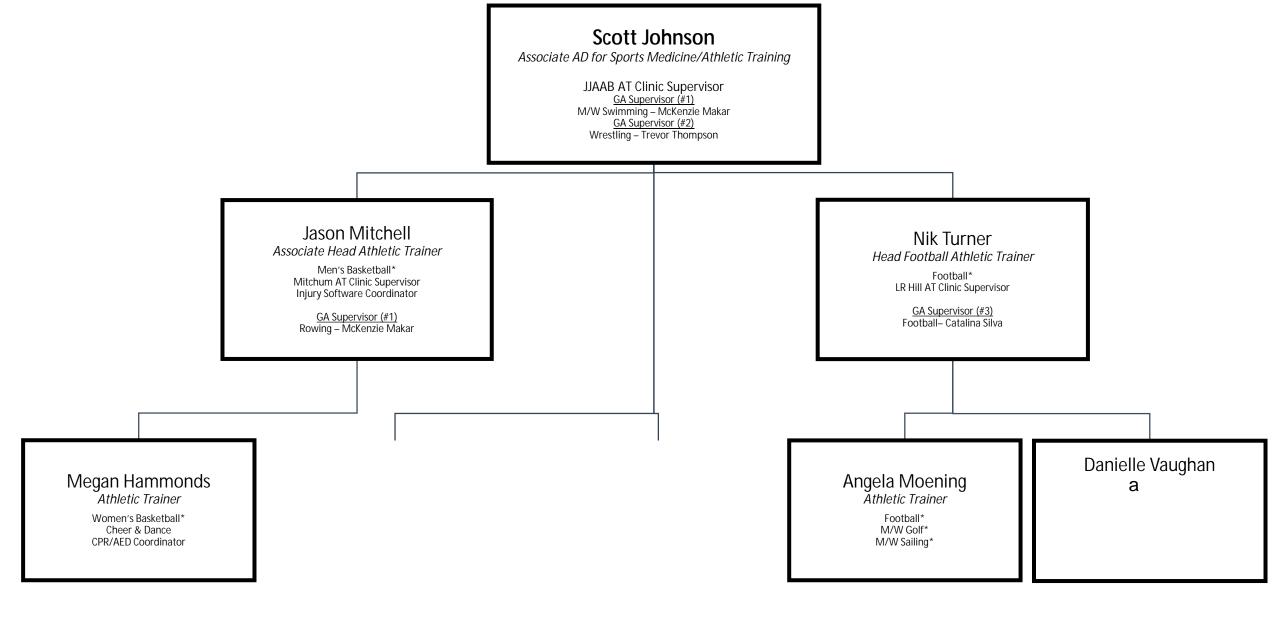
- TO: Athletics Committee Members Kay A. Kemper, Chair Yvonne T. Allmond, Vice Chair Carlton F. Bennett Lisa B. Smith R. Bruce Bradley Alton J. Harris Larry R. Hill
- FROM: Dr. Wood Selig Director of Athletics
- DATE: November 26, 2018
- SUBJECT: December 6, 2018 -

The Old Dominion University Athletic Training Staff, in conjunction with the Athletics Department and the University, strives to provide comprehensive, stateof-the-art, quality healthcare services for the well-being of the student-athletes. Each member of the Old Dominion University Athletic Training Staff will do his or her part to provide professional leadership, counseling and education necessary to prevent, manage, rehabilitate and return the student-athlete to athletic activity as quickly, but as safely as possible. The Old Dominion University Athletic Training



Old Dominion University Extreme Weather Temperature Policy

<u>Heat Policy:</u>

NC44

HAT STUDENT-ATHLETES

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NEED TO KNOW

	You may notice that a teammate			
	o			
Speak up.	2 Encourage teammates to be safe.			
	•			

What happens if I get a concussion and keep practicing or competing?

- Due to brain vulnerability after a concussion, an athlete may be more likely to suffer another concussion while symptomatic from the first one
- In rare cases, repeat head trauma can result in brain

What do I need to know about repetitive

head impacts?

 Repetitive head impacts mean that an individual has been exposed to repeated impact forces to the head.
 These forces may or may not meet the threshold of a concussion.

What are the long-term effects of a concussion?

Did you know?

ncaa.org/concussion.

CONCUSS ON TIMELIN

Baseline Testing

Balance, cognitive and neurological tests that help medical staff manage and diagnose a

Concussion

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If you show signs of a concussion, NCAA rules require that you be removed from play and medically evaluated.

Recovery

Your school has a concussion management plan, and team physicians and athletic trainers are required to

Return to Learn

Return to school should be done in a step-by-step progression in which adjustments are made as

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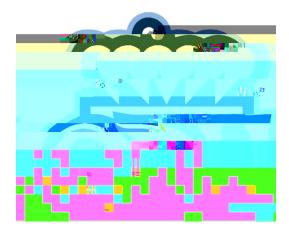
Return to Play

Return to play only happens after you have returned to your preconcussion baseline and

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RETURN TO LEARN RECOMMENDATIONS FOLLOWING A MILD TRAUMATIC BRAIN INJURY

Please be advised that _______ suffered a concussion (or mild traumatic brain injury) on ______. A concussion is defined as a complex pathophysiologic process affecting brain function. Such injuries are the result of traumatic biomechanical forces to the brain after impact to the head, face, neck, or body. The vast majority of concussions will resolve within 1-2 weeks. However some concussions can take a protracted course towards resolution.

Signs and symptoms of concussion include but are not limited to:

Vomiting	Sensitivity to light	Memory difficulties
Imbalance	Sensitivity to noise	Feeling slowed down or in a fog
Dizziness	Headache	Loss of consciousness
Nervousness	Drowsiness	Difficulty concentrating
Fatigue	Mood changes	Sensitivity to light or sound

Physical and cognitive rest are imperative in the time after a concussion in order to make a recovery to baseline functioning. A student-athlete will likely need accommodations in their classroom activities or may even need to miss class for a few days. Student-athletes should refrain from all classroom and academic activities on the day of injury. When a student-athlete resumes class, please keep in mind that their academic performance may suffer during the recovery period. The student-athlete should be allowed to progress as tolerated. Please allow adequate time to prepare future assignments and test preparation in the short term after the injury. Final authority to make a full return to class is the responsibility of the medical staff and academic advisor.

We would greatly appreciate your cooperation and understanding in assisting the student-athlete make a successful return to learning. Sorry for any inconvenience that this may cause. If you have any questions, do not hesitate to contact the academic advisor and medical staff.

Old Dominion Medical Staff



For:	NCAA member institutions.
Action:	Complete and Upload into the NCAA Program Hub Portal
	as part of the Concussion Safety Protocol Review Process.
Due date:	To be completed not later than May 1.

By signing and dating this form, you certify, on behalf of your institution, that for the 2018-19 academic year:

1. The Concussion M

-Association Consensus: Diagnosis and Management of Sport-Related Concussion Best Practices and also Sso(\$440 g-9.06)3(0 -33(0

Athletics Health Care Administrator

Signature of Athletics Health Care Administrator

Print or type Name

Date

Old Dominion University Athletic Department <u>Traumatic Brain Injury Protocol</u>

- All student-athletes will receive the NCAA Concussion Fact Sheet regarding the signs/symptoms of a traumatic brain injury in their yearly physical examination along with a yearly symptom checklist and must sign the attached Old Dominion University Traumatic Brain Injury Student-Athlete Statement.
 - The medical staff reviews all yearly physical examinations and medical histories done on student-athletes, including

- A student-athlete diagnosed with a traumatic brain injury will be withheld from practice/competition and classroom/study activity for the remainder of that day.
- A student-athlete diagnosed with a traumatic brain injury will be evaluated by a team physician as soon as possible following the incident.
- The student-athlete's classroom/study activity following a traumatic brain injury will be gradually resumed as tolerated as determined and monitored by the ODU Medical Staff

Post-Exertion Assessment Protocol

Return-To-Play Protocol Following Traumatic Brain Injury

- The return-to-play process is dependent upon the student-athlete's individual sport or activity.
- If any previous signs or symptoms of traumatic brain injury return during any phase of the return-to-play process, the student-athlete will be removed from activity and be re-evaluated by the ODU medical staff.
- Generally, the progression will have a 24 hour period in between each step.
- The first step will consist of limited, non-contact sports specific activity.
- The second step will be limited contact sports specific activity.
- The last step will be full, unrestricted sports activity.
- For all student-athletes, a range of "modifying factors" will influence the management and RTP Protocol. Modifiers to consider:

oAge (esp. <18 yo)
oPrior History of Concussion (esp. recent)
o

Return-To-Learn Protocol Following Traumatic Brain Injury

- The return-to-learn process is dependent on the student-athlete's symptoms and ability for cognitive activity following a traumatic brain injury.
- The Return-To-Learn recommendations are provided by the academic adviser to the student-athlete's professors. (See attached document)
- After suffering a traumatic brain injury, the student-athlete will be sent home/dorm for the remainder of that day and will not have any classroom/homework activity.
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Traumatic Brain Injury Instruction Sheet <u>For the Injured Student-Athlete</u>

The student-athlete has suffered a possible traumatic brain injury and this instruction sheet has been sent home with the student-athlete as a guide should any problems arise with the student-athlete. If any of the below listed signs or symptoms arise, please call the attending ODU medical staff immediately. The attending ODU medical staff will provide instruction on the best course of action for the student-athlete.

- Loss of or fluctuating level of consciousness
- Increasing irritability
- Increasing confusion
- Worsening headache
- Seizures
- Slurred speech or inability to speak
- Forceful and/or repeated vomiting
- Pupils becoming unequal size
- Inability to recognize people or places
- Numbness in arms or legs

It is <u>OK</u> to:

- Use acetaminophen (Tylenol) for headaches
- Use ice packs on head and neck as needed for comfort
- Eat a carbohydrate-rich diet
- Go to sleep
- Rest (No physical activity until cleared by medical staff)

Do <u>NOT</u>:

- Drink alcohol
- Drive a car or operate machinery
- Engage in physical activity (exercise, weight lifting, sport participation) until cleared by medical staff
- Engage in mental activity (homework, computer games, TV watching, going to classes) that makes symptoms worse
- Listen to load music

Traumatic brain injuries are common occurrences in sports, but steps can be taken to reduce the risk for student-athletes sustaining such traumatic brain injuries. Coaches and student-athletes should take a "safety first" approach to sport activity:

- Helmets and protective equipment must be properly fitted and routinely inspected by the student-athlete and coaching staff.
- Football and lacrosse should routinely have inspections of helmets, shoulder pads, chin straps buy the student-athletes for any cracks, defects, deformities or missing protective padding with their equipment.
- Student-athletes whose sports require a mouth piece must be required to correctly fit and consistently use this piece of equipment during the course of play.
- Baseball should wear helmets at all times when batting , running the bases and in the on-deck/coaches boxes.
- Swimmers must not dive into shallow water and must follow all safety rules at swimming pools.
- All coaches for contact sports shall teach proper sports techniques including those that involve blocking and tackling methods, and should always reinforce avoidance in leading with the head in contact and taking the head out of contact with other student-athletes.
- It is recommended that limiting the amount of contact exposures in practice will aid in reducing traumatic brain injury events.

Old Dominion University Graded Symptom Checklist

		1	2	3	4	5
2. Dizziness	0	1	2	3	4	5
3. Drowsiness	0	1	2	3	4	5
4. Excessive Sleep	0	1	2	3	4	5
5. Easily Distracted	0	1	2	3	2 87.2	8 478.32 268
			2	3	4	5
9. Headache	0	1	2	3	4	5
10. Overly Emotional	0	1	2	3	4	5