

# NFHS Concussions

New State Law New Mexico  
School Coaches Grades 7-12  
Best Practice for AYBL



# Concussion Procedure Revised

## (2-8-5; 3-3-8)

- Concussion language revised in all NFHS rules books.
- Removed references to “unconscious or apparently unconscious.”
- New procedure requires an athlete *exhibiting signs, symptoms or behaviors consistent with a concussion* be removed from the

# Concussion Recognition and Management (2-8-5; 3-3-8)

National Federation of State  
High School Associations



## Suggested Guidelines for Management of Concussion

A concussion is a traumatic brain injury that interferes with normal brain function. An athlete does not have to lose consciousness (be "knocked out") to have suffered a concussion.

### Common Symptoms of Concussion Include:

- headache
- fogginess
- difficulty concentrating
- easily confused
- slowed thought processes
- difficulty with memory
- nausea
- lack of energy, tiredness
- dizziness, poor balance
- blurred vision
- sensitive to light and sounds
- mood changes- irritable, anxious, or tearful

### Suggested Concussion Management:

1. No athlete should return to play (RTP) or practice on the same day of a concussion.
2. Any athlete suspected of having a concussion should be evaluated by an appropriate health-care professional that day.
3. Any athlete with a concussion should be medically cleared by an appropriate health-care professional prior to resuming participation in any practice or competition.
4. After medical clearance, RTP should follow a step-wise protocol with provisions for delayed RTP based upon return of any signs or symptoms.

For further details please see the "NFHS Suggested Guidelines for Management of Concussion" at [www.nfhs.org](http://www.nfhs.org).

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**See Appendix D  
on Page 75  
of the 2010-11  
NFHS Basketball  
Rules Book**



# Concussion Recognition and Management (2-8-5; 3-3-8)

- A concussion is a brain injury that results in a temporary disruption of normal brain function.
- A concussion occurs when the brain is violently rocked back and forth or twisted inside the skull as a result of a blow to the head or body.



# Concussion Recognition and Management (2-8-5; 3-3-8)

- Neither officials, nor coaches, are expected to “diagnose” a concussion; that is the job of an appropriate health-care professional.
- Officials, coaches and administrators are being asked to make all efforts to ensure that concussed athletes do not continue to participate.



# Concussion Recognition and Management (2-8-5; 3-3-8)

- The game official is not responsible for the evaluation or management of the athlete after he/she is removed from play.
- If an appropriate health-care professional determines that the athlete HAS NOT suffered a concussion, the athlete may return to play.



# Concussion Recognition and Management (2-8-5; 3-3-8)

- If there is no appropriate health-care professional available to evaluate the athlete, the athlete **SHOULD NOT** be permitted by the coach to return to play.
- Athletes with continued concussion symptoms are at significant risk for recurrent, cumulative and even catastrophic consequences of a



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2. Any athlete suspected of having a concussion should be evaluated by an appropriate health-care professional that day.
3. Any athlete with a concussion should be medically cleared by an appropriate healthcare professional prior to resuming





# Suggested Concussion Management

4. After medical clearance, RTP should follow a step-wise protocol with provisions for delayed RTP based upon return of any signs or symptoms.



# Concussion Management Rule 2-8-5; 3-3-8



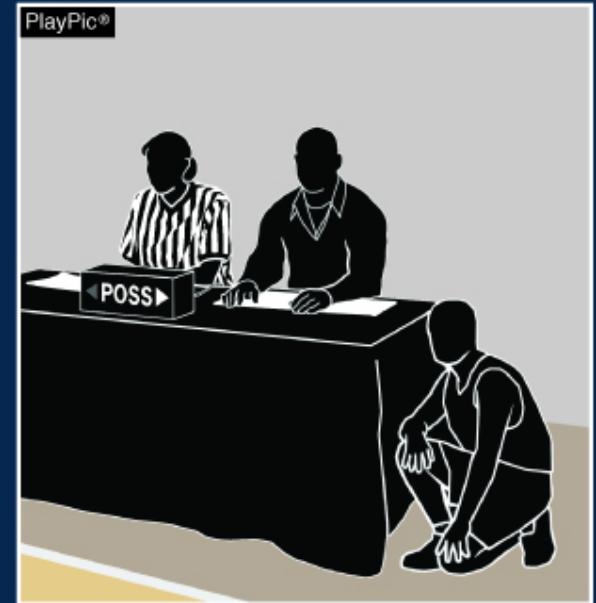
A



B



C



**A. Injured player directed to leave game**

**B. Cleared by appropriate health-care professional**

**C. Re-enters game**