

SPORT EMERGENCY CLEARANCE CARD

STUDENT'S NAME _____

SCHOOL Kenai Middle School

ADDRESS _____

HOME PHONE _____

PARENT'S NAME _____

GRADE _____

EMERGENCY PHONE # _____

FRIEND OR RELATIVE _____

DOCTOR'S NAME _____

PHONE _____

HOSPITAL PREFERENCE _____

INSURANCE COMPANY _____

PERSON'S NAME
INSURANCE IS UNDER _____

List any physical handicaps and/or prescribed medication which may influence the performing abilities
of this student: _____

PARENT'S SIGNATURE _____

DATE _____

PARENT'S EMAIL _____

MIDDLE SCHOOL

CO-CURRICULAR PARTICIPANT USER FEE CONTRACT

6th, 7th and 8th GRADE STUDENTS

Student Name (Please Print) KENAI MIDDLE SCHOOL School Grade Date

In an effort to supplement available state and district funds for the 2016-2017 co-curricular programs, a fee will be collected from student participants. This revenue will be used to cover travel and official costs, additional coaching salaries, as well as replacement costs for equipment and uniforms. The student shall pay the appropriate fee by the by the beginning of the activity in order to participate. In cases where this deadline cannot be met, the student must make specific arrangements with the athletic director. Payment of the user fee provides for participation only and does not guarantee playing time in competitions, or any similar guarantee.

ACTIVITY FEE CHARGES

6TH GRADE*\$60.00

- [] Cross-Country Running
[] Track
[] Cross-Country Skiing
[] Wrestling

FREE

- [] Basketball
[] Volleyball
[] Soccer

7TH & 8TH GRADE \$60.00 PER ACTIVITY

- [] Cross-Country Running/Skiing
[] Soccer
[] Basketball (\$30 Intramurals/ \$30Team)
[] Volleyball (\$30 Intramurals/ \$30Team)
[] Track
[] Wrestling

REFUND OF ACTIVITY FEES

FULL REFUND

Students who are cut from a co-curricular activity during the first 10 days of practice are eligible for a full refund.

PRORATED REFUND

Students injured or having special extenuating circumstances during the same activity season will receive a prorated refund. The coach and athletic director/administrator will determine the amount to be refunded.

NO REFUND

Students who quit and/or withdraw from a team due to disciplinary reasons will not receive a refund.

I have read and understand the above terms and conditions and agree to abide by the same.

Student Signature Parent/Legal Guardian Signature Date

APPENDIX A

**CO-CURRICULAR PARTICIPATION CONSENT FORM
MIDDLE SCHOOL WARNING, ASSUMPTION OF RISK
And
HOLD HARMLESS AGREEMENT**

This form affects your legal rights and responsibilities. Please read it carefully before you sign it and ask questions if there is anything you do not understand.

Student Name (*Please Print*)

School

Date

FOR ALL SPORTS AND ACTIVITIES

I understand that all co-curricular activities have a certain degree of risk. I also understand these risks may include injury ranging from minor sprains and contusions, to major injury, possible paralysis, or even death. I understand the possibility of serious injury may impair my future abilities to earn a living; to engage in other business, social and recreational activities; and to enjoy life generally.

Having read and understood the above warning, I recognize the importance of following coaches' instructions regarding playing techniques, training and other team rules, and I agree to obey such instructions.

I have read the Kenai Peninsula Borough School District activity guidelines and understand their contents. I understand that the Kenai Peninsula Borough School District and Alaska School Activities Association will not assume responsibility for injuries sustained in the co-curricular programs. I also understand that primary accident insurance coverage is my responsibility. I give consent for emergency treatment to be administered to my child. I also authorize the school to transport my child for any co-curricular activity.

Except for claims arising from the sole negligence or willful misconduct of the school district, I hereby agree to hold the Kenai Peninsula Borough School District, its employees, representatives and coaches, harmless from any and all liability, actions, debts, or claims of every kind whatsoever which may arise by or in connection with participation of my child/ward in activities related to the above mentioned middle school programs. The terms hereof shall serve as a release for my heirs, estate, executor and all members of my family.

Having read the above warning and having understood the dangers and potential risks involved in playing or practicing these activities, I give my consent as the parent/legal guardian of _____ (student's name) to participate in the following program:

Student Signature

Grade

Date

Parent/Legal Guardian Signature

Date

Note: If you are a KPBSD Connections student, you must obtain the signature of the Connection's Program Director for each activity you participate in and leave a copy of this form in his/her office.

KENAI PENINSULA BOROUGH SCHOOL DISTRICT
Student Health Review

STUDENT NAME _____ BIRTHDATE _____ GRADE _____
SCHOOL _____

For ADDITIONAL COMMENTS please use the back of the form.

1. **LAST PHYSICAL EXAM:** Date _____ Doctor _____ Clinic Name/Location _____

2. **LAST DENTAL EXAM:** Date _____ Doctor _____ Clinic Name/Location _____

3. **LAST VISION EXAM:** Date _____ Doctor _____ Clinic Name/Location _____

4. **CURRENT MEDICATIONS** Medication(s) to be taken at School _____ (Additional form required.)
Medication(s) taken at Home (include non-prescriptive medications taken on a regular basis) _____

5. **LAST SCHOOL ATTENDED:** _____ **PERMISSION FOR EMERGENCY CARE** YES NO

6. **ALLERGIES:** NO YES – if yes, please list specific allergies below. Use the back of the form as needed.

MEDICATION(S) _____
What happens if your child takes this? _____
How do you treat? _____

BEES, INSECTS, SPIDERS, etc. _____
What happens if your child is stung or bitten? _____
How do you treat? _____

FOOD and/or DRINK* _____
What happens if your child eats this? _____
How do you treat? _____ *School Lunch substitutions require a doctor's request.

ANIMALS _____
What happens if your child comes in contact with this animal? _____
How do you treat? _____

OTHER (please list) _____
What happens if your child comes in contact with this? _____
How do you treat? _____

7. **CURRENT MEDICAL INFORMATION:** Mark any ongoing conditions and concerns.

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> asthma* | <input type="checkbox"/> frequent headaches | <input type="checkbox"/> vision concerns | <input type="checkbox"/> knee, back, bone or joint concerns |
| <input type="checkbox"/> other respiratory concerns | <input type="checkbox"/> frequent nosebleeds | <input type="checkbox"/> wears glasses/contacts | <input type="checkbox"/> muscular concerns |
| <input type="checkbox"/> diabetes | <input type="checkbox"/> frequent stomachaches | <input type="checkbox"/> dental pain or concerns | <input type="checkbox"/> mental/emotional concerns |
| <input type="checkbox"/> heart disease | <input type="checkbox"/> frequently complains of being sick | <input type="checkbox"/> speech concerns | <input type="checkbox"/> skin concerns |
| <input type="checkbox"/> seizures | <input type="checkbox"/> ear/hearing concerns | <input type="checkbox"/> urinary/bowel concerns | <input type="checkbox"/> other _____ |
| <input type="checkbox"/> previous head injury with unconsciousness* | <input type="checkbox"/> tubes in place | | |
- *additional forms may be requested
For **COMMENTS** use the form back.

CURRENT SPECIFIC MEDICAL DIAGNOSIS: NO YES

Diagnosis _____ Doctor _____ Clinic Name/Location _____
Date Identified _____ Care/treatment required at school _____

CURRENT PHYSICAL ACTIVITY LIMITATIONS _____

8. **PAST MEDICAL INFORMATION: Operations, injuries, hospitalizations, and past medical concerns, including birth information and history of developmental delays as appropriate (please include dates):** _____

9. **ADDITIONAL INFORMATION:** Please add any additional information helpful to the school staff (i.e., family, learning, special needs)

My signature allows for information that pertains to school safety or helps my child in the classroom to be shared with additional school staff as appropriate.

PERSON COMPLETING THIS FORM: _____
(Name) (Relation to child) (Today's Date)

**KENAI PENINSULA BOROUGH SCHOOL DISTRICT
MIDDLE SCHOOL ACTIVITIES GUIDELINES**

I. PHILOSOPHY STATEMENT

The KPBSD believes co-curricular activities are an integral part of the educational program. We believe each student should have an equal opportunity to participate in a broad number of activities based on her/his own talents and interests. It is the intent of the District to encourage participation in activities.

The following regulations governing activities in the District strive to treat all participants in like programs in a fair and equal manner without personal bias.

Participation in activities is understood to be a privilege and not an inherent right of the student. Signing of *the Co-curricular Participation Consent Form* indicates knowledge of and willingness to abide by the established rules and regulations of the KPBSD.

II. KPSAA AUTHORITY

The KPBSD activities guidelines and other KPBSD pertinent policies govern all co-curricular activities. For purposes of clarification, co-curricular activities are divided into (1) athletic-related co-curricular activities and (2) non-athletic co-curricular activities. All policies contained in this document and KPBSD policies apply to participants in **athletic-related activities** during the sport season in which students participate. All policies contained in this document and KPBSD policies apply to participants in **non-athletic-related activities** representing the KPBSD at school-sponsored, on- and off-campus events.

III. ENFORCEMENT OF GUIDELINE POLICIES/APPEALS

A. Student Infractions/KPSAA Policy Appeals Process

1. **Level I** Principal
2. **Level II** KPSAA Executive Secretary
3. **Level III** KPSAA Board
4. **Level IV** KPBSD Board of Education

IV. STUDENT ELIGIBILITY

A. Parent/Student Responsibilities for Participation

1. **Physician's clearance.** A yearly physician's clearance for sport activities is recommended and should be kept on file with the coach and the athletic director or principal.
2. **Permission/ Hold Harmless form.** A permission/hold harmless form signed by a parent/legal guardian must be on file with the coach and the athletic director or principal.
3. **User fee.** A user fee payment must be received prior to the first contest or a waiver request must be on file with the athletic director or principal.
4. **Records.** **All records must be in order and all forms must be on file before the student is eligible to begin practice in any program.**

B. Student Requirements for Participation in Interscholastic Activities

1. **Enrollment.**
 - a. **Interscholastic Program:** In order to participate in a school-sponsored activity (including practice), a student must meet one of the following criteria:
 - 1) Be properly registered and enrolled in at least four (4) semester classes, or their equivalent, within the school district.
 - 2) A student attending a KPBSD approved correspondence or charter program that has not been granted separate-school status (greater than 150 students at a designated site) must declare a school within the district as their school of eligibility prior to participating in a school-sponsored activity (including practice).

3) Students attending a KPBSD approved correspondence or charter program that has been granted separate-school status may only participate in non-team related activities (i.e. – cross country running, track, skiing and wrestling) at their declared school of eligibility within the district on a space-available basis as determined by the school administrator an/or site council.

b. Establishing Eligibility: For transfer purposes, a student establishes eligibility at a school by enrolling in and attending that school for fifteen (15) school days or by participating in an interscholastic activity.

c. Extension of Classroom Competitions:

1) Students desiring to participate in classroom extensions (band, drama, etc.) must be enrolled and passing in that class at that school.

2) The student is not required to be enrolled in four (4) district classes.

c. Intramural Activities: Students enrolled in less than four (4) classes or non-enrolled students may participate in intramural activities on a space available basis determined by the building administrator and/or the site-based council.

2. **Attendance.** In order to participate in a school-sponsored activity (including practice), **students must attend all classes on the day of the school activity or on the last regular day of the week for weekend activities** unless otherwise excused by the school.

3. **School grade.** Only students in the seventh and eighth grades may participate. Schools that do not have enough 7th and 8th grade students to field a team may petition the KPSAA Executive Secretary for a waiver to allow their 6th grade students to fully participate for team activities only, (i.e. – basketball, volleyball and soccer).

4. **Age.** A student who is 15 years of age or younger may participate.

5. **Practice.** Athletic participants must have eight (8) separate days of practice to be eligible to compete in a contest.

6. **Borough Tournaments:** Only students enrolled in the public schools of the KPBSD may participate in the Borough team sports tournaments. This includes students enrolled in the Connections Program. A non-KPBSD school on the Kenai Peninsula, having membership in ASAA at the high school level, may participate in middle school level borough tournaments in a non-team sports program, given the school has registered to do so prior to the season, has participated during the season in accordance with KPSAA Middle School Handbook Guidelines, and the school is willing to accept an equal share of tournament expenses.

C. Student Scholastic Eligibility for Participation

1. Academic progress

a. Eligibility is based on passing cumulative quarter grades.

b. Academic standing will be checked weekly.

1) Ineligibility begins the Monday following grade check.

2) Students are ineligible from the Monday following the grade check to the next Monday (one calendar week).

3) Students who have been ineligible more than once may be removed from the team. If invoked, this rule is to be applied consistently.

2. **Personal conduct.** Classroom conduct may affect eligibility. Any misconduct affecting eligibility must be recorded in the principal's office.

V. PARTICIPATION GUIDELINES FOR ACTIVITIES

A. Tobacco, alcohol and controlled substances policy. In order to ensure consistency of tobacco, alcohol and controlled substances use policies by the member schools of the Kenai Peninsula School Activities Association, and in cooperation with the Alaska School Activities Association, the following policy is adopted:

1. **Prohibited Conduct:** The possession, distribution or use of any tobacco products, alcohol, and controlled substances by a student-athlete or activity participant, whether it occurs on or off school property, is prohibited and shall result in the penalties set forth herein. Additionally, being in the same vehicle, house, location, party, proximity, etc. where alcohol/drugs are known to be in illegal possession by minors or willingly remaining in a location or *proximity where alcohol/drugs are being illegally consumed will result in the same penalties set forth herein.
2. **Time Period During Which Policy Applies:** The policy in this section applies to any student who is participating or has participated in interscholastic activities starting from the student's first participation in interscholastic activities, including formal practices which precede interscholastic competition
3. **Educational Component:** The educational component is a critical part of the policy and is comprised of an online class on drug/alcohol/tobacco use provided by KPBSD.
4. **Cumulative and Progressive Penalties:** Violations of this policy will be cumulative and progressive, as described in the following paragraph, throughout a student's middle school years. If a student transfers from one KPSAA member school to another KPSAA member school, the student's cumulative violations will accompany such transfer and shall be the basis for any additional penalties should further violations occur.
5. **Penalties for Violation of this Policy:**

First Offense: The student will be suspended from interscholastic activities and practice for ten (10) calendar days. Fifty (50) percent of the suspension will be forgiven and the student may return to practice if the student and parent/guardian complete the online class on drug/alcohol/tobacco use provided by KPBSD.

Second and Subsequent Offenses: The student will be suspended from interscholastic activities and practice for forty-five (45) calendar days. Both the student and parent/guardian must complete the chemical assessment component (see below) prior to the student's return to practice or competition and there will be no forgiveness of calendar days of suspension.

**Proximity is defined as being in the same vehicle, house, location, party, etc. where you know alcohol/drugs are in illegal possession by minors or you willingly remain in a location where you are aware alcohol/drugs are being illegally consumed.*

6. **Chemical assessment.** If a student is dismissed from participation or practice because of alcohol or drug infraction, s/he must have a chemical assessment and/or possible counseling and complete the recommendations from the assessment (Appendix J/Chemical Use Assessment Form) before s/he can participate in another activity. With administrative approval and upon completion of appropriate assessment and counseling, the student/athlete will become eligible to participate in practice for the last ten (10) days of their forty-five (45) day suspension.
7. **Conduct.** Suspension from activity for a period of time up to thirty consecutive school days or the remainder of the activity season to be determined by the coach/principal shall result from:
 - a. Fighting
 - b. Vandalism
 - c. Theft and/or possession of known stolen property
 - d. Other disciplinary situations which may arise

8. **Other** misconduct occurring while on school grounds or while engaged in school-sponsored activities will be subject to penalties according to School Board Policies.

B. Dismissal Rules

1. **Discipline.** Any student who is cut from a sport/activity for disciplinary reasons will not be eligible to practice or play another sport/activity during the season of that sport/activity.
2. **Voluntary quit.** A student who voluntarily quits a sport/activity season will not be eligible to practice or play in another sport/activity during the season of that sport/activity without administrative approval.

C. Uniforms/Equipment Rules

1. **Student responsibility.** Uniforms/equipment issued to a student are her/his responsibility for return or replacement.
2. **Penalty.** If the uniforms/equipment are not returned, replaced, or paid for, the letter/award shall not be awarded nor any additional equipment be issued to the participant for any activity.

D. Participation Fees

1. A fee of **\$60** per activity shall be charged for soccer, cross-country running, Nordic skiing, basketball (boys and girls), volleyball, wrestling and track and field.
2. Students who are unable to pay all or part of the fee must complete the waiver request form, which is then filed in the school's office.

E. Additional Coach/Sponsor Rules

1. **Additional rules.** With administrative approval, coaches may establish additional training rules that are not in conflict with existing KPSAA guidelines or Board of Education policy, e.g., schedules, curfews, etc. for each sport.
2. **Rules on file.** All rules will be on file with the building administrator prior to the season start.

VI. GENERAL ACTIVITIES POLICIES FOR THE KPBSD

A. Travel Limitations. Vehicles: Students traveling to or from all District-sponsored practices or contests not held at your home site must do so in school provided vehicles, unless specifically released in writing by their parent or legal guardian and approved by the building administrator to travel by some other method. "Home site" is defined as the location where your school is hosting an event or where all schools share a site. (e.g., Soldotna Sports Center).

B. Sport Season Practice Rules

1. **Season starting date:** Practice for a sport may not begin before the day listed by the KPBSD as the season's starting date.
3. **Borough tournament:** There will be no practice sessions during the school year after the Borough tournament.

C. Awards

1. **Written guidelines:** These guidelines for earning awards will be given to participants during the first week of practice.
2. **Filing of guidelines:** These guidelines will be on file in the principal's office.

D. Cheerleaders and Pep Clubs

1. **Cheerleaders:** There shall be no cheerleaders or related groups at the middle school level.
2. **Travel:** Pep clubs are not permitted to travel during school time or to use school funds.

E. Required Participation: All suited players must participate in each contest (excluding Borough tournaments).

F. Team Selection

1. **Cut Policy:** The KPBSD allows for a cut policy in all middle school sport areas. Criteria for selecting the team are determined by the coach of each sport. However, with the addition of “B” Teams KPSAA is placing a priority on the involvement of all students who wish to participate. Cuts should be made only when circumstances warrant.
2. **Criteria:** These criteria should be well defined for aspiring athletes at the beginning of each season.

G. Participation Limitations

Note: Only “A” level squads would participate in the Borough Tournaments.

1. Basketball

- a. No basketball player shall participate in more than four quarters per day (excluding tournaments and tri-matches).
- b. No basketball player may participate in more than fourteen basketball games during the season (excluding the Borough tournament).
- c. Small schools include Ninilchik, Nikolaevsk, Cook Inlet Academy, Chapman, Aurora Borealis, and Susan B English.

2. Volleyball

- a. No volleyball player shall participate in more than 3 games per day (excluding tournaments and tri-matches).
- b. Teams must consist of all girls.
- c. Small schools (Ninilchik, Nikolaevsk, Cook Inlet Academy, Chapman, Susan B English) may field a co-ed volleyball team with approval of the building principal.

3. Wrestling

- a. No wrestler shall participate in more than eighteen individual matches per season (excluding the Borough tournament and forfeits).

4. Soccer

- a. No soccer player may participate in more than 2 halves of soccer on the same day.
- b. No soccer player may participate in more than eight soccer games during the season (excluding the Borough tournament).
- c. Teams must consist of all boys or all girls.

5. Cross Country Running

- a. To be eligible for Borough Tournament Competition in more than one sport, an athlete must participate in at least 50% of the scheduled contests for those activities.

H. Manager Limitations: Managers of team sports shall be of the same sex as the team participants (excluding coed sports).

VII. CONCLUDING STATEMENT

Activity guidelines will be reviewed and revised annually. Recommendations for inclusions or revisions are to be submitted to the KPSAA Executive Secretary prior to the annual spring general meeting of the Kenai Peninsula School Activities Association.

Concussion Information

(BP/AR 6145.22)

As medical management of sports-related concussion continues to evolve. Recently, there has been a significant amount of new research regarding sports-related concussions in high school athletes.

The Kenai Peninsula School District (KPBSD) seeks to provide a safe return to activity for all athletes following any injury, but particularly after a concussion/head injury. In order to effectively and consistently manage these injuries, procedures have been developed to aid in insuring that concussed athletes:

- are identified, treated and referred appropriately,
- receive appropriate follow-up medical care during the school day (including academic accommodations), and
- are fully recovered prior to returning to activity.

According to Alaska state law, **any student suspected of having a concussion must be immediately removed from play.** The student must be evaluated by a health-care provider who is qualified in the diagnosis and treatment of concussion before he/she can return to play. This return-to-play (RTP) form has been developed in an effort to create a standard protocol among KPBSD schools defining the step-by-step process by which students suspected of having a head injury may progressively return to full school participation, inclusive of both cognitive and athletic activities.

ASAA Parent’s Guide to Concussions in Sports (Revised 04/14)

What is a concussion?

- A concussion is a brain injury which results in a temporary disruption of normal brain function. The injury occurs when the brain is violently rocked back and forth or twisted inside the skull as a result of a direct or indirect force. An athlete does not have to lose consciousness (“knocked-out”) to suffer a concussion. In fact only 3-10% of concussions do produce loss of consciousness.

Concussion Facts

- It is estimated that over 250,000 high school athletes across the United States suffer a concussion each year. (Data from NFHS Injury Surveillance System, 2010-2011). The CDC estimates 5.5 million sports concussions occur annually in the United States (CDC, 2011)
- Concussions occur most frequently in hockey and football, but girls’ soccer, boys’ soccer, and girls’ basketball follow closely behind. All athletes are at risk.
- A concussion is a traumatic injury to the brain.
- Concussion symptoms may last from a few days to many months.
- Concussions can cause symptoms which interfere with school, work, and social life.
- An athlete should not return to sports when still having symptoms from a concussion as they are at risk for prolonging symptoms and at risk for sustaining additional, more serious, brain injury.
- A concussion may cause multiple symptoms. Many symptoms appear immediately after the injury, while others may develop over the next several days or weeks. The symptoms may be subtle and are often difficult to recognize.

What are the signs and symptoms of a concussion?

SIGNS OBSERVED BY PARENTS, FRIENDS, TEACHERS OR COACHES	SYMPTOMS REPORTED BY ATHLETE
Appears dazed or stunned	Headache
Is confused about what to do	Nausea
Forgets plays	Balance problems or dizziness
Is unsure of game, score, or opponent	Double or fuzzy vision
Moves clumsily	Sensitivity to light or noise
Answers questions slowly	Feeling sluggish

Loses consciousness

Shows behavior or personality changes

Can't recall events prior to hit

Can't recall events after hit

Feeling foggy or groggy

Concentration or memory problems

Confusion

What should I do if I think my child has had a concussion?

If an athlete is suspected of having a concussion, he or she must be immediately removed from play, be it a game or practice. Alaska Statute requires that (1) a student who is suspected of having sustained a concussion during a practice or game shall be immediately removed from the practice or game and (2) a student who has been removed from participation in a practice or game for a suspicion of a concussion may not return to participation in practice or game play until the student has been evaluated and cleared for participation in writing by an athletic trainer or other qualified person who has received training, as verified in writing or electronically by the qualified person, in the evaluation and management of concussions.

Continuing to participate in physical activity after a concussion can lead to worsening concussion symptoms, increased risk for further injury, and even death. Parents, coaches, and officials are not expected to be able to “diagnose” a concussion, as that is the job of a medical professional. However, you must be aware of the signs and symptoms of a concussion. And, if you suspect a concussion, then your child must stop playing:

When in doubt, sit them out!

All athletes who sustain a concussion need to be evaluated by a health care professional who is familiar with sports concussions. You should call your child's physician and explain what has happened and follow your physician's instructions. If your child is vomiting, has a severe headache, is having difficulty staying awake or answering simple questions he or she should be taken to the emergency department.

When can an athlete return to play following a concussion?

After it is determined that an athlete has suffered a concussion, the athlete may not return to play or participate until the athlete has completed the ASAA Return to Play Protocol. Previously, athletes were allowed to return to play if their symptoms resolved within 15 minutes of the injury. Studies have shown us that the young brain does not recover quickly enough for an athlete to return to activity safely in such a short time.

Concerns over athletes returning to play too quickly have led state lawmakers, in Alaska and most other states, to pass laws stating **that no player shall return to play following a suspicion of concussion on that same day and the athlete must be cleared by an appropriate health care professional before they are allowed to return to play in practices or games.** The laws also mandate that coaches receive education on recognizing the signs and symptoms of concussion.

Where an athlete is evaluated as having suffered a concussion, only when an athlete has been completely free of concussion symptoms for 24 hours, are they eligible to be cleared to begin the Return to Play Protocol. The athlete should proceed with activity in a step-wise fashion to allow the brain to re-adjust to exertion. There is a minimum of 24 hours between steps in the Protocol. Some athletes complete one step each day. An individual athlete may be guided through the Protocol more slowly if they are at risk for prolonged concussion or additional brain injury. If symptoms recur during exercise, then exercise is ended and begins the next day at the preceding day's level.

Concussion Return to Play Protocol (ASAA, 2/18/2012)

- **Symptomatic Stage:**
- Physical and Cognitive Rest.
- Then Incremental Cognitive Work, without Provoking Symptoms.
- **If no symptoms, then:**
- **Day 1:**
- Begin when symptom free for 24 hours.
- 15 min **light aerobic** activity (walk, swim, stationary bike, no resistance training).
- **If no symptoms, then:**
- **Day 2:**
- 30 min **light-mod aerobic** activity (jog, more intense walk, swim, stationary bike, no resistance training).
- **Start PE Class** at previous day's activity level.
- As RTP Protocol activity level increases, PE activity level remains one day behind.

- **If no symptoms, then:**
- **Day 3:**
- 30 min **mod-heavy aerobic** activity (run, swim, cycle, skate, Nordic ski, no resistance training).
- **If no symptoms, then:**
- **Day 4:**
- 30 min **heavy aerobic** (hard run, swim, cycle, skate, Nordic ski).
- 15 min **Resistance Training** (push-up, sit-up, weightlifting)
- **If no symptoms, then:**
- **Day 5:**
- **Return to Practice, Non-contact Limited Participation** (Routine sport specific drills).
- **If no symptoms, then:**
- **Day 6:**
- **Return to Full-Contact Practice**
- **If no symptoms, then:**
- **Day 7:**
- **Medically Eligible for Competition when completes RTP Protocol and is cleared by Healthcare Professional**
- **ASAA Eligibility Criteria** must be met before return to competition.

If symptoms recur at any step, the athlete should cease activity and be reevaluated by their health care provider.

How can a concussion affect schoolwork?

Following a concussion, many athletes have difficulty with cognitive work: thinking, focusing attention, calculating, attending school, doing homework, taking tests. These problems may last from days to months and often involve difficulties with short and long-term memory, concentration, and organization.

Following concussion, athletes should begin with a period of rest, in which they avoid cognitive work. As concussion symptoms diminish and the athlete feels able, he/she can begin trials of cognitive work, e.g. reading, texting, computer, TV, videos, school. The introduction of cognitive work should be in short increments which increase progressively in length, so long as symptoms do not recur or worsen with the work. For example, start with 30 minutes of computer time, and, if symptoms do not worsen, try one hour later in the day. If several hours of cognitive work are well tolerated at home, try attending a half day of school. When a full day of school is tolerated add homework.

Academic accommodations may be necessary for students attempting to attend school when they still have concussion symptoms. In many cases it is best to lessen the athlete's class load early on after the injury. This may include staying home from school for a few days, followed by a lightened schedule for a few days, or perhaps a longer period of time, if needed. Decreasing the stress on the brain early on after a concussion may lessen symptoms and shorten the recovery time. If cognitive work at any time provokes or exacerbates symptoms, then the work should be discontinued and there should be cognitive rest until the symptoms subside. The student can attempt to advance cognitive work again on the day following resolution of the increased symptoms.

What can I do?

- Learn to recognize the "Signs and Symptoms" of concussion as listed above.
- Emphasize to administrators, coaches, and other parents your concerns and expectations about concussion and safe play.
- Teach your athlete to tell the coaching staff if the athlete suspects that they or a teammate has a concussion.
- Monitor sports equipment for safety, fit, and maintenance.
- Ask teachers to monitor any decrease in grades or changes in behavior that could indicate concussion.
- Report concussions that occurred during the school year or over the summer to appropriate school staff. This will help in monitoring and protecting injured athletes as they move to the next season's sports.

Why is it so important that an athlete not return to play until they have completely recovered from a concussion?

Athletes who are not fully recovered from an initial concussion are significantly vulnerable for recurrent, cumulative, and even catastrophic consequences of a second concussive injury. The risk of such difficulties is diminished if the athlete is allowed time to recover from the concussion and return to play decisions are carefully made. No athlete should return-to-sport or other physical activity when symptoms of concussion are present.

Is a “CAT scan” or MRI needed to diagnose a concussion?

Diagnostic imaging tests, which include CT (“CAT”) and MRI scans, are rarely needed following a concussion. While these are helpful in identifying life-threatening brain injuries (e.g. skull fracture, bleeding, swelling), the tests are typically normal, even in athletes who have sustained a severe concussion. A concussion is diagnosed based upon the athlete’s story of the injury and a physical examination.

What is the best treatment to help my child recover more quickly from a concussion?

The best treatment for a concussion is rest. There are no medications that can speed the recovery from a concussion. Exposure to loud noises, bright lights, computers, video games, television and phones (including text messaging) all may worsen the symptoms of a concussion. You should allow your child to rest as much as possible in the days following a concussion. As the symptoms lessen, you can allow increased access to computers, video games, etc., but the access must be lessened if symptoms worsen.

How long do the symptoms of a concussion usually last?

The symptoms of a concussion will usually go away within two weeks of the initial injury. However, in some cases, symptoms may last for several weeks, or even months. Symptoms such as headache, memory problems, poor concentration, and mood changes can interfere with school, work, and social interactions. The potential for such long-term symptoms and disability underscores the need for careful management of all concussions.

How many concussions can an athlete have before he or she should stop playing sports?

There is no “magic number” of concussions that determine when an athlete should give up playing contact or collision sports. The circumstances surrounding each individual injury, such as mechanism of injury and length of symptoms following the concussion, are very important and must be considered when assessing an athlete’s risk for further and potentially more serious concussions. The decision to “retire” from sports can only be reached following a thorough review of the athlete’s concussion history, coupled with a thorough and frank discussion between you, your doctor, and your child.

I’ve read recently that concussions may cause long-term brain damage in professional athletes. Is this a risk for high school athletes who have had a concussion?

The issue of “chronic encephalopathy” in some former NFL and NHL players has received much media attention. Very little is known about what may be causing dramatic abnormalities in their brains. These players had long professional careers after playing in high school and college. In

most cases, they played more than 20 years and suffered multiple concussions in addition to thousands of other blows to their heads. Alcohol, steroid, and other drug use may also have contributed to the brain changes. The average high school athlete does not accumulate nearly the number of potentially injurious blows to the brain as a professional player. But we know that the teenage brain is much more vulnerable to injury and to more severe injury than the older brain. And the fact that we know very little about the long-term effects of concussions in young athletes is further reason to very carefully manage each and every concussion.

What will happen when my child completes the Return To Play Protocol?

When the Return to Play Protocol has been successfully completed, the athlete will be examined by the responsible healthcare provider. Additional tests may be appropriate. The provider will sign a medical clearance to resume competition. The Return To Play Protocol together with medical examination is the internationally recognized process by which concussed athletes are returned to athletic participation as safely as possible. Completing the Return to Play Protocol and medical examination does not mean that the brain has fully recovered from concussion or that there is not risk in returning to competition. But it is the safest way that physicians know at this time. Participation in athletics is accompanied by risk of injury, permanent disability, and death. Having recently sustained a concussion, an athlete is at increased risk for another head injury. Once the athlete is medically eligible to return to competition, the parent and athlete will be asked to sign consent, accepting the risk in returning to play.

Some of this information has been adapted from the CDC's "Heads Up: Concussion in High School Sports," from materials by the OSAA's Medical Aspects of Sports Committee and from materials prepared by the NFHS Sports Medicine Advisory Committee. Please go to www.cdc.gov/ncipc/tbi/Coaches_Tool_Kit.htm or www.nfhs.org for more information.

If you have any further questions regarding the policies and procedures for managing concussions in Alaska student athletes or want to know how to find a concussion specialist in Alaska, please visit the Alaska School Activities Association website, asaa.org, and your school district website.

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Adopted 4/15

The Kenai Peninsula Borough School District requires that each athlete, and each athlete's parent/guardian, receive a copy of its guide entitled "A Parent's Guide to Concussion in Sports". This guide sets forth a description of the nature and risks of Concussion.

Parents and athlete should review the Guide, discuss it at home, and direct any questions to the coach, school nurse, or activities principal.

Parents and athletes need to annually acknowledge receipt of "A Parent's Guide to Concussion in Sports", and understand its contents.

Student/Parent/Guardian Acknowledgement (required for all athletes)

I acknowledge that I have received a copy of "A Parent's Guide to Concussion in Sports", and understand its contents.

Student Signature

Print Name

Date of Birth

Date

Parent/Guardian signature is required for all athletes under 18 years of age. If 18 or older, the athlete must sign below consent.

Parent/Guardian Signature

Print Name

Date