

Runnels Junior High (6-8th Grade) Athletic Packet Checklist

Student-Athlete's Name: _____

- _____ 1. Complete the online Athletic Permission/Travel/Aftercare form
(Sports fees will be billed by Smart Tuition as noted on form)

- _____ 2. LHSAA Medical Forms
Please make sure to use the most recent LHSAA form which is on the school's website. All other forms needed by the school nurse and athletic trainer must also be on file with the school (emergency information, medication administration forms, etc).

- _____ 3. Runnels Concussion Notice
(signed by parent and athlete)

Return completed paper to the High School Office.

Eligibility Meetings (students only):

These meetings are scheduled at least one week prior to the start of each sports season, and your child must attend a meeting for each team he or she wishes to join. During the meeting the coach will meet with players, get uniform sizes, and verify that your child's paperwork is complete and fees are turned in. The meeting times/days are announced at school and are held during the lunch/activity period. If you have any additional questions, please contact the 6th – 8th Grade Athletic Director, Marcella Babcock, at m.babcock@runnels.org or in the athletic office at (225) 756-8728.

Athlete and Parent Notification: The Nature and Risk of Concussion and Head Injury

ACT 314 of the 2011 Louisiana legislative session requires all athletes and their parents/legal guardians to receive documented education on concussion and head injury prior to participation in athletic activities. The law applies to all private and public organized youth athletic activities where participants are between the ages of 7 – 19, and includes all elementary, middle, junior, and senior high schools.

What is a Concussion?

A concussion is a traumatic brain injury. It can be caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. The traumatic brain injuries can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, **all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly.** In other words, even a “ding” or a bump on the head can be serious. You can’t see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports **any one** of the signs or symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, remove your child from activity and seek medical attention right away.

Symptoms experienced by the athlete may include one or more of the following:

Headaches, “pressure in head,” nausea or vomiting, neck pain, balance problems or dizziness, blurred, double, or fuzzy vision, sensitivity to light or noise, feeling sluggish or slowed down, feeling foggy or groggy, drowsiness, change in sleep patterns, amnesia, “doesn’t feel right,” fatigue or low energy, sadness, nervousness or anxiety, irritability, more emotional, confusion, concentration or memory problems (forgetting game plays), repeating the same question/comment

Signs observed by teammates, parents and coaches include one or more of the following: appears dazed, vacant facial expression, confused about assignment, forgets plays, is unsure of game, score, or opponent, moves clumsily or displays lack of coordination, answers questions slowly, slurred speech, shows behavior or personality changes, can’t recall events prior to hit, can’t recall events after hit, seizures or convulsions, any change in typical behavior or personality, loses consciousness

RED FLAGS: Call your doctor or take your child to the emergency department if any of the following signs or symptoms develop after a suspected concussion or head injury:

headaches that worsen, seizures, neck pain, looking very drowsy and cannot be awakened, repeated vomiting, slurred speech, cannot recognize people or places, increasing confusion, weakness or numbness in arms or legs, unusual behavior or changes, increasing irritability, loss of consciousness

What should happen if an athlete appears to have sustained a concussion?

1. The child should be removed from activity immediately.
2. Seek medical attention for the child right away.
3. Do not allow the student to return to play until proper medical clearance and return to play guidelines have been followed.

Physical rest is part of the recovery from a concussion.

Limit your child’s physical activity by not allowing any participation in physical exertion while recovering from a concussion. Adequate rest, including getting plenty of sleep, is important. Daytime rest breaks or naps may be needed. Good nutrition and hydration are also helpful to the healing process.

Cognitive rest is part of the recovery from a concussion. Activities that require a lot of thinking or concentration can make a concussion worse. Cognitive rest means the child should refrain from all activities that involve mental exertion, such as working on a computer, watching television, using a cell phone, reading, playing video games, text messaging, and listening to loud music. Any of these activities may exacerbate symptoms and could delay recovery.

What about classwork after my child has received a concussion?

A student athlete who has sustained a concussion may look “normal,” but by definition the brain may not be working properly. The child, quite simply, is not “faking it.” A concussion may result in impaired attention, difficulties with concentrating for prolonged periods of time and memory problems. If prolonged classroom exposure causes a student’s condition to worsen (i.e., increased headache, increased fatigue, decreased ability to concentrate, sensitivity to noise or

light), then we will work with you and your child’s physician to modify their academic environment and expectations until the concussion is resolved. Often students want to quickly take the hardest tests or get the most difficult work “out of the way,” but that approach can actually worsen symptoms and prolong recovery. If the child is allowed to attend school, participation in physical education will not be allowed until written clearance and the graduated return to activity is complete.

What can happen if my child returns to activity too soon (before a concussion is fully healed)?

There is a condition known as “second impact syndrome” that occurs when a second concussion is received before the first concussion is fully healed. The result of second impact syndrome can be immediate and irreversible catastrophic brain swelling or death. It is also important to know that repeated mild brain injuries occurring over an extended period of time (months or years), even when the brain is fully healed between events, can result in cumulative neurologic and cognitive deficits. Always keep your health care providers informed of your child’s concussion history.

What is required for my child to be allowed to return to sports following a concussion or head injury?

By law a youth athlete who has been removed from play for concussion must receive written clearance for return to play. We require that this clearance be received from a physician that has that has received training in neuropsychology or concussion evaluation and management. Additionally, high school athletes participating in LHSAA sports should note that there is a specific form the LHSAA requires for concussion clearance.

Why should my child participate in a gradual return to play plan?

Activity levels that progress too quickly might cause concussion symptoms to return. After written clearance is received from the physician, the school may require athletes to complete a graduated progression under the supervision of a certified athletic trainer that includes:

- Day 1. rest until asymptomatic (physical and mental rest)
- Day 2. light aerobic exercise (example: stationary cycle or walking laps for 30 minutes)
- Day 3. sport-specific exercises at moderate effort for less than 1 hour (example: moderate jog, moderate footwork drills, shooting drills)
- Day 4. non-contact training drills at full effort for less than 1 ½ hours (example: sprinting/running, full speed drills in non-contact situation, light resistance training)
- Day 5. full contact training after medical clearance (this must be a practice situation and not competition)
- Day 6. return to competition (game play) Note: each “Day” is 24 hours (no accelerated days).

Careful attention to symptoms, thinking, and concentration is needed at each stage of activity. If any concussion signs or symptoms do recur, the activity will be stopped and the athlete returned to level one to restart the progression.

If any of the foregoing is not completely understood and you have questions, please contact the school administrator or athletic directors for further information.

We have read and understand the information above and I give permission for my son/daughter,

_____ **to participate in athletics at Runnels School.**

Parent/Guardian Signature

Date

Print Name

Athlete’s Signature

Date

Print Name