

# Weakley County Board of Education



Monitoring:	Descriptor Term: <b>Prevention &amp; Treatment of Sports-Related Concussions</b>	Descriptor Code: 6.413	Issued Date: 10/21/2014
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2 A concussion is a traumatic brain injury caused by a direct or indirect blow to the head or body.  
3 In order to ensure the safety of students that participate in interscholastic athletics, it is  
4 imperative that student athletes, coaches, and parents are educated about the nature and treatment  
5 of sports related concussions. The Board recognizes that concussions can be a serious health  
6 issue and should be treated as such.

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8 The Board adopts the guidelines and other pertinent information and forms developed by the  
9 Tennessee Department of Health to inform and educate coaches, school administrators, student  
10 athletes, and parent(s) / guardian(s) of the nature, risk and symptoms of concussions and head  
11 injuries. These guidelines and materials may be viewed on the Department of Health's website  
12 and shall be made available to interested parties through the Central Office.

13  
14 This policy shall govern all activities and those individuals involved in those activities which  
15 constitute an organized athletic game or competition against another team or in practice or  
16 preparation for an organized game or competition. It does not govern those activities or  
17 individuals involved in those activities which are entered into for instructional purposes only or  
18 those that are incidental to a nonathletic program or lesson.

19  
20 **REQUIRED TRAINING <sup>1</sup>**

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22 The director of schools shall ensure that each school's athletic director and coaches, employed or  
23 volunteer, annually complete the *Concussion in Sports – What You Need to Know* online course.  
24 This course may be accessed at [www.nfhslearn.com](http://www.nfhslearn.com).

25  
26 Prior to the annual initiation of practice or competition, the following persons must review and  
27 sign a concussion and head injury information sheet approved by the Tennessee Department of  
28 Health: the director of schools, licensed healthcare professionals (if appointed), each school  
29 athletic director, and each coach, employed or volunteer.

30  
31 In addition, prior to the annual initiation of practice or competition, all student athletes and their  
32 parent(s) / guardian(s) shall review the concussion and head injury information sheet approved  
33 by the Tennessee Department of Health. A form confirming this review shall be signed and  
34 returned by the student athlete, if the athlete is eighteen (18) years of age or older; or by the  
35 student athlete's parent (s) / guardian (s), for athletes younger than eighteen (18) years of age.

36  
37 All documentation of the completion of a concussion recognition and head injury safety  
38 education course program and signed concussion and head injury information sheets shall be  
39 maintained by the director of schools or his/her designee for a period of three (3) years.  
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1 **REMOVAL FROM ATHLETICS<sup>1</sup>**

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3 Any student athlete who shows signs, symptoms and/or behaviors consistent with a concussion  
4 during an athletic activity or competition shall be immediately removed for evaluation by a  
5 licensed healthcare professional, if available, and if not, by the coach or other designated  
6 individuals.

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8 No student athlete who has been removed from an athletic activity or competition due to a  
9 concussion or suspected concussion shall be allowed to return to any supervised team activities  
10 involving physical exertion, including games, competitions, or practices, until the student athlete  
11 has been evaluated by and received written clearance on forms approved by the Department of  
12 Health from a licensed health care provider for a full or graduated return. "Health care provider"  
13 means a Tennessee licensed medical doctor (M.D.), osteopathic physician (D.O.), or a clinical  
14 neuropsychologist with concussion training.

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16 This requirement for clearance prior to a student athlete returning to an athletic activity shall not  
17 apply if there is a legitimate explanation other than a concussion for the signs, symptoms, and/or  
18 behaviors observed.

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20 The director of schools or his/her designee shall ensure that all protocols approved by the  
21 Tennessee Department of Health or required by law relative to the provisions of this policy are  
22 followed and implemented within each school.

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Legal Reference:

<sup>1</sup> TCA 68-55-502