Cooperstown Dreams Park Concussion Awareness Program

The Cooperstown Dreams Park ("CDP") Concussion Awareness Program is intended to serve as its formal concussion awareness program, an educational program designed specifically to address concussion and sub-concussive injury awareness.

Concussion Awareness Program System, Distribution and Maintenance

Reasonable System

CDP's system is to maintain written communication of educational materials to be distributed electronically annually to all participants, parents/guardians, and coaches. "Participants" means any person engaged in athletic activities; "participant" does not include spectators, referees, umpires, or coaching staff. CDP's Concussion Awareness Program advances educational content regarding the nature, risk, and management of concussive injuries. The program will be reviewed annually with reference to relevant resources such as CDC guidance.

Distribution

The Concussion Awareness Program will be distributed electronically to all participants, their parents/legal guardians, and coaches. Participants, parents/legal guardians, and coaches are expected to review this document and strongly encouraged to take the trainings described in References at the bottom of the document.

Maintenance of Materials

Maintenance of the concussion awareness program materials, including all records and communication, will be the responsibility of the Operations Department. The Chief Operating Officer will save records of distribution for future reference.

Concussion Awareness Program - Definitions and Procedures

Concussion and Sub-concussive Injury Defined and Described

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move rapidly back and forth. This sudden movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging brain cells. Any suspected concussion must be taken seriously.

Sub-concussive hits are those that are below that concussion threshold: the brain is shaken, but not so violently that the damage to brain cells is severe enough to see through symptoms. Multiple sub-concussive injuries can have a cumulative effect, leading to issues over time.

Reported Symptoms:

- Headache or "pressure" in head
- Nausea or vomiting

- Balance problems or dizziness
- Blurry or double vision
- Sensitivity to light or noise
- Feeling sluggish, hazy, foggy or groggy
- Difficulty concentrating or remembering
- Just not “feeling right” or “feeling down”

Observed Symptoms:

- Appears dazed or stunned
- Confusion about events
- Answers questions slowly
- Repeats questions
- Can’t recall events prior to incident
- Can’t recall events after incident
- Loss of consciousness (even briefly)
- Mood, behavior, or personality changes
- Forgets instruction or assignment

Concussion Recognition and Response

Recognizing & Responding to Potential Concussion or Sub-Concussive Injuries

If a participant shows any signs, symptoms or behaviors that make you suspicious of a concussion, the participant MUST be removed from play and observed closely. Allowing the participant to continue play may result in sustaining another head injury and can lead to worsening concussion symptoms, increased risk for further injury and rarely, death. Signs and symptoms generally show up soon after the injury. However, symptoms may become evident within a few hours or evolve and worsen over a few days. For example, in the first few minutes the participant might be a little confused or a bit dazed, but an hour later they might not be able to remember how he or she got hurt.

You should continue to check for signs of concussion immediately after and the next few days following the injury. If concussion signs or symptoms worsen, you should seek emergency treatment right away.

Coaches and other responsible adults are not expected to diagnose a concussion. Participants should not self-diagnose. The diagnosis must be made by an appropriate health care professional. However, it is the responsibility of the responsible adult to be aware of the signs, symptoms and behaviors associated with a concussion and follow the proper procedures for treatment.

It is important for participants to know the symptoms of a concussion and inform their coach or other responsible adult.

Concussion Injury Management Standards

All head injuries are evaluated by the nurse on duty and may require off-site evaluation. When any participant collides with another player or object and has any alteration in normal behavior or mental function, they are required to seek off-site evaluation. Following an off-site evaluation, a "Return to Participation" form must be supplied before coming back on-site as a participant.

There may be some situations where you will need to seek emergency care. The following circumstances are medical emergencies after a concussion:

- Loss of consciousness (even if brief)
- Seizure
- Increased sleepiness
- Worsening headache
- Persistent vomiting

Physical and mental rest are major steps in recovering from a concussion. Generally, 24 - 48 hours of rest is needed, though some participants may require more. Rest is essential to help the brain heal. Any activity that requires concentration and attention needs to be stopped as these activities may worsen symptoms and delay recovery. These activities include but are not limited to the following:

- Loud noise
- Exposure to bright lights
- Computers
- Video games
- Television
- Phones

Procedures

Adult supervisors of participants must follow the administrative procedures listed below immediately after a participant experiences a suspected concussion.

- Immediately remove participant from play.
- Contact on site Infirmary staff
- Contact parent/guardian and notify them of possible concussion.
- Request written 'return to play" instructions from a health care provider

Injury Management Standards for Return to Activities

Return to Play

After suffering a concussion, no participant can return to play or practice until they are symptom free and medically cleared to play—that is, the participant must provide the Infirmary staff with a "Return to Participation" form from a healthcare provider approving the participants return to athletic activity. Once a participant is cleared to return to play, they should be eased into play to allow the brain to re-adjust to exercise. Participants should be monitored closely. If there is a

recurrence of symptoms at any time during return to play or learn, the participant may need to be re-evaluated by a health care provider.

Prevention of Concussions and Sub-concussive Injuries

Preventing concussions may be difficult, however you can take necessary precautions to reduce the number of concussions and properly treat the ones that do occur. Make sure that the participant wears a helmet that is appropriate for the sport they are participating in. Ensure that all helmets fit properly and are worn correctly each time.

References:

• NFHS Suggested Guidelines for Management of Concussions in Sports, National Federation of State High School Associations (NFHS) Sports Medicine Advisory Committee (SMAC), https://assets.nfhs.org/umbraco/media/7212694/suggested-guidelines-for-management-of-concussion-in-sports-nfhs-smac-final-october-2023.pdf

• https://concussionandcte.org/

• https://www.cdc.gov/heads-up/training/youth-sports.html

• CDC Heads Up: https://www.cdc.gov/heads-up/index.html

• CDC Course for Coaches: https://www.train.org/cdctrain/course/1089818/details