

Delaware Interscholastic Athletic Association
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DIAA Concussion Protocol

1. If an athlete exhibits signs or symptoms consistent with a concussion, they shall be removed from play immediately. A qualified health care professional must then determine whether or not an apparent concussion has occurred. If a qualified healthcare professional is not present, the injury must be treated as a concussion and the student not be allowed to return to practice/game until determined otherwise by a qualified healthcare professional. If the qualified healthcare professional is unable to rule out a concussion, the athlete must be referred for further evaluation and written clearance before the athlete may return to play. If a potential concussion, loss of consciousness or apparent loss of consciousness has occurred, the athlete may only return to practice/game after the administrative head of school or designee receives written clearance from a qualified physician. No athlete shall return to practice or play (RTP) on the same day of a concussion. Any athlete with a concussion should be evaluated by their primary care provider or qualified healthcare professional that day.
2. A qualified healthcare professional shall be defined as a MD or DO; or school nurse, nurse practitioner, physician assistant, or athletic trainer, with collaboration and/or supervision by a MD or DO as required by their professional state laws and regulations. The qualified healthcare professional must be licensed by their state, be in good standing with the State of Delaware, and if the evaluation is provided on site must also be approved or appointed by the administrative head of school or designee, or the DIAA Executive Director.
3. "Written Clearance from a qualified physician" for return to play after a potential concussion shall be a MD/DO only. The preferred method would be to use the form that is attached. [ACE Care Plan]. After medical clearance, return to play should follow a step-wise protocol with provisions for delayed return to play based upon the return of any signs or symptoms.
4. Failure to comply with medical requirements found in DIAA regulation section 3.0 shall result in that individual or school being considered "ineligible" and shall be penalized according to DIAA regulation 1008.2.9 or 1009.2.10 as applicable.
5. Beginning with the 2012-2013 school year, each student athlete and the athlete's parent or guardian shall annually sign and return a concussion information sheet prior to initiating practice or competition.
6. Beginning with the 2012-2013 school year, each certified and emergency coach shall complete concussion training once every two years. The NFHS online concussion course "Concussion in Sports – What you need to Know" is the approved training course.



DIAA ACUTE CONCUSSION EVALUATION (ACE) & RETURN TO PLAY FORM



Athlete Name: _____

Date of Birth: _____

Sport: _____

Date of Injury: _____

Qualified HealthCare Provider (QHP) at school

Name of QHP initially examining athlete on site: _____ (please print)

Date initially examined: _____

Today the following symptoms are present (please circle):

No reported symptoms: _____

Physical	Thinking	Emotional	Sleep
Headache	Light sensitivity	Feeling mentally foggy	Irritability
Nausea	Noise sensitivity	Problems concentrating	Sadness
Fatigue	Numbness/tingling	Problems remembering	Feeling more emotional
Vomiting	Visual problems	Feeling slowed down	Nervousness
Dizziness	Balance problems		
OTHER: _____			

Gradual Return to Play (RTP) Plan

RTP Plan must occur in gradual steps under the supervision of a QHP (see DIAA regulations for definition of QHP). This QHP, usually the schools ATC or RN, should be on-site supervising the RTP plan. After completion of a stage without any symptoms, athlete may progress to the next level of activity on the next day. If symptoms return, athlete must regress the stage and be seen by a qualified physician (see DIAA regs) if not seen by a MD/DO prior. Continued or worsening signs or symptoms should be reported to the physician immediately. **Before an athlete may initiate Stage 5 'full contact', they must be cleared by a qualified physician.**

School QHP Signature: _____

Date: _____

- Stage 1: No physical or cognitive activity. This includes no video games, computers, or school work. If athlete has no signs or symptoms consistent with a concussion they may progress, after 24 hours, to Stage 2, etc.
- Stage 2: Low levels of activity (ie symptoms do not come back during or after the activity). This includes walking, light jogging, light stationary bike, light weight lifting (low weight, higher reps, no bench, no squat)
- Stage 3: Moderate levels of activity with body/head movement. Includes moderate jogging, brief running, moderate-intensity stationary biking, moderate-intensity weightlifting (reduce time and/or weight from typical routine)
- Stage 4: Heavy non-contact activity. This includes sprinting/running, high intensity stationary bike, regular weightlifting routine, non-contact sport specific drills (3 planes of movement)
- Stage 5: *** **Must have physician clearance before beginning this stage** *** Full contact in controlled practice.
- Stage 6: Full contact in game play. If signs or symptoms return after Stage 5, must see physician again for Stage 6 clearance.

- ❖ ATHLETES MAY NOT RETURN TO ANY PHYSICAL OR COGNITIVE ACTIVITY ON THE SAME DAY THAT A HEAD INJURY OCCURRED
- ❖ ATHLETES MAY NOT RETURN TO PHYSICAL OR FULL COGNITIVE ACTIVITY IF THEY EXHIBIT ANY SIGNS OR SYMPTOMS CONSISTENT WITH A CONCUSSION
- ❖ ATHLETES MUST SUCCESSFULLY PROGRESS THROUGH THE RTP PLAN, WITH MD/DO CLEARANCE, BEFORE CONTACT/RTP

PHYSICIAN SPORTS CLEARANCE

I declare that I am a qualified physician (MD or DO only) who, in accordance with DIAA regulations as well as standards of medical care in concussion management, recommend the following:

- May check more than one box
- May not progress within the RTP Plan above; requires restricted school day at this time (see reverse). Contact my office _____
 - May resume gradual progression of the RTP Plan with the following exceptions/modifications: _____
 - May progress, per protocol, through Stage 5, and if symptom free, may advance to Stage 6.**
 - Other: _____

This RTP Plan was based upon today's evaluation:

Physician's Name: _____ (please print)

Physician's Office Phone: _____

Physician's Signature: _____

Date: _____

This form is adopted from the Acute Concussion Evaluation care plan developed by the CDC (www.cdc.gov/injury). All medical providers are strongly encouraged to use this form for concussed athletes participating in DIAA sports. While other forms may be used, **all medical providers must abide by DIAA protocol** (http://www.doe.k12.de.us/infosuites/students_family/diaa/) **including the return to play plan** noted above, before an athlete may return to athletics.

PHYSICIAN SCHOOL CLEARANCE

Rest, limiting physical and cognitive activity, and proper nutrition including good hydration, carbohydrates and protein are essential during concussion recovery. Thinking and emotional dysfunctions may require your child to receive extra help in school; therefore, inform your school's nurse and athletic trainer if your child has obtained a concussion. Please note that a full, non-symptomatic school day of cognitive activity must be achieved before progressive return to sport (**stage 2**) can be initiated. Restrictions for return to school as recommended by your physician are as follows:

Until you (or your child) have fully recovered, the following supports are recommended: *(check all that apply)*

- No return to school. Return on (date) _____
- Return to school with following supports. Review on (date) _____
- Shortened day. Recommend ___ hours per day until (date) _____
- Shortened classes (i.e., rest breaks during classes). Maximum class length: ___ minutes.
- Allow extra time to complete coursework/assignments and tests.
- Lessen homework load by ____%. Maximum length of nightly homework: ___ minutes.
- No significant classroom or standardized testing at this time.
- Check for the return of symptoms (use symptom table on front page of this form) when doing activities that require a lot of attention or concentration.
- Take rest breaks during the day as needed.
- Request meeting of 504 or School Management Team to discuss this plan and needed supports.

INSTRUCTIONS FOR ACE SPORTS RETURN FORM

1. If an athlete exhibits signs or symptoms consistent with a concussion, they shall be removed from play immediately. A qualified health care professional (QHP) must then determine whether or not an apparent concussion has occurred. If a qualified healthcare professional is not present, the injury must be treated as a concussion and the student not be allowed to return to practice/game until determined otherwise by a qualified healthcare professional. If the qualified healthcare professional is unable to rule out a concussion, the athlete must be treated as though he/she has sustained a concussion. The top (blue) section of the ACE form should be completed by the QHP, and the gradual RTP plan should be initiated. Note: in all situations where an athlete is determined to have a possible concussion, the athlete's parent or guardian should be contacted as soon as possible, and explained progressive warning signs as well as the RTP plan. If the symptoms become progressive, they should seek out physician services immediately.

2. The school's QHP may progress the athlete through the RTP plan (gold section) through stage four, so long as no symptoms return. Light physical activity (stage 2) should only be initiated after tolerance to a full school day, without symptoms. Each stage of the RTP plan should be no less than one day long. If symptoms return, the athlete must be referred to a qualified physician (MD or DO only) before any further activity can occur. Before progressing to stage 5, the QHP must sign off on the RTP plan section of the form, and refer the athlete to a qualified physician (MD/DO only) if the athlete has not already seen a physician or if the physician requires such follow-up after an earlier physician visit.

3. **Before progressing to stage 5 or beginning PE class, the school must obtain written clearance from a qualified physician (MD/DO only).** This clearance can be found at the bottom (grey section) of the ACE form. Any athlete that progresses into stage 5 and beyond without written clearance shall be considered ineligible, and all games subsequent to such entry shall be a forfeit for the school.

A qualified healthcare professional (QHP) shall be defined as a MD or DO; or school nurse, nurse practitioner, physician assistant, or athletic trainer, with collaboration and/or supervision by a MD or DO as required by their professional state laws and regulations. The qualified healthcare professional must be licensed by their state, be in good standing with the State of Delaware, and if the evaluation is provided on site must also be approved or appointed by the administrative head of school or designee, or the DIAA Executive Director "Written Clearance from a **qualified physician**" for progression into stage 5 and return to play after a potential concussion, shall be a MD/DO only, who is licensed by their state and in good standing with the State of Delaware.

FOR MORE INFORMATION GO DIAA AND CDC WEBSITES NOTED BELOW: WWW.CDC.GOV/INJURY

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