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EVERY CHILD,  
EVERY OPPORTUNITY,  
EVERY DAY...  
STRIVING FOR SUCCESS

**What should students and their parents do if they believe that they or their child may have sustained a concussion?**

**The student should be evaluated.** A licensed physician of medicine or osteopathic medicine (MD or DO), sufficiently familiar with current concussion management, should examine the student, determine whether the student has a concussion, and determine when the student is cleared to participate in interscholastic athletics. We STRONGLY recommend the athlete be seen by their primary care physician (PCP) for evaluation and clearance to return to sports.

**Concussed students should give themselves time to get better.** If a student has sustained a concussion, the student’s brain needs time to heal. While a concussed student’s brain is still healing, that student is much more likely to have another concussion. Repeat concussions can increase the time it takes for an already concussed student to recover and may cause more damage to the student’s brain. Such damage can have long term consequences. It is important that a concussed student rest and not return to play until the student receives permission from an MD or DO, sufficiently familiar with current concussion management, when the student is symptom-free. <sup>1</sup>

**If a student believes they may have a concussion:** Don’t hide it. Report it. Take time.

Currently, your athlete has sustained a concussion on \_\_\_\_\_ (date) at \_\_\_\_\_ (venue).

The student has had the following signs and/or symptoms since the injury: (circle all that have been present):

- |                               |                                     |
|-------------------------------|-------------------------------------|
| Headache/pressure in the head | Lethargic                           |
| Nausea                        | Confusion                           |
| Dizziness                     | Noise Sensitivity/Light Sensitivity |
| Blurred Vision                | Balance Problems                    |
| Ringing in the ears           | Visual blurriness/Double vision     |
| Memory difficulty             |                                     |

**Observed by:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Athletic Trainer’s signature

If your athlete's symptoms worsen or continues longer than 24-48 hours or experiences:

- Seizures
- Amnesia
- Muscle tremors
- Nausea and vomiting

**CONSULT YOUR ATHLETE'S PRIMARY CARE DOCTOR OR GO TO THE EMERGENCY ROOM IMMEDIATELY!!**

**RETURNING TO PLAY:**

Wellsboro Area School District incorporates the protocol of UPMC Susquehanna when returning an athlete back to play. These steps MUST be followed before your athlete can return to practice or game situations.

- See the Athletic Trainer daily. Utilization of standardized tools such as symptom checklists and comparison of post-injury performance to preseason baseline cognitive testing will be used. If no baseline is available, scores will be compared to normative data available.
  - WASD utilizes ImPACT Neurocognitive testing for varsity and junior varsity athletes
- Athlete must be symptom-free for 24 hours before the gradual exertion rehabilitation protocol can be started. If symptoms return at any point during the rehab protocol, all activity is stopped until symptoms are gone for 24 hours and the athlete will return, at minimum, to the previous level of activity that caused no symptoms.

STEP 1: Completion of a full day of normal cognitive activities (school day, studying for tests, watching practice, interacting with peers) without re-emergence of any signs or symptoms. If no return of symptoms, next day advance to:

STEP 2: Light aerobic exercise, which includes walking, swimming, or stationary cycling, keeping the intensity < 70% maximum predicted heart rate: no resistance training. The objective of this step is increased heart rate. If no return of symptoms, next day advance to:

STEP 3: Sport-specific exercise including skating, and/or running; no head impact activities. The objective of this step is to add movement and continue to increase heart rate. If no return of symptoms, next day advance to:

STEP 4: Non-contact training drills (e.g., passing drills). The student-athlete may initiate progressive resistance training. If no return of symptoms, next day advance to:

STEP 5: Participation in normal training activities. The objective of this step is to restore confidence and to assess functional skills by the coaching staff. If no return of symptoms, next day advance to:

STEP 6: Return to play involving normal exertion or game activity.

- As per UPMC Susquehanna policy, athletes must also complete and pass Vestibular-Ocular Motor Screening (VOMS) and Exit Testing.

**References:**

<sup>1</sup> PIAA Comprehensive Initial Pre-Participation Physical Examination, Section 3: Understanding of Risk of Concussion and Traumatic Brain Injury