As a requirement of the Illinois High School Association (IHSA) resulting from House Bill 200, Winnebago High School has implemented the following protocol to be enforced following a student athlete suffering a concussion while participating in school sponsored athletic activities.

**Definition of a concussion:** The IHSA defines a concussion as a traumatic brain injury that interferes with normal brain function. An athlete does not have to lose consciousness (or be “knocked out”) to have suffered a concussion.

**Observed signs or behaviors indicative of a possible concussion**
- Loss of consciousness
- Appears dazed, stunned, or confused
- Forgets plays
- Unsure of game, score or opponent
- Moves clumsily
- Answers questions slowly
- Shows behavior or personality changes
- Can’t recall events prior to or after the injury

**Symptoms reported by a player indicative of a possible concussion**
- Headache or ringing in the ears
- Nausea
- Balance problems or dizziness
- Double or fuzzy vision
- Sensitivity to light or noise
- Feeling sluggish
- Feeling foggy or groggy
- Concentration or memory problems
- Confusion

The National Federation of State High School Associations (NFHS) recommends the “Heads Up” plan if a concussion is suspected:
1.) Remove the athlete from play
2.) Ensure the athlete is evaluated by an appropriate health care professional
3.) Inform the athlete’s parents or guardians about the possible concussion and give them information on concussions
4.) Keep the athlete out of play the day of the injury and until an appropriate healthcare professional says the athlete is symptom free and gives the ok to return to activity.

**Pre-season requirements**

1.) Athletes and their parents will be required to read and sign the IHSA Concussion Information Sheet before the athlete is able to participate in any practice or event. If this form is not signed and returned to the Athletic office prior to the first practice, the athlete will not be allowed to participate until it is signed and returned. A new form will be required every year.

2.) Prior to the beginning of the season, all athletes will be baseline tested using the ImPACT (Immediate Post-Concussion Assessment and Cognitive Testing) computer software program. This neurocognitive assessment was designed to aid qualified practitioners in making safe return to play decisions for athletes. (For more information, go to [http://impacttest.com](http://impacttest.com).)

Winnebago High School will follow these steps (WHS sponsored practice or event):

1.) The coach or athletic trainer (ATC) will remove the athlete from play. If the athletic trainer is not immediately available, the coach will call the athletic trainer to evaluate the athlete.

2.) If the athletic trainer is not present, the coach will remove the athlete from the practice or game for the duration of the activity, until the athlete can be evaluated by the appropriate health care professional.

3.) The athlete will be evaluated by the athletic trainer for a possible concussion. In the event that the team physician is on site, he will be involved in the evaluation.

4.) If it is determined that the athlete has sustained a concussion, he or she will not be allowed to return to the practice or event that day, and must follow the guidelines set.

5.) The parents or guardians will be notified by the athletic trainer or physician if their child has suffered a head injury or possible concussion.

Winnebago High School will follow these steps (event at another location):

1.) In the absence of an athletic trainer at the event, and an athlete suffers a head injury, the coach will be responsible for removing the athlete from the competition for the remainder of the event. The evaluation will then take place upon returning home by WHS’s athletic trainer. If there is an athletic trainer at the event, they will ideally perform an initial evaluation.

2.) If the athletic trainer diagnoses a concussion, it is the responsibility of the coach and the athlete to let WHS’s athletic trainer know either that day or the next day upon returning home from the event. The athletic trainer at WHS MUST be informed of a concussion that occurs on the road, as it is then her responsibility to oversee care and return to play decisions.

3.) If no concussion is diagnosed, the athlete may return to the competition.

4.) If it is determined that the athlete has sustained a concussion, he or she will not be allowed to return to the event that day, and must follow the guidelines set.

**Guidelines for concussion treatment:**
1.) When an athlete is diagnosed with a concussion, he or she will take a post-injury ImPACT test with the athletic trainer. He or she will also be referred to either the school’s team physician Jon Strutzenberg, DO, or the athlete’s primary care physician or general practitioner. 
*Although an athlete is able to see his or her primary care physician or general practitioner, the final return to play decisions will be made by the athletic trainer and Jon Strutzenberg, DO following the ImPACT test results. This is to maintain consistency in treatment and return to play guidelines.

2.) The athlete will remain out of participation completely until the specified time by the physician, or until it is determined by WHS’s athletic trainer and Jon Strutzenberg, DO that the ImPACT results have returned to pre-injury levels.

3.) Once the athletic trainer and physician agree that the athlete is symptom free and the neurocognitive levels have returned to normal, the athlete will then progress through graded physical activity to re-acclimate the athlete to activity. This allows the brain to readjust to exercise. (Any return of symptoms during this period will signal that the brain is not fully healed and the athlete is still at risk for further complications; in addition, all activities must be stopped until again symptom free.)

**Progressive Physical Activity Program (Based on NFHS guidelines):**

1.) Light aerobic exercise: 5-10 minutes on an exercise bike or light jog. (NO weight lifting, resistance training or any other forms of exercise)

2.) Moderate aerobic exercise: 15-20 minutes of running at moderate intensity in the gym or on the field without a helmet or any other equipment.

3.) Non-contact training drills in full uniform. May begin weight lifting, resistance training and other exercises.

4.) Full contact practice or training.

5.) Full game play.

* Athletes will progress one step each day.

* In a case where the athlete was removed from activity with a suspected head injury, but does not show signs of a concussion the following day, the athlete may be able to progress through multiple stages in the same day.

It is important to note that concussion symptoms may not be present immediately following the injury, and can appear hours or sometimes days later. Parents and coaches are asked to monitor athletes who may have suffered a concussion in the subsequent time following the injury.