



Concussion Awareness and Safety Recognition Guidance

Objective:

It is Special Olympics' intent to take steps to help ensure the health and safety of all Special Olympics participants. All Special Olympics participants should remember that safety comes first and should take reasonable steps to help minimize the risks for concussion or other serious brain injuries. This document should be used by athletes, coaches, parents, event officials and medical teams to guide concussion recognition and initial management.

Local and state laws that require written return to play should be followed.

Defining a Concussion

A concussion is defined by the Centers for Disease Control as a type of traumatic brain injury caused by a bump, blow, or jolt to the head, as well as serial, cumulative hits to the head. Concussions can also occur from a blow to the body that causes the head and brain to move quickly back and forth, causing the brain to bounce around within the skull. The effects of a concussion can be serious. *Continuing to play with a concussion or symptoms of head injury can lead to greater injury or even death.*

Suspected or Confirmed Concussion

Effective January 1, 2015, a participant who is suspected of sustaining a concussion in a practice, game or competition shall be removed from practice, play or competition at that time. If a qualified medical professional is available on-site to evaluate the athlete, that person shall have final authority as to whether a concussion is suspected and if an athlete can return to play.

A concussion should be diagnosed, and an athlete should be removed from contact sports if:

- There is a witnessed head injury with loss of consciousness for any amount of time.
- There is a witnessed head injury with subsequent headache, dizziness, confusion, nausea, vomiting or other symptoms of concussion.

The athlete should not return to sports until all symptoms attributed to the concussion have resolved, they have been cleared by a licensed medical professional trained in concussion management, and they have progressed through a gradual return to play protocol. A gradual return to play after complete symptom resolution takes at least five days before return to full contact competition.

A concussion should be suspected for unwitnessed injuries if an athlete develops signs/symptoms of concussion and the athlete should be removed from play that day. In multi day events, these athletes should be evaluated the next day (before their next competition), by a medical provider trained in concussion diagnosis and management. If the athlete is back

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to baseline and symptoms can be attributed to something other than concussion, that athlete should not be diagnosed with a concussion and should be allowed to play that day without restrictions, but with strict guidelines to be reevaluated for any return or exacerbation of symptoms. If the athlete continues to have symptoms or is not back to their baseline at the follow up evaluation, they should be diagnosed with a concussion and *removed from play for the duration of the tournament* until cleared by a licensed medical professional, as described above. Athletes not in a multi-day event should work with their personal medical team on diagnosis and return to play.

Recognizing Concussion in Athletes with Intellectual Disability

It may be more difficult to diagnose a concussion in athletes with intellectual disabilities (ID) or other developmental disabilities (DD). When assessing for signs and symptoms of concussion, first identify the athlete's preferred communication method (e.g., sign language (ASL), use of assistive communication device, or verbal) and structure (e.g., single-word, phrase, or sentence speech). Medical providers may also need to rely on the observations of family, friends, teammates, and interpreters to make the diagnosis and track recovery, rather than on the athlete's history and physical examination alone.

Identifying a change in the athlete's pattern of behavior is important, as a difference in their willingness to engage in their favorite activities/hobbies, level of independent functioning, or daily routines (e.g., sleep, appetite) may indicate underlying symptoms. Concussion cognitive testing alone will not be accurate for making a diagnosis of concussion in a population with ID. Questions related to symptoms should be compared to the athlete's baseline (is this different from pre-injury?).

Signs and symptoms of a concussion:

- Loss of consciousness (even for a brief period)
- Change in mood, behavior or personality
- Confusion, difficulty following instructions or completing tasks (compared to baseline)
- New headache, nausea, vomiting, or dizziness
- Change in balance (compared to the athlete's baseline)
- Increased light and/or noise sensitivity compared to usual

Signs of more serious injury

In rare cases, a head injury can cause bleeding in the brain. Call emergency services for immediate care and transportation to an Emergency Room if an athlete has:

- Headache that gets progressively worse
- Repeated vomiting
- Inability to wake up and/or new seizure
- Repeat loss of consciousness

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Return to Play

A participant who has been removed from practice, play or competition due to a suspected concussion may not participate in Special Olympics sports activities until either of the following occurs:

- (i) all signs and symptoms of a concussion have resolved, and a currently licensed, qualified medical professional provides written clearance for the athlete to return to practice, play and competition after completing a gradual return to play protocol. A gradual return to play after complete symptom resolution takes at least five days before return to full contact competition.

OR

- (ii) a currently licensed, qualified medical professional determines that the athlete did not suffer a concussion and provides written clearance for the athlete to return to practice or play immediately.

Written clearance in either of the scenarios above shall become a permanent record.

Required Training and Timeline

All Coaches are required to complete one of the following concussion awareness training courses:

- National Federation of State High School Associations Concussion in Sports Training Course, which is available at <https://nfhslearn.com/courses/concussion-in-sports-2>
- HEADS UP to Youth Sports: Online Concussion Training available at https://www.cdc.gov/heads-up/training/youth-sports.html?CDC_AAref_Val=https://www.cdc.gov/headsup/youthsports/training/index.html

Any concussion awareness training other than the above-referenced courses must be approved by Special Olympics International. For Coaches registering for the first time on or after January 1, 2015, confirmation of such training must be provided to the U.S. Program before the individual begins volunteer duties.

Further information for coaches can be found a HEADS UP to School Sports: Coaches, which is available at https://www.cdc.gov/heads-up/?CDC_AAref_Val=https://www.cdc.gov/headsup/highschoolsports/coach.html

Further information on concussion in neurodiverse athletes can be found at <https://concussion.gmu.edu/node/224>

U.S. Programs must implement a system for tracking completion of the concussion awareness training by Coaches.

All coaches should talk with athletes and parents about concussions and encourage reporting of concussion symptoms.

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Frequency of Training

Concussion awareness training must be completed by all Coaches at least once every three years.

Communication with Parents and Guardians

U.S. Programs are required to communicate in writing to all athletes and/or parents/guardians, the concussion awareness and safety recognition program, as outlined in the Suspected or Confirmed Concussion and Return to Play sections of this policy.

The Centers for Disease Control website <https://www.cdc.gov/headsup/> provides additional resources relative to concussions that may be of interest athletes and their families.

Resources:

1. Centers for Disease Control and Prevention. CDC Heads Up. Accessed 14 February 2024. Available at <https://www.cdc.gov/headsup/>.
2. Weiler R, et al. Concussion in para sport: the first position statement of the Concussion in Para Sport (CIPS) Group. Br J Sports Med. 2021 Nov;55(21):1187–1195. doi: 10.1136/bjsports-2020-103696.
3. Patricios JS, et al. Consensus Statement on Concussion in Sport: The 6th International Conference on Concussion in Sport-Amsterdam, October 2022. Br J Sports Med. 2023 Jun;57(11):695-711. doi:10.1136/bjsports-2023-106898.
4. Virginia Concussion Institute Neurodiversity Toolkit (beta version). Accessed 14 February 2024 Available at <https://concussion.gmu.edu/node/224>.

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