evidence of injury to anywhere else? Yes No
 If yes, what: _____

Has this student had a diagnosed concussion before? Yes No Prefer not to answer
 If yes, how many: 1 2 3 4 >5 Unsure

Any pre-existing medical conditions or take any medications? Yes No Prefer not to answer
 If yes, please list: _____

This form is to be returned to the TCS Health Centre upon arrival back to TCS.

Signature: _____
 Title: _____
 School: _____
 Email Address: _____