

# WILMINGTON YOUTH HOCKEY

## CONCUSSION POLICY

### Concussion Information

If an incident occurs, the coaches should:

- Remove your skater from the current game and keep him/her out if there is any concern of a possible concussion (the appearance of any concussion-like symptoms after a hit or fall, even if the symptoms seem to clear within minutes).
- Speak with parent and/or guardian at the game if you are available. If parent and/or guardian are not available, the coach will follow-up via phone that same day.
- Give parent and/or guardian a handout (or web link) describing the signs/symptoms of concussion
- Get in touch with the Wilmington Youth Hockey Board of Directors and inform them of the situation within 2 days of the injury

### Concussion Policy

Purpose:

Use of these guidelines is intended to minimize the effects of sports concussion injuries for Wilmington Youth Hockey (WYH) players. A comprehensive approach will be used. This involves education of athletes, coaches, parents, school personnel, and the supervision and management of an injured student during a concussion recovery period. Medical referral and return to participation are included. Although every concussion is different, standardized guidelines for monitoring and management of concussed athletes is desirable to affect the most inclusive intervention, to monitor recovery, reduce complications, and reduce the risk of repeat brain injury of concussed athletes.

Guidelines:

1. All WYH Coaches have been instructed by USA Hockey about concussions in the online age-specific modules. The passing of these modules is mandatory for all coaches and assistant coaches.
  - a. If the coach is not required to complete a module during the current season, they are required to review the USA Hockey online module and confirm review with their level director: <http://www.usahockey.com/page/show/893677-age-module-presentations> .
  - b. We also ask that all coaches review the CDC's online "Heads Up" course on concussions found here: <http://www.cdc.gov/headsup/youthsports/training/index.html>
2. Any participant who suffers a head injury with **loss of consciousness shall be evaluated using EMS for immediate evaluation at a local Hospital Emergency Department**. Suspected concussion injuries may also be evacuated dependent upon sideline evaluation by the player's coach. Any player suspected of sustaining a head injury will be removed from the practice, game or activity for the remainder of the day and will not return to play until they have clearance from a neuropsychologist or medical doctor.

3. Any athlete suspected of having concussion symptoms, either through sideline assessment, by later report from an athlete, coach, or parent will be removed from the ice or activity by a coach or assistant coach. The injured player will remain with the coach or assistant coach until the player's parent or a guardian can take over watching the player. If the player is not with his/her parent the guardian must be instructed not to leave the player alone. An injured player will not be allowed to leave a venue without a responsible adult to supervise him/her. The player's parent or guardian should be contacted as soon as possible after an injury has occurred.
4. ***The Head coach will notify the parents of the injured athlete, the WYH Level Director, & the President of WYH Board of Directors (BOD). WYH BOD will recommend to the parents of the athlete that they contact their primary care physician or a neuropsychologist who specializes in concussion injuries (a referral can be given in this regard if requested) Any information relating to a possible head injury (resulting in a concussion or not) **must** be passed on to the head coach for follow up on the injury.***
5. The injured athlete will be advised to avoid physical exertion, cognitive activity and will not be allowed to participate in any WYH team sports activities involving exertion (other than flexibility) or physical contact while any concussion symptoms persist. There will be a 7 day **symptom-free** period before the athlete can **begin any return to play steps** under the supervision of a coach, or other party designated by the WYH BOD.
6. The head coach or an assistant coach shall fill out the injury report supplied by USA Hockey and be sure the paperwork gets to the BOD within 1 week. A doctor's note clearing the athlete to begin the Return to Play Process may be given to the head coach. A copy of the note must be passed on to the BOD.
7. **No injured athlete may return to regular full-contact activity after a concussion injury without receiving medical clearance from their personal physician or neuropsychologist specializing in head injuries.** This means acquiring a doctor's note. This will only clear the athlete physically. They must still proceed through all the Return to Play steps under supervision of a coach or other party designated by the BOD.
8. The athlete will follow the Return to Play guidelines as stated on the following page. If concussion symptoms return at any point during these steps, as per Return to Play guidelines, the athlete regresses to the previously passed step. The athlete and coach are to report symptoms to the Coach or designated party for re-evaluation. ***Any recurrence of signs and symptoms will be reported to the BOD and the parents or guardian of the athlete.***
9. Management and Return to Play decisions regarding athletes who have had two concussions in a season will be considered on an individual basis as they may not be allowed to return to the ice for scrimmages or games.

# WILMINGTON YOUTH HOCKEY RETURN TO PLAY GUIDELINES

## Return to Play Guidelines:

For a player to begin to return to play, they must have been granted medical clearance by their physician or neuropsychologist specializing in head injuries to return to play.

The following steps will provide an internationally approved protocol to safely return a player to full participation. Each step is to be performed with a minimum of 24 hours separating each step.

This time frame allows for proper assessment that no concussive symptoms have returned after each step.

**If concussive symptoms recur at any step along this protocol, the athlete will regress to the previous step he/she successfully completed. They will then follow the protocol from that point. Should symptoms persist at any of the steps, referral back to the physician is indicated.**

- Step 1:** Light aerobic exercise: 15 minutes  
Activities may include: walking, stationary bike  
If this step is done on the ice: Light skating with minimal equipment (helmet, knee pads and elbow pads) but no stick
- Step 2:** Sport specific exercise: 15 – 30 minutes  
Step 1 activities may be included  
Push ups, sit ups  
If this step is done on the ice: Full gear with stick but no puck handling. Agility drills, sprinting, edge work, etc...
- Step 3:** Non-Contact training drills: 30 – 45 minutes  
Steps 1 and 2 activities may be included  
Full gear: Passing drills, positional drills **that do not involve any player contact**
- Step 4:** Full Contact practice  
Player can begin full practice participation, including full body contact
- Step 5:** Return to Play:  
Normal game play