CONCUSSION AND TRAUMATIC HEAD INJURY POLICY

- 1. POLICY PREFACE. A Concussion or Traumatic Head Injury is a brain injury, and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most Concussions or Traumatic Head Injuries are mild, all Concussions or Traumatic Head Injuries are potentially serious and may result in complications including prolonged brain damage and even death if not recognized and managed properly. In other words, even a bump on the head can be serious.
 - Symptoms and signs of a Concussion or Traumatic Head Injury may show up right after the injury or can take hours or days to fully appear. If a Youth-Athlete reports any symptoms of a Concussion or Traumatic Head Injury, or if you notice the symptoms or signs yourself, seek medical attention right away. Most sports Concussions or Traumatic Head Injuries occur without loss of consciousness.

Sustaining a Concussion or Traumatic Head Injury; and continuing to participate in a Sporting Event can leave the Youth-Athlete vulnerable to greater injury or death. There is an increased risk of significant damage from a Concussion or Traumatic Head Injury for a period of time after it occurs, particularly if the Youth-Athlete suffers another one before completely recovering from the first. This can lead to prolonged recovery, or even severe brain swelling with devastating and even fatal consequences.

- 2. COMPLIANCE WITH UTAH CODE. In compliance with Utah Code Annotated (UCA) Title 26, Chapter 53 "Protection of Athletes with Head Injuries Act"; Tremonton City has implemented the policy below which requires adherence by all coaches, volunteers, parents, legal guardians, participants, and agents of Tremonton City.
- 3. POLICY DEFINITION.
 - A. The terms below shall have the following definitions:
 - "Concussion" or "Traumatic Head Injury" means an injury to the head arising from blunt trauma, an acceleration force, or a deceleration force, with one of the following observed or self-reported conditions attributable to the injury: (a) transient confusion, disorientation, or impaired consciousness, (b) dysfunction of memory, (c) loss of consciousness, or (d) signs of other neurological or neuropsychological dysfunction, including: (i) seizures, (ii) irritability, (iii) lethargy, (iv) vomiting, (v) headache, (vi) dizziness, or (vii) fatigue.
 - 2) "Qualified Health Care Provider" means a health care provider who: (a) is licensed under Title 58, Occupations and Professions; (b) may evaluate and manage a Concussion or Traumatic Head Injury within the health care provider's scope of practice; and (c) within three years before the day on which the written statement is made, have successfully completed a continuing education course in the evaluation and management of a Concussion or Traumatic Head Injury.
 - 3) "Sporting Event" means any of the following athletic activities that is organized, operated, managed, or sponsored by Tremonton City, such as: a game, a practice, a clinic, a sports camp, an educational class, a competition, or a tryout.
 - 4) "Youth-Athlete" means an individual who is under the age of 18.
- 4. POLICY REQUIREMENTS. If Tremonton City, its agents, coaches, volunteers, parents or legal guardians suspects a Youth-Athlete of sustaining a Concussion or Traumatic Head Injury while participating in a Sporting Event; the Youth-Athlete shall be removed immediately. Upon removal of Youth-Athlete suspected of sustaining a Concussion or Traumatic Head Injury, a written medical clearance from a Qualified Health Care Provider is required before the Youth-Athlete can return to participate in any Sporting Event which is in compliance with UCA Title 26, Chapter 53 "Protection of Athletes with Head Injuries Act".

- 5. SIGNED ACKNOWLEDGEMENT. Prior to permitting a "Youth-Athlete", coach, or volunteer to participate in a Tremonton City Sporting Event, Tremonton City shall provide and obtain the following:
 - A. Provide a written copy of the concussion and head injury policy to a parent or legal guardian of a Youth-Athlete; and
 - B. Obtain the signature of a parent or legal guardian of the Youth-Athlete acknowledging that the parent or legal guardian has read, understands, and agrees to abide by, the Concussion and Traumatic Head Injury policy. Obtain the signature of coaches and volunteers acknowledging that the have read, understand, and agree to abide by, the Concussion and Traumatic Head Injury policy. For the acknowledgement form see Exhibit A.
- 6. CONCUSSION ACTION PLAN. Tremonton City, its agents, coaches, volunteers, parents or legal guardians shall do the following when a Concussion or Traumatic Head Injury is suspected:
 - A. Remove the Youth-Athlete from the Sporting Event:
 - (1) Look for the symptoms and signs of a Concussion or Traumatic Head Injury (a) transient confusion, disorientation, or impaired consciousness, (b) dysfunction of memory, (c) loss of consciousness, or (d) signs of other neurological or neuropsychological dysfunction, including: (i) seizures, (ii) irritability, (iii) lethargy, (iv) vomiting, (v) headache, (vi) dizziness, or (vii) fatigue
 - (2) When in doubt, remove the Youth-Athlete from the Sporting Event.
 - B. Ensure that the Youth-Athlete is evaluated right away:
 - (1) Do not try to judge the severity yourself, get assistance from a Qualified Health Care Professional as soon as possible
 - C. Allow Youth-Athlete to return to the Sporting Event only with permission from a Qualified Health Care Provider:
 - (1) Repeated Concussions or Traumatic Head Injuries prior to recovery can increase the likelihood of further problems
 - D. Coaches, parents, or legal guardians should record the following information to give to the Qualified Health Care Provider:
 - (1) The cause of the head injury and with what force
 - (2) Any loss of consciousness and for how long
 - (3) Any memory loss immediately after the injury
 - (4) Any seizures immediately after the injury
 - (5) Any other pertinent information you may think will help the Qualified Health Care Provider

EXHIBIT A

Acknowledgement of Tremonton City's Concussion and Traumatic Head Injury Policy

By signing this acknowledgement, I certify that I am either a: 1) the legal guardian of the Youth-Athlete that I am registering in a Tremonton City activity, 2) coach or 3) volunteer. Additionally, my signature as a legal guardian (or in the case of coach or volunteer) acknowledges that I have read Tremonton City's Concussion and Head Injury Policy, which is in compliance with Utah Code Annotated (UCA) Title 26, Chapter 53 "Protection of Athletes with Head Injuries Act". I understand what a Concussion or Traumatic Head Injury is, I have been informed nature and risks of Concussions or Traumatic Head Injuries and how to recognize the signs and symptoms, and I agree to abide by Tremonton City's Concussion and Traumatic Head Injury Policy.

I understand if my Youth-Athlete is suspected of having a Concussion or Traumatic Head Injury, he/she will be removed from the Sporting Event and will not be permitted to continue participating in any upcoming Sporting Events until a Qualified Health Care Professional has determined the Youth-Athlete's participation to a Sporting Event to be safe.

I will provide Tremonton City with a written statement by a Qualified Health Care Professional acknowledging the Youth-Athlete is cleared to resume participation. Within this statement the provider must acknowledge he/she has successfully completed a continuing education course in the evaluation and management of Concussions or Traumatic Head Injuries within three years before the day on which the written statement was made.

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Parent/Coach/Volunteer Signature		Date