

**BEVERLY HIGH SCHOOL - ATHLETIC DEPARTMENT  
STUDENT/ATHLETE/PARENT ATHLETIC HANDBOOK**



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# ATHLETIC DEPARTMENT BEVERLY HIGH SCHOOL RULES, REGULATIONS AND GUIDELINES

## Athlete & Parent Guide

The material outlined in this guide defines the interscholastic athletic policies and procedures for all students participating in our high school program. The information is intended to provide you with a better understanding of the Athletic Department's philosophy, goals and policies. Participation on an athletic team can be a rewarding educational experience. It is important that students realize; the time demands, responsibility, dedication and sacrifices required when making this commitment.

### Program Goals

Emphasis is on the development of basic skills, appropriate attitudes, values and team concepts. Participation at the varsity level is generally limited to the most highly skilled players and those with the ability to interact with other players for team success. Assessments will be made by the coach relative to the level of play, (V, JV, or Freshman), most beneficial to the development and progress of each player. It should be understood that playing time could be limited by the strategy of the game, coach's discretion and certain conditions.

To allow as many students as possible to participate and share the experience and benefits derived from team membership.

To compete successfully with Northeast Conference & non-league opponents, and with teams or individuals of a similar division in state competition.

### Games/Practice Sessions

Student athletes have made a commitment to be at all practice sessions, contests and team meetings. Any team member who must be late, or miss practice, games or meetings must confer with their coach. Absences may jeopardize retaining a position on the team. This includes extended trips during vacation.

Practices are held daily and some practices may be held on weekends. No official practice may be held without a BHS coaching staff member present.

### Physicals

Athletes must have a physical examination every year in order to be eligible for sport participation. Athletic eligibility requirements of a doctor's physical examination expire **thirteen months from the date of the last physical examination**. In order for an athlete to remain eligible, proof of an updated physical examination must be submitted before the student is allowed to participate in any practice or game.

The school does not provide a physical, and athletes must have a physical by their own physician and submit the school's medical form signed by a medical doctor, or they may submit a signed note written on the doctor's stationary stating the athlete has had a physical within thirteen months of participation and may compete in athletics.

Any athlete not allowed to participate due to doctor's orders because of illness or injury, may not play again until a "return to participation" form is filled out by the doctor.

In accordance with student record regulations the Beverly Public Schools considers the following to be Directory Information, which will be released without the consent of eligible students or parents: a student's name, address, telephone listing, date and place of birth, major field of study, dates of attendance, participation in officially recognized activities and sports, weight and height of members of athletic teams, photograph, class degrees, honors and awards, grade level, and post-high school plans.

In addition, the Armed Forces Recruiter Access to Students and Student Recruiting Information Act requires that schools make students' names, addresses, and telephone numbers available to military recruiters and institutions of high learning.

Parents and eligible students not wishing to have some or all of the information listed above released without their consent should notify their building principal in writing.

## **BHS - VARSITY COACHES DIRECTORY**

### **Fall Season**

Football	Andrew Morency
Football Cheering	Brendon Graffum
Boys Soccer	Mark Devlin
Girls Soccer	Kristin Simpson
Field Hockey	Tricia Murphy
Boys Cross Country	Sean Dunleavy
Girls Cross Country	Dave Jellerson
Golf	Craig Wiley
Volleyball	Pam Padovani
M.S. Cross County	Ed Arsnow/Grace Sparkman
	Andrea Sherman/Scott Sutera
M.S. Field Hockey	Jessica McGrath, Jenny Kelley

### **Winter Season**

Boys Basketball	Matt Karakoudas
Girls Basketball	Seth Stantial
Gymnastics	Julie Sciamanna
Boys Ice Hockey	Justin Shairs
Girls Ice Hockey	Danielle Finocchiaro
Boys Indoor Track	Sean Dunleavy
Girls Indoor Track	Dave Jellerson
Swimming	David Swensen/Carla Dropo/Brendan Graffum
Wrestling	Paul Casey

### **Spring Season**

Baseball	TBD
Softball	Meghan Sudak
Boys Outdoor Track	TBD
Girls Outdoor Track	Dave Jellerson
Boys Lacrosse	Jim Leselva
Girls Lacrosse	TBD
Boys Tennis	Chris Lauranzano
Girls Tennis	Jessica Bushee
Sailing	Parker Manis
Ultimate Frisbee	Sam Stantial
M.S. Track	Eric Rothblatt, Ed Arsnow, Tim Hegarty

### Starting Dates

<u>Fall Season</u>	The second Thursday preceding Labor day. Double sessions and single sessions (Exception - football allowed 3 additional days)
<u>Winter Season</u>	Monday after Thanksgiving
<u>Spring Season</u>	The third Monday in March

The coach of each sport will hold an informational meeting prior to the start of the season. Candidates are expected to attend.

All candidates for athletic teams must meet the following requirements prior to attending any tryouts or practice sessions:

1. Have evidence of a passed physical examination the year of participation. Examination must be performed by a duly registered physician.
2. Have submitted a signed parental form.
3. Be under 19 years of age.
4. Be academically eligible.
5. Transfer students must notify Athletic Director
6. Must have fulfilled all financial obligations for equipment issued the previous season.
7. User fee paid in full prior to first tryout.

### User's Fee Policy

The Beverly School Committee has adopted a user's fee policy for interscholastic athletics at Beverly High School. The policy states that every athlete will pay a user's fee based on a per sport scale.

Some of the general guidelines are as follows:

- checks are to be made out to Beverly Public Schools
- payment is due before tryouts begin
- payment will be made to the athletic director's office
- the payment of user's fee does not ensure playing time.
- no refund after the first practice, unless player does not make the team

### Team Tryout/Selection

During the tryout period, each coach will provide an explanation of his/her expectations. It is the duty of the student to demonstrate to the coach that he/she can fulfill these expectations. Students not selected are encouraged to explore other sport opportunities.

The coaching staff of each sport has the sole responsibility for selecting the members of the team, determining the level of play most beneficial to the development of each player and the amount of playing time. Player concerns should be addressed first between the player and the coach. If a significant resolution is not reached, parents should plan a meeting with the coach.

Practices for every sport are usually on days there are no scheduled games/meets and/or at the direction of each Coach.

### Class Attendance Policy

Students who are tardy to school after 11:10 a.m. without a valid excuse will be ineligible for extracurricular activities that day. Students who are dismissed from school after 11:10 a.m. without a valid excuse will be ineligible for extracurricular activities that day.

### School Equipment Responsibilities

Students are responsible for and are expected to maintain proper care of all equipment issued to them. Students are responsible for payment of any items lost or stolen and for damaged equipment.

Each item not returned will be assessed at a rate comparable to the current replacement costs. All equipment is to be returned within three days of the

### Pre-season Responsibilities

The conclusion of the season is defined to include participation through the last MIAA sponsored tournament or event in which Beverly High is a participant.

Student/athletes are not to wear uniforms (practice or game) at any time other than those allowed by the specified team regulations.

Athletes who do not return equipment during one season will not be allowed to participate in any manner during the next season.

The following rules are established by the Massachusetts Interscholastic Athletic Association (MIAA) which governs all high school competitions.

### Academic Eligibility

Academics are the primary focus of a student's career, and must be emphasized more than any other activity. Beverly High has a stricter policy than the MIAA policy.

In order to qualify for participation, a student may have **NO F's** and/or **No more than two D's** in a relevant quarter or last school year's final grade (FAV) (Fall eligibility only).

1. **Fall** eligibility is determined by all **final grades** from the last school year. Freshman will start their high school year with a clean slate first.
2. **Winter** eligibility is determined by first quarter grades when report cards are issued.
3. **Spring** eligibility is determined by second quarter grades when report cards are issued

## TRANSPORTATION

Students are required to ride the bus to and from all away games.

Any exceptions to this rule must receive prior approval of the athletic director, principal, or coach.

At no time will a student be allowed to drive themselves to a game or meet.

## TEAM CAPTAINS

**The following rule was adopted by the Northeastern Conference on August 27, 1998.**

**Once a student is elected a team captain and he/she violates the MIAA or their own school drug and alcohol policy at any time during the year, they will lose the privilege of being a team captain.**

**The position of captain is one of honor, leadership and responsibility. As a result, student athletes serving in that capacity are expected to conduct themselves in an exemplary manner in and out of school. Any captain involved in any violation of the discipline code that results in a school or athletic suspension may lose their captainship.**

## ATHLETIC AWARDS

1. One letter will be awarded to each contestant in each sport that he/she successfully participates in during a school year. After receiving this letter, a player will receive a certificate with team picture testifying to subsequent athletic achievement. Band members will also qualify under this category.
2. No additional awards shall be given except under extraordinary circumstances. Recommendations for these awards shall come from the principal, the athletic director and the coach of the particular sport.
3. All candidates for any award shall be recommended by the head coach of the sport.
4. To be eligible for an award, a player must finish the playing season as a bona fide member of the playing squad.
5. A player injured in participation during the season thus preventing him/her from fulfilling award requirements may be recommended for an award.
6. Seniors may receive an award for conscientious attendance at practices and games even though failing to meet playing requirements provided they have been squad members for three years.
7. Any manager of a varsity team is eligible for the team's athletic award in his/her senior year provided he/she has served a minimum of two years in that particular sport.

## PLAYER'S AGREEMENT TO PARTICIPATE AND PARENTAL CONSENT

High school sports are designed to provide participants with hours of enjoyable activity. The rules are written to promote competition in a fair and safe environment. If players are to realize the benefits of selflessness, striving for a common cause, and the development of skills, knowledge, fitness and other sport-related outcomes, they must assume many personal responsibilities.

The most important of the participant's responsibilities relates to what must be done to avoid injuries to self, teammates, and opponents. In spite of rules to prevent injuries and equipment to protect vulnerable body parts, participation does include risk of injury. Injuries may be very slight or severe, such as bruises, lacerations, broken bones, injuries to eyes and teeth, and those with long-term catastrophic consequences, including permanent paralysis or even death do occur in supervised programs. It is possible only to minimize, and not completely eliminate, the risk. Participants have the responsibility to help reduce the chance of injury through following the rules of instruction from the leadership and proper conditioning specifically:

- Obey the letter and spirit of team rules and regulations. Use your body and equipment only for purposes provided for in the rules.
- Discourage rule violations among your teammates.
- Avoid aggressive acts and remain under emotional control at all times. Players are legally liable for injuries to others, including spectators, due to "reckless disregard" for the safety of others.
- It is essential that the players give special attention to the instruction and direction of the leaders. They must give undivided attention to instruction on the skills and techniques of the sport and then try their best to perform according to the instruction. When difficulty is encountered, assistance from the coach should be sought. Leaders should be obeyed regarding behavioral conduct, whether at the activity site or traveling to and from games or practices.
- Players must wear appropriate clothing when playing. Shoes that have the appropriate coefficient of friction for the playing surface are essential to safe play.
- The physical condition of the player is an important element in avoidance of injury.
- Players must participate fully in the conditioning and training drills that are designed to: a) strengthen muscles, tendons and ligaments; b.) provide required flexibility; and c.) provide the required cardiovascular fitness.
- Players must report all personal physical problems and injuries to their athletic trainer, coaches and parents. Medical assistance must be sought, particularly where pain persists.
- In order to participate after an injury, one can do so only when the injured player is free from pain and the rehabilitation program has restored complete range of motion, strength and normal speed and agility to the injured part. There should be a physician approval to resume participation for those injuries that requires medical attention.

## Conflict Resolution Process

Athletic involvement, while fun and rewarding, can be very time consuming and emotional. Due to the level of effort and emotion invested, conflicts between players and coaches will inevitably arise. All conflicts should be addressed professionally and as soon as possible. To accomplish this, please follow these guidelines.

### **FIRST STEP: STUDENT ATHLETE AND COACH CONTACT**

The student athlete should meet individually with the coach to share concerns and/or discuss any issue or conflict. It is the student athlete's responsibility to make an attempt to meet with the coach before involving others, if at all possible.

#### Times to avoid when initiating contact:

- Immediately prior to and/or right after a contest.
- During an active practice session.
- During a time when students are present and/or when the discussion is visible to others.
- When it is apparent that there is not sufficient time to allow for a complete discussion.

### **SECOND STEP: PARENT/GUARDIAN AND COACH CONTACT**

If a conflict between a student athlete and a coach remains unresolved or becomes a chronic issue, the parent/guardian and student athlete should schedule a meeting with the coach. The student athlete should be involved and present at this meeting.

### **THIRD STEP: PARENT/GUARDIAN AND ATHLETIC DIRECTOR CONTACT**

If a satisfactory resolution is not reached through direct contact with the coach, the student athlete and parent/guardian should inform the coach that they intend to contact the athletic director. A meeting with the Athletic Director should be scheduled through the Athletic Office.

### **FOURTH STEP: PARENT/GUARDIAN AND PRINCIPAL CONTACT**

If existing concerns remain following a meeting with the athletic director, the student athlete and parent/guardian should acknowledge such, and initiate contact with the high school principal.

**Please note:** If you believe that due to the seriousness and/or nature of your concerns and/or complaint, you are unable or unwilling to follow these procedures, you may express your concerns directly to the athletic director and/or building principal.

### MIAA Rule 59 Bonafide Team Member

A bonafide member of the school team is a student who is regularly present for and actively participates in, all team practices and competitions.

ATHLETES ON ALL TEAMS MUST COMPLY WITH THE BONAFIDE TEAM RULE. BONAFIDE MEMBERS OF A SCHOOL TEAM ARE PRECLUDED FROM MISSING A HIGH SCHOOL PRACTICE OR COMPETITION IN ORDER TO PRACTICE OR COMPETE WITH AN OUT-OF-SCHOOL TEAM.

Violations of the above rules will result in ineligibility for 25% of the season. A second offense will result in an additional 25% and the athlete will not be able to participate in the state tournament.

## CHEMICAL HEALTH

### **Chemical Health Policy**

During the season of practice or play, a student shall not, regardless of the quantity, use, consume, possess, buy/sell, or give away any beverage containing alcohol; any tobacco product; marijuana; steroids; or any controlled substance. It is not a violation for a student to be in possession of a legally defined drug specifically prescribed for the student's own use by his/her doctor. (Chemical Health -MIAA)

Student athletes are expected to use good judgment and not place themselves in harm's way. Drinking alcohol or using a controlled substance or in the presence of (alcohol or a controlled substance) at a social gathering, outside of school, may serve as grounds for disqualification if evidence is presented and confirmed by the police and/or school administration.

### **Minimum Penalties for Athletic Activities**

**First Violation:** When the principal confirms, following an opportunity for the student to be heard, that a violation occurred, the student shall lose eligibility for the next consecutive interscholastic contests totaling 25% of all interscholastic contests in that sport. No exception is permitted for a student who becomes a participant in a treatment program. It is recommended that the student be allowed to remain at practice for the purpose of rehabilitation. All decimal part of an event will be truncated i.e. All fractional part of an event will be dropped when calculating the 25% of the season.

**Second and Subsequent Violation(s):** When the principal confirms, following an opportunity for the student to be heard, that second or subsequent violations have occurred, the student shall lose eligibility for the next consecutive interscholastic contests totaling 60% of all interscholastic contests in that sport. All decimal part of an event will be truncated i.e. All fractional part of an event will be dropped when calculating the 60% of the season.

If, after the second or subsequent violations the student of his/her own volition becomes a participant in an approved chemical dependency program or treatment program, the student may be certified for reinstatement in MIAA activities after a minimum of 40% of events provided the student was fully engaged in the program throughout that penalty period. The high school principal in collaboration with a chemical dependency program or treatment program must certify that student is attending or issue a certificate of completion. If student does not complete program, penalty reverts back to 60% of the season. All decimal part of an event will be truncated i.e. All fractional part of an event will be dropped when calculating the 40% of the season.

**Penalties shall be cumulative each academic year**, but a penalty period will extend into the next academic year (e.g. if the penalty period is not completed during the season of the violation, the penalty shall carry over to the student's next season of actual participation, which may affect the eligibility status of the student during the next academic year).

## HAZING RULE

**Section 17.** Whoever is a principal organizer or participant in the crime of hazing as defined herein shall be punished by a fine of not more than one thousand dollars or by imprisonment in a house of correction for not more than one hundred days, or by both such fine and imprisonment.

The term "hazing," as used in this section and in sections eighteen and nineteen, shall mean any conduct or method of initiation into any student organization, whether on public or private property, which willfully or recklessly endangers the physical or mental health of any student or other person. Such conduct shall include whipping, beating, or branding, forced calisthenics, exposure to weather, forced consumption of any food, liquor, beverage, drug or any substance, or any other brutal treatment or forced physical activity which is likely to adversely affect the physical health or safety of any such student or other person, or which subjects such student or other person to extreme mental stress, including extended deprivation of sleep or rest or extended isolation.

**Section 18.** Whoever knows that another person is the victim of hazing as defined in section seventeen and is at the scene of such crime shall, to the extent that such person can do so without danger or peril to himself or others, report such crime to an appropriate law enforcement official as soon as reasonably practicable. Whoever fails to report such crime shall be punished by a fine of not more than five hundred dollars.

**Section 19.** Each secondary school and each public and private school or college shall issue to every group or organization under its authority or operating on or in conjunction with its campus or school, and to every member, plebe, pledgee, or applicant for membership in such a group or organization, a copy of this section and sections seventeen and eighteen. An officer of each such group or organization, and each individual receiving a copy of said sections seventeen and eighteen shall sign an acknowledgment stating that such group, organization or individual has received a copy of said sections seventeen and eighteen.

## CONCUSSION POLICY

The purpose of this policy is to provide information and standardized procedures for persons involved in the prevention, training management and return to activity decisions regarding students who incur head injuries while involved in extracurricular athletic activities<sup>1</sup> including, but not limited to, interscholastic sports, in order to protect their health and safety as required by Massachusetts law and regulations. The requirements of the law apply to all public middle and high schools, however configured, serving grades six through high school graduation. In addition to any training required by law, the following persons shall complete one of the head injury safety training programs approved by the Massachusetts Department of Public Health (DPH) as found on its website: coaches; certified athletic trainers; trainers; volunteers; school and team physicians; school nurses; athletic directors; directors responsible for a school marching band; employees or volunteers; and students who participate in an extracurricular activity and their parents.

Upon the adoption of this policy by the School Committee, the Superintendent shall ensure that DPH receives an affirmation on school district letterhead that the district has developed policies and the School Committee has adopted a final policy in accordance with law. This affirmation shall be updated by September 30, 2013 and every two (2) years thereafter upon review or revision of its policies.

The Superintendent shall maintain or cause to be maintained complete and accurate records of the district's compliance with the requirements of the Concussion Law, and shall maintain the following records for three years or, at a minimum, until the student graduates, unless state or federal law requires a longer retention period:

1. Verifications of completion of annual training and receipt of materials;
2. DPH Pre-participation forms and receipt of materials;
3. DPH Report of Head Injury Forms, or school based equivalents;
4. DPH Medical Clearance and Authorization Forms, or school based equivalents; and
5. Graduated reentry plans for return to full academic and extracurricular athletic activities.

This policy also applies to volunteers who assist with extracurricular athletic activities. Such volunteers shall not be liable for civil damages arising out of any act or omission relating to the requirements of law, unless such volunteer is willfully or intentionally negligent in his act or omission.

Most student athletes who sustain a concussion can fully recover as long as their brain has time to heal before sustaining another hit; however, relying only on an athlete's self-report of symptoms to determine injury recovery is inadequate as many high school athletes are not aware of the signs and symptoms or the severity concussive injuries pose, or they may feel pressure from coaches, parents, and/or teammates

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<sup>1</sup> Extracurricular Athletic Activity means an organized school sponsored athletic activity generally occurring outside of school instructional hours under the direction of a coach, athletic director or marching band leader including, but not limited to, Alpine and Nordic skiing and snowboarding, baseball, basketball, cheer leading, cross country track, fencing, field hockey, football, golf, gymnastics, horseback riding, ice hockey, lacrosse, marching band, rifle, rugby, soccer, skating, softball, squash, swimming and diving, tennis, track (indoor and outdoor), ultimate frisbee, volleyball, water polo, and wrestling. All interscholastic athletics are deemed to be extracurricular athletic activities.



to return to play as quickly as possible. One or more of these factors will likely result in under- diagnosing the injury and a premature return to play. Massachusetts General Laws and Department of Public Health regulations make it imperative to accurately assess and treat student athletes when concussions are suspected.

Student athletes who receive concussions may appear to be “fine” on the outside, when in actuality they have a brain injury and are not able to return to play. Incurring a second concussion can prove to be devastating to a student athlete. Research has shown that young concussed athletes who return to play before their brain has healed are highly vulnerable to more prolonged post-concussion syndrome or, in rare cases, a catastrophic neurological injury known as Second Impact Syndrome.

The following protocol will discuss and outline what a concussion is, the mechanism of injury, signs and symptoms, management and return to play requirements, as well as information on Second Impact Syndrome and past concussion syndrome. Lastly, this policy will discuss the importance of education for our athletes, coaches and parents and other persons required by law.

This protocol should be reviewed on a yearly basis with all staff to discuss the procedures to be followed to manage sports-related concussions. This protocol will also be reviewed on a yearly basis by the athletic department as well as by nursing staff. Any changes in this document will be approved by the school committee and given to athletic staff, including coaches and other school personnel in writing. An accurate synopsis of this policy shall be placed in the student and faculty handbooks.

SOURCE MASC  
LEGAL REF M.G.L. [111:222](#) [105 CMR 201.000](#)

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DATES December 2011  
Adopted: June 13, 2018, Effective: July 1, 2018



## ATHLETIC CONCUSSION REGULATIONS

### Section I. What is a Concussion?

A concussion is defined as a transient alteration in brain function without structural damage, but with other potentially serious long-term ramifications. In the event of a concussion, the brain sustains damage at a microscopic level in which cells and cell membranes are torn and stretched. The damage to these cells also disrupts the brain at a chemical level, as well as causing restricted blood flow to the damaged areas of the brain, thereby disrupting brain function. A concussion, therefore, is a disruption in how the brain works; it is not a structural injury. Concussions are difficult to diagnose because the damage cannot be seen. A MRI or CT Scan cannot diagnose a concussion, but they can help rule out a more serious brain injury to a student athlete. Because concussions are difficult to detect, student athletes must obtain medical approval before returning to athletics following a concussion.

### Section II. Mechanism of Injury:

A concussion is caused by a bump, blow or jolt to the head or body. Any force that causes the brain to bounce around or twist within the skull can cause a concussion. A bump, blow or jolt to the head or body can be caused by either indirect or direct trauma. The two (2) direct mechanisms of injury are coup-type and contrecoup-type. Coup-type injury is when the head is stationary and struck by a moving object such as another player's helmet, a ball, or sport implement, causing brain injury at the location of impact. Contrecoup-type injury occurs when the head is moving and makes contact with an immovable or slowly moving object as a result of deceleration, causing brain injury away from the sight of impact. Indirect forces are transmitted through the spine and jaw or blows to the thorax that whip the head while the neck muscles are relaxed. Understanding the way in which an injury occurred is vital in understanding and having a watchful eye for athletes who may exhibit symptoms of a concussion so these student athletes can receive the appropriate care.

### Section III. Signs and Symptoms:

Signs (what you see):

- Confusion
- Forgets plays
- Unsure about game, score, opponent
- Altered coordination
- Balance problems
- Personality change



- Slow response to questions
- Forgets events prior to injury (retrograde amnesia)
- Forgets events after injury (anterograde amnesia)
- Loss of consciousness (any duration)

Symptoms (reported by athlete):

- Headache
- Fatigue
- Nausea or vomiting
- Double vision/ blurry vision
- Sensitivity to light (photophobia)
- Sensitivity to noise (tinnitus)
- Feels sluggish
- Feels foggy
- Problems concentrating
- Problems remembering
- Trouble with sleeping/ excess sleep
- Dizziness
- Sadness
- Seeing stars
- Vacant stare/ glassy eyed
- Nervousness
- Irritability
- Inappropriate emotions

If any of the above signs or symptoms are observed after a suspected blow to the head, jaw, spine or body, they may be indicative of a concussion and the student athlete must be removed from play immediately and not allowed to return until cleared by an appropriate allied health professional.

Section IV. Management and Referral Guidelines:

1. When an athlete loses consciousness for any reason, the athletic trainer will start the EAP (Emergency Action Plan) by activating EMS; check ABC's (airway, breathing, circulation); stabilize the cervical spine; and transport the injured athlete to the appropriate hospital via ambulance. If the athletic trainer is not available, the coach should immediately call EMS, check



ABCs and not move the athlete until help arrives.

2. Any athlete who is removed from the competition or event and begins to develop signs and symptoms of a worsening brain injury will be transported to the hospital immediately in accordance with the EAP. Worsening signs and symptoms requiring immediate physician referral include:
  - A. Amnesia lasting longer than 15 minutes
  - B. Deterioration in neurological function
  - C. Decreasing level of consciousness
  - D. Decrease or irregularity of respiration
  - E. Decrease or irregularity in pulse
  - F. Increase in blood pressure
  - G. Unequal, dilated, or unreactive pupils
  - H. Cranial nerve deficits
  - I. Any signs or symptoms of associated injuries, spine or skull fracture, or bleeding
  - J. Mental-status changes: lethargy, difficulty maintaining arousal, confusion, agitation
  - K. Seizure activity
  - L. Vomiting/ worsening headache
  - M. Motor deficits subsequent to initial on-field assessment
  - N. Sensory deficits subsequent to initial on-field assessment
  - O. Balance deficits subsequent to initial on-field assessment
  - P. Cranial nerve deficits subsequent to initial on-field assessment
  - Q. Post-Concussion symptoms worsen
  - R. Athlete is still symptomatic at the end of the game
  
3. After a student athlete sustains a concussion, the athletic trainer will use the Standardized Assessment for Concussion (SAC) to assess and document the student athlete's concussion. The athletic trainer will also report on the student athlete's signs and symptoms by using the Signs and Symptoms Check-List. On the signs and symptoms checklist, the athletic trainer will also check pulse and blood pressure of each student athlete with a suspected concussion. After the initial evaluation of a concussion, all signs and symptoms will be tracked on the computer using the ImPact Test.
  
4. Any athlete who is symptomatic but stable is allowed to go home with his/her parent(s)/guardian(s) following the head injury.
  - A. If the head injury occurs at practice, parent(s)/guardian(s) will immediately be notified and must come and pick up the student athlete and talk to the certified athletic trainer in person.
  - B. If the injury occurs at a game or event, the student athlete may go home with the parent/guardian(s) after talking with the certified athletic trainer.



- C. Parent(s)/guardian(s) will receive important information regarding signs and symptoms of deteriorating brain injury/function prompting immediate referral to a local emergency room as well as return to play requirements. Parent(s)/guardian(s), as well as student athletes, must read and sign the Concussion Information and Gradual Return to Play form and bring it back to the certified athletic trainer before starting with the return to play protocol.

#### V. Gradual Return to Play Protocol:

1. Student athletes, with the consent of their parent(s)/guardian(s), will start taking the ImPact Test (or other approved test identified by the School District). The ImPact Test is a tool that helps manage concussions, determine recovery from injury, and is helpful in providing proper communication between coaches, parents and clinicians. The ImPact Test is a neurocognitive test that helps measure student athletes' symptoms, as well as test verbal and visual memory, processing speed and reaction time. It is mandatory for all student athletes to take the ImPact Test for a baseline score in accordance with Massachusetts State Law. The law states that all

public schools must develop safety protocols on concussions and all public schools must receive information on past concussion history. The ImPact Test appears to be a promising tool in monitoring a student athlete's prior concussions, as well as any future concussions.

2. Each student athlete will complete a baseline test at the beginning of their sport season. All student athletes and club cheerleading members will undergo ImPact testing. Student athletes will be re-tested every other year. If a student athlete plays more than one sport during the academic year, their test will remain valid. For example, if a soccer student athlete also plays basketball in the winter, the student athlete will not have to take the ImPact Baseline Test again in the winter. If a student athlete posts scores below the norm, the student athlete will be re-tested at another time with either the certified athletic trainer or school nurse. Student athletes cannot begin practice until a valid baseline score is obtained during their designated time to take the test.
  - A. At the beginning of every sport season, student athletes are required to complete a concussion history form and return it to the athletic department. This information will be recorded in the student information system for tracking purposes.
  - B. Following any concussion the athletic trainer must notify the athletic director and school nurses.
  - C. Following a concussion the student athlete will take a post-injury test within 24 to 48 hours following the head injury. STUDENT ATHLETES WILL NOT BE ALLOWED TO MOVE ON TO FUNCTIONAL/PHYSICAL TESTING UNTIL THEIR IMPACT TEST IS BACK TO THE BASELINE SCORE AND ASYMPTOMATIC. After a student athlete takes their first post-injury test, the student athlete will not be re-tested again for five (5) days.
  - D. If, after the first post-injury ImPact test, the athlete is not back to his/her baseline the



- parent/guardian(s) will be notified, and the student athlete will be referred to their healthcare provider and must have the Concussion Information and Gradual Return to Play form signed by a physician, physician assistant, licensed neuropsychologist or nurse practitioner stating when the athlete is allowed to return to play.
- E. Following a post-injury test, the certified athletic trainer will take the Concussion Information and Gradual Return to Play form signed by the parent(s)/guardian(s) and fill in the date of all post-injury tests taken by each student athlete.
  - F. The certified athletic trainer will also document the date on which the athlete is asymptomatic and sign the document agreeing that all the above statements are true and accurate.
  - G. Once the athlete starts on the exertional post-concussion tests, the parent(s)/guardian(s) will be notified and the athlete will be sent home with all signed documents relating to head injury. At this time the parent/guardian(s) must bring the student athlete to a licensed physician, licensed neuropsychologist, licensed physician assistant, nurse practitioner or other appropriately trained or licensed healthcare professional to be medically cleared for participation in the extracurricular activity.
  - H. Student athletes who continue to exhibit concussion symptoms for a week or more must be evaluated by a physician before returning to play.
  - I. Once a student athlete's post-injury test is back at the student athlete's baseline score, the student athlete will go through 5 days of Exertional Post-Concussion Tests. The student athlete must be asymptomatic for all functional and physical tests to return to play (RTP). All tests will be administered by a certified athletic trainer.

#### Exertional Post-Concussion Tests:

- A. Test 1: (30% to 40% maximum exertion): Low levels of light physical activity. This will include walking, light stationary bike for about ten (10) to fifteen (15) minutes. Light isometric strengthening (quad sets, UE light hand weights, ham sets, SLR's, resistive band ankle strengthening) and stretching exercises.
- B. Test 2: (40% to 60% maximum exertion): Moderate levels of physical activity. Treadmill jogging, stationary bike, or elliptical for twenty (20) to twenty five (25) minutes. Light weight strength exercises (resistive band exercises UE and LE, wall squats, lunges, step up/downs. More active and dynamic stretching.
- C. Test 3: (60% to 80% maximum exertion). Non-contact sports specific drills. Running, high intensity stationary bike or elliptical twenty five (25) to thirty (30) minutes. Completing regular weight training. Start agility drills (ladder, side shuffle, zig-zags, carioca, box jumps, and hurdles).
- D. Test 4: (80% maximum exertion). Limited, controlled sports specific practice and drills.
- E. Test 5: Full contact and return to sport with monitoring of symptoms.



Section VI. School Nurse Responsibilities:

1. Assist in testing all student athletes with baseline and post-injury ImPact testing.
2. Participate and complete the CDC training course on concussions. A certificate of completion will be recorded by the nurse leader yearly.
3. Complete symptom assessment when student athlete enters Health Office (HO) with questionable concussion during school hours. Repeat in fifteen (15) minutes.
4. Observe students with a concussion for a minimum of thirty (30) minutes.
5. If symptoms are present, notify parent/guardian(s) and instruct parent/guardian(s) that student must be evaluated by an MD.
  - (a) If symptoms are not present, the student may return to class.
6. If symptoms appear after a negative assessment, MD referral is necessary.
7. Allow students who are in recovery to rest in HO when needed.
8. Develop plan for students regarding pain management.
9. School nurse will notify teachers and guidance counselors of any students or student athletes who have academic restrictions or modifications related to their concussion.
10. Educate parents and teachers about the effects of concussion and returning to school and activity.
11. If injury occurs during the school day, inform administrator and complete accident/incident form.
12. Enter physical exam dates and concussion dates into the student information system.

Section VII. School Responsibilities:

1. Review and, if necessary, revise, the concussion policy every two (2) years.
2. Once the school is informed of the student's concussion, a contact or "point person" should be identified (e.g., the guidance counselor, athletic director, school nurse, school psychologist, or teacher).
3. Point person to work with the student on organizing work assignments, making up work and giving extra time for assignments and tests/quizzes.
4. Assist teachers in following the recovery stage for student.
5. Convene meeting and develop rehabilitative plan.
6. Decrease workload if symptoms appear.
7. Recognize that the student's ability to perform complex math equations may be different from the ability to write a composition depending on the location of the concussion in the brain.
8. Educate staff on the signs and symptoms of concussions and the educational impact concussions may have on students.
9. Include concussion information in student handbooks.
10. Develop a plan to communicate and provide language-appropriate educational materials to parents with limited English proficiency.



Section VIII. Athletic Director Responsibilities:

1. Provide parents, athletes, coaches, and volunteers with educational training and concussion materials yearly.
2. Ensure that all educational training programs are completed and recorded.
3. Ensure that all students meet the physical exam requirements consistent with 105 CMR 200.000 prior to participation in any extracurricular athletic activity
4. Ensure that all students participating in extracurricular athletic activity have completed and submitted their pre-participation forms, which include health history form, concussion history form, and MIAA form.
5. Ensure that athletes are prohibited from engaging in any unreasonably dangerous athletic technique that endangers the health or safety of an athlete, including using a helmet or any other sports equipment as a weapon.
6. Ensure that all head injury forms are completed by parent/guardian(s) or coaches and reviewed by the coach, athletic trainer, school nurse, and school physician.
7. Inform parent/guardian(s) that, if all necessary forms are not completed, their child will not participate in athletic extracurricular activities.

Section IX. Parent/Guardian Responsibilities:

1. Complete and return concussion history form to the athletic department.
2. Inform school if student sustains a concussion outside of school hours. Complete new concussion history form following new injury.
3. If student suffers a concussion outside of school, complete head injury form and return it to the school nurse.
4. Complete a training provided by the school on concussions and return certificate of completion to the athletic department.
5. Watch for changes in your child that may indicate that your child does have a concussion or that your child's concussion may be worsening. Report to a physician:
  - A. Loss of consciousness
  - B. Headache
  - C. Dizziness
  - D. Lethargy
  - E. Difficulty concentrating
  - F. Balance problems
  - G. Answering questions slowly
  - H. Difficulty recalling events
  - I. Repeating questions
  - J. Irritability
  - K. Sadness
  - L. Emotionality
  - M. Nervousness
  - N. Difficulty with sleeping



6. Encourage your child to follow concussion protocol.
7. Enforce restrictions on rest, electronics and screen time.
8. Reinforce recovery plan.
9. Request a contact person from the school with whom you may communicate about your child's progress and academic needs.
10. Observe and monitor your child for any physical or emotional changes.
11. Request to extend make up time for work if necessary.
12. Recognize that your child will be excluded from participation in any extracurricular athletic event if all forms are not completed and on file with the athletic department.

#### Section X. Student and Student Athlete Responsibilities:

1. Complete Baseline ImPact Test prior to participation in athletics.
2. Return required concussion history form prior to participation in athletics.
3. Participate in all concussion training and education and return certificate of completion to the athletic department prior to participation in athletics.
4. Report all symptoms to athletic trainer and/ or school nurse.
5. Follow recovery plan.
6. **REST.**
7. **NO ATHLETICS.**
8. **BE HONEST!**
9. Keep strict limits on screen time and electronics.
10. Don't carry books or backpacks that are too heavy.
11. Tell your teachers if you are having difficulty with your classwork.
12. See the athletic trainer and/or school nurse for pain management.
13. Return to sports only when cleared by physician and the athletic trainer.
14. Follow Gradual Return to Play Guidelines.
15. Report any symptoms to the athletic trainer and/or school nurse and parent(s)/guardian(s) if any occur after return to play.
16. Return medical clearance form to athletic trainer prior to return to play.
17. Students who do not complete and return all required trainings, testing and forms will not be allowed to participate in sports.

#### Section XI. Coach & Band Instructor Responsibilities:

1. Participate in Concussion Education Course offered by the National Federation of State High School Associations (NFHS) on a yearly basis. Complete certificate of completion and return to the athletic department.
2. Ensure all student athletes have completed ImPact baseline testing before participation.
3. Ensure all student athletes have returned concussion history and health history form prior to participation in athletics.



4. Complete a head injury form if their player suffers a head injury and the athletic trainer is not present at the athletic event. This form must be shared with the athletic trainer and school nurse.
5. Ensure all students have completed a concussion educational training and
6. Remove from play any student athlete who exhibits signs and symptoms of a concussion.
7. Do not allow student athletes to return to play until cleared by a physician and athletic trainer.
8. Follow Gradual Return to Play Guidelines.
9. Refer any student athlete with returned signs and symptoms back to athletic trainer.

Any coach, band instructor, or volunteer coach for extracurricular activities shall not encourage or permit a student participating in the activity to engage in any unreasonably dangerous athletic technique that unnecessarily endangers the health of a student athlete, including using a musical instrument, helmet or any other sports equipment as a weapon.

### Section XII. Post-Concussion Syndrome:

Post-Concussion Syndrome is a poorly understood condition that occurs after a student athlete receives a concussion. Student athletes who receive concussions can have symptoms that last a few days to a few months, and even up to a full year, until their neurocognitive function returns to normal. Therefore, all school personnel must pay attention to and closely observe all student athletes for post-concussion syndrome and its symptoms. Student athletes who are still suffering from concussion symptoms are not ready to return to play. The signs and symptoms of post-concussion syndrome are:

- Dizziness
- Headache with exertion
- Tinnitus (ringing in the ears)
- Fatigue
- Irritability
- Frustration
- Difficulty in coping with daily stress
- Impaired memory or concentration
- Eating and sleeping disorders
- Behavioral changes
- Alcohol intolerance
- Decreases in academic performance
- Depression
- Visual disturbances



### Section XIII. Second Impact Syndrome:

Second impact syndrome is a serious medical emergency and a result of an athlete returning to play and competition too soon following a concussion. Second impact syndrome occurs because of rapid brain swelling and herniation of the brain after a second head injury that occurs before the symptoms of a previous head injury have been resolved. The second impact that a student athlete may receive may only be a minor blow to the head or it may not even involve a hit to the head. A blow to the chest or back may create enough force to snap the athlete's head and send acceleration/deceleration forces to an already compromised brain. The resulting symptoms occur because of a disruption of the brain's blood auto-regulatory system which leads to swelling of the brain, increasing intracranial pressure and herniation.

After a second impact a student athlete usually does not become unconscious, but appears to be dazed. The student athlete may remain standing and be able to leave the field under his/her own power. Within fifteen seconds to several minutes, the athlete's condition worsens rapidly, with dilated pupils, loss of eye movement, loss of consciousness leading to coma and respiratory failure. The best way to handle second impact syndrome is to prevent it from occurring altogether. All student athletes who incur a concussion must not return to play until they are asymptomatic and cleared by an appropriate health care professional.

### Section XIV. Concussion Education:

It is extremely important to educate coaches, athletes and the community about concussions. On a yearly basis, all coaches must complete the online course called "Concussion In Sports: What You Need to Know". This course is offered by the National Federation of State High School Associations (NFHS). Student athletes also need to understand the importance of reporting a concussion to their coaches, parents, athletic trainer and other school personnel. Every year student athletes and parents will participate in educational training on concussions and complete a certificate of completion. This training may include:

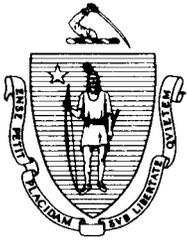
- CDC Heads-Up Video Training, or
- Training provided by the school

The school district may also offer seminars, speakers, and discussion panels on the topic of concussions. Seminars offer an opportunity for the certified athletic trainer, athletic director and



nurse leader to speak about concussions on the field at practices and games and to discuss the protocol and policy that the district has enacted. Providing education within the community will offer the residents and parents of athletes an opportunity to ask questions and voice their concerns on the topic of brain injury and concussions. When it comes to concussions, everyone needs to be aware of the potential dangers and remember that a concussion is a brain injury. Whenever anyone has a doubt about a student athlete with a concussion, SIT THEM OUT and have them see the appropriate healthcare professional!

SOURCE	MASC
LEGAL REF	-
CROSS REF	- CONTRACT REF -
DATES	December 2011
	Adopted: June 13, 2018, Effective: July 1, 2018



The Commonwealth of Massachusetts  
 Executive Office of Health and Human Services  
 Department of Public Health  
 250 Washington Street, Boston, MA 02108-4619

CHARLES D. BAKER  
 Governor

KARYN E. POLITO  
 Lieutenant Governor

MARYLOU SUDDERS  
 Secretary

MONICA BHAREL, MD, MPH  
 Commissioner

**PRE-PARTICIPATION HEAD  
 INJURY/CONCUSSION REPORTING FORM  
 FOR EXTRACURRICULAR ACTIVITIES**

This form should be completed by the student's parent(s) or legal guardian(s). It must be submitted to the Athletic Director, or official designated by the school, *prior* to the start of each season a student plans to participate in an extracurricular athletic activity.

Student's Name	Sex	Date of Birth	Grade
School		Sport(s)	
Home Address			Telephone

Has student ever experienced a traumatic head injury (a blow to the head)? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, when? Dates (month/year): \_\_\_\_\_

Has student ever received medical attention for a head injury? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, when? Dates (month/year): \_\_\_\_\_

If yes, please describe the circumstances:

Was student diagnosed with a concussion? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, when? Dates (month/year): \_\_\_\_\_

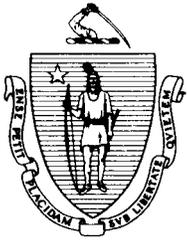
Duration of Symptoms (such as *headache, difficulty concentrating, fatigue*) for most recent concussion: \_\_\_\_\_

Parent/Guardian:

Name: \_\_\_\_\_ Signature/Date \_\_\_\_\_  
 (Please print)

Student Athlete:

Signature/Date \_\_\_\_\_



The Commonwealth of Massachusetts  
 Executive Office of Health and Human Services  
 Department of Public Health  
 250 Washington Street, Boston, MA 02108-4619

CHARLES D. BAKER  
 Governor

KARYN E. POLITO  
 Lieutenant Governor

MARYLOU SUDDERS  
 Secretary

MONICA BHAREL, MD, MPH  
 Commissioner

**REPORT OF HEAD INJURY DURING  
 SPORTS SEASON**

This form is to report head injuries (other than minor cuts or bruises) that occur during a sports season. It should be returned to the athletic director or staff member designated by the school and reviewed by the school nurse.

**For Coaches:** Please complete this form immediately after the game or practice for head injuries that result in the student being removed from play due to a *possible* concussion.

**For Parents/Guardians:** Please complete this form if your child has a head injury outside of school related extracurricular athletic activities.

Student's Name	Sex	Date of Birth	Grade
School		Sport(s)	
Home Address			Telephone

Date of injury: \_\_\_\_\_

Did the incident take place during an extracurricular activity? \_\_\_\_ Yes \_\_\_\_ No

If so, where did the incident take place? \_\_\_\_\_

Please describe nature and extent of injuries to student:

**For Parents/Guardians:**

Did the student receive medical attention? yes \_\_\_\_ no \_\_\_\_

If yes, was a concussion diagnosed? yes \_\_\_\_ no \_\_\_\_

**I HEREBY STATE THAT TO THE BEST OF MY KNOWLEDGE, MY ANSWERS TO THE ABOVE QUESTIONS ARE COMPLETE AND CORRECT.**

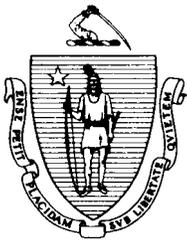
Please circle one: Coach or Marching Band Director

Parent/Guardian

Name of Person Completing Form (please print): \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_



The Commonwealth of Massachusetts  
 Executive Office of Health and Human Services  
 Department of Public Health

**POST SPORTS-RELATED HEAD INJURY  
 MEDICAL CLEARANCE AND  
 AUTHORIZATION FORM**

*The student must be completely symptom free at rest, during exertion, and with cognitive activity prior to returning to full participation in extracurricular athletic activities. Do not complete this form until a graduated return to play plan has been completed and the student is found to be symptom free at rest, during exertion and with cognitive activity.*

Student's Name	Sex	Date of Birth	Grade
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Date of injury: \_\_\_\_\_ Nature and extent of injury: \_\_\_\_\_

Symptoms following injury (check all that apply):

- Nausea or vomiting
- Headaches
- Light/noise sensitivity
- Dizziness/balance problems
- Double/blurred vision
- Fatigue
- Feeling sluggish/"in a fog"
- Change in sleep patterns
- Memory problems
- Difficulty concentrating
- Irritability/emotional ups and downs
- Sad or withdrawn
- Other

Duration of Symptom(s): \_\_\_\_\_ Diagnosis:  Concussion  Other: \_\_\_\_\_

If concussion diagnosed, date student completed graduated return to play plan without recurrent symptoms: \_\_\_\_\_

Prior concussions (number, approximate dates): \_\_\_\_\_

**I HEREBY AUTHORIZE THE ABOVE NAMED STUDENT FOR RETURN TO EXTRACURRICULAR ATHLETIC ACTIVITY**

Practitioner signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Physician  Licensed Athletic Trainer  Nurse Practitioner  Neuropsychologist  Physician Assistant

License Number: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Name of Physician providing consultation/coordination/supervision (if not person completing this form; please print): \_\_\_\_\_

**I ATTEST THAT I HAVE RECEIVED CLINICAL TRAINING IN POST-TRAUMATIC HEAD INJURY ASSESSMENT AND MANAGEMENT APPROVED BY THE DEPARTMENT OF PUBLIC HEALTH\* OR HAVE RECEIVED EQUIVALENT TRAINING AS PART OF MY LICENSURE OR CONTINUING EDUCATION.**

Practitioner's initials: \_\_\_\_\_

Type of Training:  CDC on-line clinician training  Other MDPH approved Clinical Training  Other

(Describe) \_\_\_\_\_

\* MDPH approved Clinical Training options can be found at: [www.mass.gov/dph/sports concussion](http://www.mass.gov/dph/sports concussion)

This form is not complete without the practitioner's verification of such training.