#### PARENT ATHLETIC HANDBOOK

The Kansas City Kansas Public School District Athletic Programs are a significant and dynamic part of the total educational experience available to students. These programs enhance learning in the school and contribute to a positive school climate. Participation in Athletics is strongly encouraged because of the 10 Life Lessons it teaches:

- Responsibility
- Work Ethic
- Cooperation
- Integrity
- Adaptability/Problem Solving
- · Competitive Spirit/Strategic Thinking
- Respect
- Self-Control
- · Confidence
- · Fitness

The purpose of this handbook is to identify athletic guidelines and expectations for student athletes and their parents who are participating in KCKPS Athletics. We hope by providing this resource and connecting with you at our Parent Meeting we will establish the necessary relationships between our Administrators, Athletic Personnel and Parents to successfully build the respect, trust and cooperation that is necessary for our student athletes to have a meaningful athletic experience.

This handbook is meant for you to keep along with other handouts that will be shared with you at the Parent Meeting.

We appreciate your support and time and look forward to the season ahead!

#### Tammie Romstad

District Athletic Director ~ Kansas City Kansas Public Schools

#### Schlagle High School

2214 N 59<sup>th</sup> St

Kansas City, Kansas 66104 Main Office Telephone - (913) 627-7500 Main Office Fax - (913) 627-7555

#### ATHLETIC CONTACTS

Athletic Director: Randy Stout randy.stout@kckps.org

Principal: Yolanda Thompson yolanda.thompson@kckps.org

**District Athletic Director:** Tammie Romstad tammie.romstad@kckps.org

Athletic Secretary: Amy Stovall amy.stovall@kckps.org

Athletic Trainer: Durell "Menta" Nyaega dmnyaega@cmh.edu

#### **MEDIA LINKS**

Athletic Webpage: https://flschlaglehs.rschoolteams.com/

Social Media Links: Twitter: @SchlagleAD

@schlaglemedia

Instagram: schlagleathletics

Facebook: F.L. Schlagle High School

Schlagle Athletics

#### **National Governing Bodies**

Kansas High School Activities Association: kshsaa.org

National Federation of High Schools: nfhslearn.com

NCAA Eligibility Center: ncaa.org

#### ATHLETIC GUIDELINES

#### **Participation Packet**

#### **Attention Parents and Students:**

- All **8** forms must be completed with signatures from both the parent and student and dated prior to being allowed to participate.
- Return the packets in its entirety to your school athletic director.
- Make a hard copy of your signed/dated packet for your own records.

Below is a list of the documents included in the Participation Packet. Please use this checklist before returning the packet to your school athletic director.

#### Checklist:

**KCKPS Curricular Activities Participation Agreement** 

**KCKPS Student Testing and Consent Form** 

**USD 500 Activity Consent Form** 

**Parental Insurance Information and Waiver** 

**KSHSAA Pre-Participation Physical Form** 

KSHSAA Student-Athlete Pre-Participation COVID 19 Questionnaire

KSHSAA Concussions and Head Injury form

Children's Mercy Consent Form for Treatment while participating in sports

For additional information or to receive a packet contact your school Athletic Director.

#### **Athletic Physicals**

Free Physicals are available to Middle School and High School students at the Welcome Back to School event held in August (2023 date to be determined). High School athletes can receive free physicals through Children's Mercy twice a year (next one is 11/16/22). Contact your school athletic director for more information and a participation packet - which must be signed in advance prior to getting a Physical appointment time.

Note: Wyandotte athletes only receive physicals through the campus Bull Dog Station.

#### **Athletic Transportation**

#### Competition/Games

Coaches will require students to travel in District provided transportation with their teams and coaches to and from competitions. Athletic Director or Principal can allow a student to drive to an event if the proper parental form is signed and turned in to the office in advance. Coaches/Sponsors are responsible for all student athletes until they bring them back to school to ride home.

In the rare event a student athlete needs to ride home with the Parents from an away game they must notify an Administrator in person for approval and sign off.

Parents should notify the Coach and Athletic Director at least 24 hours in advance if a student will be riding home with them for non-athletic reasons. Students may only ride home with Parents as documented in Infinite Campus.

#### **Practice**

Students may only drive to practices off school grounds when their parent or guardian have given authorization in writing on a district approved form. In addition:

- No student will be permitted to drive a personal automobile to a district-sponsored activity that is more than 30 miles from the student's school.
- No student may transport another student to any district sponsored activity.

#### **KSHSAA & District Eligibility**

KCKPS District Eligibility will follow KSHSAA athletic guidelines. Each student must have passed 5 classes (or its equivalent) the previous semester and be currently enrolled in five new classes (or its equivalent). If a student becomes ineligible at semester they must sit out the next semester.

During the school year the Athletic Director will pull grades each week from Infinite Campus and provide Coaches with a list of students on their team with F's. Those students will be required to set up tutoring the following week during or after school with their teacher. The teacher will provide a pass for their Coach which will allow them to practice. If students do not attend tutoring or show academic progress the Athletic Director/Principal may hold them out of practice/competition until academic progress is made.

#### **Athletic Trainers**

Each of our high schools has a certified Athletic Trainer through Children's Mercy. They are responsible for monitoring the health and safety of our high school student athletes in conjunction with our athletic staff. If an athlete needs to see a physician they must bring back a medical release before they can return to practice or competition.

#### **Athletic Varsity Letter**

Varsity Letters will be earned by playing in at least half of the total number of competitions. Each school will provide an Awards Recognition Ceremony at the completion of each Fall, Winter and Spring season. Additional awards to be given are:

First year: Sports pin and certificate (managers receive a pin)

Varsity Letter & Bar: Played in half of the varsity competitions

Subsequent years: V bar for each varsity season

Postseason Patches: Regional, District or Sub State Champions & State Champions

Graduation Year number for jacket their Senior Year

Letter jackets can be purchased at the families expense through Varsity Sports or Jostens.

#### **School Cancellation of Activities**

Final decisions on canceling school activities will be made at the district level. If school is canceled, all activities (elementary, middle and high school) will be canceled for the day. This includes out-of-district activities. Notification of canceled events will be communicated to students and parents by building administrators, coaches and sponsors. The district will also send notifications via electronic media outlets & school athletic webpage.

#### KSHSAA Guidelines

#### Age Requirements

A student who reaches nineteen years of age on or before September 1<sup>st</sup> will be ineligible for athletics. Any student who reaches nineteen years of age after September 1<sup>st</sup> will be eligible for the remainder of the school year.

#### **Outside Competition**

An athlete who is a member of an athletic squad cannot participate as a member of an outside team or as an independent competitor in the same sport during the season. Please note that a student becomes a member of a school athletic squad when he or she first participates in a practice session. They cease to be a member of an athletic squad after his or her last contest or when the membership on a squad is terminated.

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<sup>\*</sup>Activity Letters are awarded as well. See sponsor for requirements.

#### **Bona Fide Student**

Participation in athletics is a privilege and differs from a student's right to a high school general education. Rules and regulations governing each of the various athletic programs have been established to ensure fairness to all students and to assure that the school image resulting from the students who represent their school is a positive one. **KSHSAA Rule 14 - Art. 2:** A student who is under penalty of suspension or whose character or conduct brings discredit to the school or to the student, as determined by the principal, is not in good standing and is ineligible for a period of time as specified by the principal.

#### Transfer

The purpose of the Transfer Rule is to protect students from being displaced by those who change schools for interscholastic activity reasons. It is devised to eliminate "school shopping" after a student has initially chosen the school of his/her choice. This avoids transfers when the motivation is for activity purposes and prohibits recruitment. Students transferring who do not meet the criteria will be **ineligible for all activities for one calendar year** in grades 9-12 and 18 weeks in grades 7 & 8. Contact athletic director/principal prior to transferring.

#### Undue Influence

Undue Influence Rule states: "The enrollment in a school, the transfer from one school to another, or the failure to transfer from one school to another because of undue influence by anyone connected, directly or indirectly (including alumni associations, booster groups and similar organizations) with a member school, shall cause the student to forfeit eligibility for a period not to exceed 365 days. Such conduct shall also jeopardize the school's standing in the Association and shall result in such other action as the Executive Board deems appropriate."

#### **Rules Governing Individual Sports**

Please note that each individual sport has its own specific rules and guidelines. Please ask your coach to gain familiarity with these regulations.

From the first Tuesday following Labor Day through the last Friday preceding Memorial Day, there are limitations on the number of athletes from the same school squad that may practice or participate together on the same outside team. A player is considered to be a part of a certain school athletic team if he/she enters into a game for any length of time. It is entirely possible, and quite probable, for a player to be a member of two or more squads in the same sport (i.e., if an athlete plays on a junior varsity basketball team but suits up for and enters the last 30 seconds of a varsity contest, they will be considered both a varsity and junior varsity basketball player in the eyes of the state association.

KSHSAA Rules can be found at: https://kshsaa.org/Publications/Handbook

#### **Student Self-Transportation Consent and Release Form**

I/We hereby give my/our student

There are times during the school year when district sponsored activities will be held away from your student's school. Kansas City Kansas Public Schools Unified School District 500 provides transportation to and from the school to district sponsored activities. The district does not permit students participating in district sponsored activities to transport themselves to or from district sponsored activities that are more than 30 miles from the student's school. The district also does not permit the students participating in district sponsored activities to transport other students to any district sponsored activity. A student who transports themselves may not be eligible for insurance coverage provided by the Kansas State High School Activities Association (KSHSAA) or the school district.

P	rint Full Name	
permission to drive to and from district sponsored act Kansas City Kansas Public Schools Unified School D supervise my student when they are driving or operat therefore not responsible for any damage, loss or inju- student is traveling to or from a district sponsored act	istrict 500 employees cannot ing their personal vehicle and iry that may occur when my/our	
By signing this form, I/We verify that my student has a vehicle my student is operating is licensed and insure State of Kansas. My/Our student agrees to abide by a operation of a motor vehicle when traveling to or from	d as required by the laws of the all applicable laws concerning the	
I/We further agree to knowingly and voluntarily release, indemnify, hold harmless and forever discharge Kansas City Kansas Public Schools Unified School District 500, and its officers, employees, insurers and agents from any liability for any accident, injury, loss, damage, expenses, illness, death or other claim, sustained or caused, directly or indirectly, by the above student in connection with or while driving to or from a district sponsored activity.		
Parents have the responsibility to ensure their student authorized by the parent.	t uses the mode of transportation	
Parent/Guardian Signature:	Date:	
Print Name:	-	
Address:		
Phone: (H)Phone: (W)	Phone: (C)	
Student Signature:	Date:	

### A PARENT'S RIGHTS

#### A HEALTHY ATHLETIC LEARNING ENVIRONMENT

- Parents have the right to know their child will be safe, both physically and emotionally
- Parents have the right to know that their child will be treated fairly regardless
  of race, creed, national origin, economic status, gender or age and that
  each child will be treated as an individual
  - Parents have the right to know that the staff is experienced and/or trained
    - Parents have the right to know that any negative or cruel behavior (bullying) among students or between students and staff will not be tolerated

#### CLEAR, COURTEOUS COMMUNICATION

- Parents have the right to be treated with courtesy by all members of the coaching staff
- Parents have the right to participate in meaningful parent-coach communication
  - Parents have the right to a pre-season Parent Meeting
  - Parents have the right to know that they can approach a member of the athletic staff (appropriate time and place) with a concern that the staff member will listen carefully and will do everything possible to address the issue
    - Parents have the right to information on team requirements and expectations for the program
  - Parents have the right to be informed of the game and practice schedule and schedule changes as soon as they happen
  - Parents have the right to evaluate the program at the end of the season

#### PARENT PORTRAIT & COMMITMENT

- Be a Supporter in Words and Action
  - Communicate Appropriately
    - Respect Scheduling
- Utilize the School Athletic Website
- Respect Coaching Staff & Administration
  - Volunteer Support
- Engage in Responsible Digital Citizenship

#### Parent Handbook Acknowledgement Form & Sportsmanship Expectations

There are times when parents can become quite vocal at events and be loudly critical of both game officials and opposing players and teams. This type of negative behavior is counterproductive to what schools are trying to promote. It creates an uncomfortable environment for the other fans that came to support their team and wish to enjoy the game. This behavior can be an embarrassment to the school and the young people that are involved in the activity.

The Definition of Sportsmanship is Character Displayed in athletic competition. Read and initial each character trait or code of conduct expectation for High School Athletic Events. Failing to follow the Parent Code of Conduct could result in immediate suspension from District Events.

<b>RESPONSIBILITY:</b> Be a positive role model on and off the field and enhance personal success and social responsibility. Maintain competence and the calls of the officials.					
<b>FAIRNESS:</b> Adhere to high standards of fair play. Treat teams fairly advantage. Be open-minded.	according to their abilities. Never take unfair				
<b>CARING</b> : Assure that the academic, emotional, physical and moral desires and pressures to win. Do not permit reckless or potentially unsafe					
CITIZENSHIP: Avoid gamesmanship and promote sportsmanship by Establish codes of conduct for your family and friends. Safeguard the healt prohibiting the use of alcohol, drugs and tobacco. Demand compliance with	h of athletes and the integrity of the sport by				
<b>TRUSTWORTHINESS:</b> Always pursue victory with honor. Demonstrathe spirit and letter of rules. Don't compromise education and character dedishonesty, cheating or dishonorable conduct.					
<b>RESPECT:</b> Treat the traditions of the sport and other participants with respect. Don't engage in or tolerate disrespectful conduct including verbal abuse of opponents and officials, profane or belligerent "trash-talking," taunting and unseemly celebrations. Win with grace and lose with dignity.					
I have read the Parent Handbook (date)/					
Parental Code of Conduct:					
$\underline{\hspace{1cm}}$ 1. I accept the responsibility and privilege of watching my child com	pete for our school and community.				
2. I will treat opponents with respect as they are our guests.					
3. I will exercise self-control at all times.	\				
4. Respect the judgment and strategy of the coach.					
5. I will accept both victory and defeat with compassion and pride.					
<ul> <li>6. I will accept and show respect for all Officials' calls.</li> <li>7. Help develop a community reputation for good sportsmanship.</li> <li>8. Give encouragement to athletic teams and recognition of good plays by everyone.</li> <li>9. Be a role model by being positive in every manner possible.</li> </ul>					
		10. Support those playing, coaching and officiating.			
		Signature of Parent	Date		
		Name of Child	Sport/Activity		

#### **ACADEMICS**

All student-athletes will be required to get weekly grade checks each week. Each school will have organized and planned study tables to aid in managing assigned homework or to get tutoring after school. Students with F's are required to attend tutoring inorder to continue practicing or competing. If academic progress is not being made then the athletic director/principal may suspend practice or games until F's have been raised to passing.

If a student athlete repeatedly fails to attend the tutoring or receive academic help they may be dropped from the team.

**NCAA.org** has multiple resources for students and parents if they plan on attending a Division I, II or III college after high school. All students who think they may want to compete as a college athlete should register with the NCAA Eligibility Center at the beginning of their sophomore year. This will keep them on track throughout high school to meet the requirements of core classes, GPA and ACT/SAT test scores.

Learning to balance academics, athletics, personal time and social media is necessary for any student athlete who thinks they want to play sports in college.

The District provides the opportunity to take the ACT paid for by KCKPS beginning the spring of a student's Junior year.

The recruiting process for college athletics will be guided by your registration into the NCAA Eligibility Center followed by your counselor downloading your transcripts each year along with your ACT/SAT scores. Without these you cannot take official visits to college campuses – which defines how serious a college coach is about recruiting you to play at the next level. Start your Freshman year taking core classes and maintaining at least a 2.5 GPA.

**NFHSlearn.com** has free tutorial help for students on their website through Learning Pro including:

Homework Helper, Reading and Learning Strategies, Research Skills, Testing Tips and NCAA Eligibility @https://nfhslearn.com/courses

#### PHYSICAL HEALTH

We are very fortunate to have certified Athletic Trainers through Children's Mercy. They are on our campuses every afternoon during practices and most varsity games. Children's Mercy provides two FREE High School Physical Events each year so that our student athletes can get updated current physicals which is a requirement to participate in KSHSAA sports. Information about FREE Physical Events can be found on each school's athletic website. The District hosts FREE Physicals at its Back to School Event in August - these free physicals are for all ages.

In addition – minor injuries that typically occur while practicing or competing can be assessed by the Athletic Trainers. If an injury is serious your Athletic Director/Coach will be notified and proper medical procedures will be discussed with both the student athlete and parents. In an emergency 911 will be called and the Head Coach or Athletic Director will notify parents and stay at the hospital until a parent/guardian has arrived. Anytime there is a hospital or doctor visit for an injury we must have a Doctor's release before returning to practice.

#### Additional links for Parents:

- The National Federation of High Schools (NFHS) has several parent courses which can be found at: nfhslearn com/courses
- KSHSAA.org has multiple health links to support Parents of athletes:
  - Public/SportsMedicine/SportsNutritionandWellness.cfm
  - Public/SportsMedicine/Skin-CommunicableDiseaseInformation.
     cfm
  - o Public/SportsMedicine/PDF/KSHSAAConcussionGuidelines.pdf
  - Public/PDF/Heat/HydrationInfoCurrent.pdf

National Federation of State High School Associations



### A PARENT'S / GUARDIAN'S GUIDE TO CONCUSSION

National Federation of State High School Associations (NFHS)

Sports Medicine Advisory Committee (SMAC)

what is a concussion:		
	A concussion is a traumatic brain injury that interferes with the normal function of the brain. Concussions were previously referred to as a "ding" or a "bell-ringer" but this undermines the seriousness of problem. Any suspected concussion must be taken very seriously. An athlete does not need to lose consciousness (be "knocked-out") to suffer a concussion. In fact, less than 5% of concussed athletes suffer a loss of consciousness.	

#### **Concussion Facts**

Structural injuries, like torn ligaments and broken bones, can be seen on an x-ray or on scans like an MRI. On the other hand, a concussion is a disruption of how the brain works, or its function, and not in
its structure. That is why CAT scans and MRIs are typically normal. The injury affects the way the brain works, not how it looks.
It is estimated that over 300,000 high school athletes across the United States suffer a concussion each year. (Data from the NFHS Injury Surveillance System, "High School RIO <sup>TM</sup> ")
Concussions can happen in any sport. While they are more common in sports that involve collisions, athletes in all sports are at risk for a concussion. When researchers looked at 14 different high school sports, they found that over two-thirds of concussions result from contact with another athlete and the second leading cause of concussion, is player-to-surface contact. This includes falling and hitting the ground.
An athlete may report many physical, behavioral, and cognitive symptoms. Physical symptoms include headaches, nausea, vomiting, dizziness, and sleep changes. Some behavioral changes include irritability, anxiety, and depression. Cognitive symptoms are changes in the way we think and include feeling sluggish, hazy, or foggy, difficulty concentrating or memory problems, and confusion.
Many symptoms appear immediately after the injury, while others may develop over the next several days. The symptoms can interfere with normal daily life in addition to difficulty with school, work, and social life.
Concussion symptoms may last from a few days to several months. It is important to remember that each student athlete responds and recovers differently.
Athletes should not return to sports or activities that will put them at risk for another head injury until the concussion has completely resolved. To do so puts them at risk for worsening and prolonged symptoms and a more severe injury. While rare, a repeat concussion can also result in severe swelling and bleeding in the brain. This condition can lead to death or permanent disability.

#### What should I do if I think my child has had a concussion?

If your child sustains a head injury, it is good to be aware of the signs and symptoms of a concussion. If you suspect an athlete has a concussion, the athlete must be immediately removed from activity. Continuing to participate in a contact or collision sport while experiencing concussion symptoms can lead to worsening of symptoms, increased risk for further injury and sometimes death.

Parents and coaches should not make the diagnosis of a concussion. Any athlete suspected of having a concussion should be evaluated by a medical professional trained in the diagnosis and management of concussions.

### When in doubt, sit them out!

All athletes who sustain a concussion need to be evaluated by an appropriate health-care professional who is experienced in concussion management. If your child's school has an athletic trainer (AT), please inform the AT of your concerns. You should also call your child's primary care provider and explain what has happened and follow the instructions you are given. Sometimes, an injury is more severe than it appears. If your child has persistent vomiting, a worsening headache, a seizure, or is acting differently, you should take your child to an emergency department for immediate attention.

#### What are the signs and symptoms of a concussion?

#### SIGNS OBSERVED BY PARENTS, ATHLETIC TRAINERS, FRIENDS, TEACHERS OR COACHES

- Dazed or stunned appearance.
- Confusion about assignment or position.
- Forgetfulness.
- Uncertainty of game, score, or opponent.
- Clumsy movements.
- Slow response to questions.
- Mood, behavior or personality changes.
- Can't recall events prior to or after hit or fall.

# SYMPTOMS REPORTED BY ATHLETE

- Headache or "pressure" in head.
- Nausea
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light or noise
- Feeling sluggish, hazy, foggy or groggy
- Concentration or memory problems
- Confusion
- "Not feeling right" or "feeling down"

#### How can a concussion affect schoolwork?

Following a concussion, many students have difficulty in school due to difficulties with short-term memory, concentration, and organization.

In many cases after the injury, it is best to decrease the athlete's class load early in the recovery phase. This may include staying home from school for no more than 1 or 2 days, followed by academic adjustments (such as a reduced class schedule), until the athlete has fully recovered. Decreasing the stress on the brain and not allowing the athlete to push through symptoms will shorten the recovery time and ensure total resolution of symptoms. The academic adjustments are best managed by a school concussion team. Speak with the school guidance counselor, school nurse, or athletic trainer to help with this process.

#### When can an athlete return to play following a concussion?

After suffering a concussion, or if you suspect an athlete has a concussion, no athlete should EVER return to play or practice on that same day.

Concerns over athletes returning to play too quickly led lawmakers in all 50 states and the District of Columbia to pass laws stating that **no player shall return to play the day of a concussion, and the athlete must be cleared by an appropriate health-care professional before being allowed to return to play in either games or practices.** Many of these laws require players, parents and coaches to receive education on the dangers of concussion in addition to recognizing the signs and symptoms of concussion. **Click here to see what your state law requires:** 

http://www.ucdenver.edu/academics/colleges/medicalschool/departments/pmr/documents/concussion\_t oolkit/laws/state.htm

Once an athlete no longer has symptoms of a concussion AND is cleared by an appropriate health-care professional to begin a return to play progression, the athlete must proceed with activity in a step-wise fashion in a carefully controlled and monitored environment to allow the brain and body to re-adjust to exertion. On average, the athlete will complete a new step every 24-48 hours. An example of a typical return-to-play schedule is shown below:

#### **Return to Play Progression:**

#### **Step 1: Back to Regular Activities**

To enter into the return to play protocol the athlete should first be back to regular activities (such as school) and has the cleared by their health-care professional to begin the return to play process. In most all cases, the athlete should have all concussion-related academic adjustments removed prior to beginning the Return to Play Program.

#### **Step 2: Light Aerobic Activity**

Begin with light aerobic exercise only to increase heart rate. This means about 5 to 10 minutes on an exercise bike, brisk walking, or light jogging. No anaerobic activity such as weight lifting should be done at this stage.

#### **Step 3: Moderate Activity**

Continue with activities that increase an athlete's heart rate while adding movement. This includes running and skating drills.

#### **Step 4: Non-Contact Training Activity**

Add sports specific, more intense, non-contact physical activity, such as such as passing in hockey, dribbling in basketball or soccer, high-intensity stationary biking, regular weightlifting routine.

#### **Step 5: Practice and Full Contact**

The athlete may return to practice and full contact (if appropriate for the sport) in a controlled practice setting where the skills can be assessed by the coaches.

#### Step 6: Competition

The athlete may return to competition.

# If symptoms occur at any step, the athlete should immediately stop activity and consult with a qualified appropriate health-care professional before moving on to the next step.

#### What can I do?

11	Both you and your child should learn to recognize the "Signs and Symptoms" of concussion as listed above.
	Encourage your child to tell the medical and/or coaching staff if any of these signs and symptoms appear after a blow to the head or body.
	Emphasize to administrators, coaches, physicians, athletic trainers, teachers and other parents your concerns and expectations about concussion and safe play.
	Encourage your child to tell the medical and coaching staff if there is suspicion that a teammate has suffered a concussion.
	Ask teachers to monitor any decrease in grades or changes in behavior in students that could indicate a concussion.
	Report concussions that occurred during the school year to appropriate school staff. This will help in monitoring injured athletes as they move to the next season's sports.

Click here for more information about returning to school after a concussion: <a href="http://www.cdc.gov/headsup/basics/return\_to\_school.html">http://www.cdc.gov/headsup/basics/return\_to\_school.html</a>

#### Other Frequently Asked Questions:

# Why is it so important that athletes not return to play until they have completely recovered from a concussion?

Students that return to play too soon may worsen concussion symptoms, prolong the recovery time, and they also risk catastrophic consequences if they suffer another head injury. These consequences are preventable if each athlete is allowed time to recover from their concussion including completing the stepwise return-to-play protocol. No athlete should return to sport or other at-risk activity when signs or symptoms of concussion are present and recovery is ongoing.

#### Is a "CAT scan" or MRI needed to diagnose a concussion?

**No!** The diagnosis of a concussion is based upon the athlete's history of the injury and an appropriate health-care professional's physical examination and testing. CT and MRI scans are rarely needed following a

concussion since this is a functional injury and not a structural one. However, they are helpful in identifying life-threatening head and brain injuries such as skull fractures, bleeding or swelling.

#### What is the best treatment to help my child recover quickly from a concussion?

Treatment for concussion varies from one person to the next. Immediately after a concussion, the best treatment is physical and cognitive rest. Exposure to loud noises, bright lights, computers, tablets, video games, television and smart phones may worsen the symptoms of a concussion. You should allow your child to rest in the days following a concussion. As the symptoms lessen, an appropriate health-care professional may allow increased physical and cognitive activity, but this has to be monitored closely for a recurrence of symptoms.

There are no medications to treat concussions, but an appropriate health-care professional may prescribe medications and therapies to treat symptoms of a concussion, such as headache, dizziness, sleep changes, etc. Some athletes may require rehabilitative therapies, such as physical, occupational, vestibular, ocular or speech/cognitive. Others may require treatment for mood and behavior changes. All of these interventions are done on a personalized basis.

#### How long do the symptoms of a concussion usually last?

For most concussions, symptoms will usually go away within 2–3 weeks after the initial injury. You should anticipate that your child will not fully participate in sports for several weeks following a concussion. In some cases, symptoms may last longer, sometimes several months. Since recovery differs from person to person, all concussions should be carefully managed.

#### How many concussions can an athlete have before we should consider retiring from playing sports?

There is no "magic number" of concussions that determine when an athlete should give up playing sports that put one at high risk for a concussion. The circumstances that surround each individual injury, such as how the injury occurred as well as the number and duration of symptoms following the concussion, are very important. These circumstances must be individually considered when assessing an athlete's risk for potential long-term consequences and potentially more serious brain injuries. The decision to "retire" from sports is a decision best reached after a complete evaluation by your child's primary care provider and consultation with an appropriate health-care professional who specializes in treating concussions.

# I've read recently that concussions may cause long-term brain damage in athletes, especially professional football players. Is this a risk for high school athletes who have had a concussion?

Recently, increasing attention has been directed at CTE or Chronic Traumatic Encephalopathy. CTE is a *brain disease* that results from changes in the brain. These changes can affect how a person thinks, feels, acts, and moves. The cause of CTE has not been definitively established. Traumatic brain injuries, including <u>concussions</u>, and repeated hits to the head, called sub-concussive head impacts, may contribute to CTE.

Sub-concussive head impacts are impacts to the head that do not cause a concussion. Unlike concussions, which cause symptoms, sub-concussive head impacts do not cause symptoms. A collision while playing sports is one way a person can get a sub-concussive head impact.

Early evidence suggested that the more years a person has repeated sub-concussive head impacts or other brain injuries, the higher the chance they have of getting CTE. However, we have now learned that CTE does

not just occur in athletes. And, most people with head impacts or brain injuries will not get CTE. Furthermore, CTE has been diagnosed in people who have never had any history of brain trauma.

In light of the suggestion of a correlation between head impacts and CTE, the NFHS SMAC recommends limiting full contact during practice sessions and limiting the total number of quarters or periods played per week in sports at high risk for head impacts, such as football and ice hockey. These recommendations and guidelines were defined in the report from the July 2014 NFHS Concussion Summit Task Force. The guiding principles used to develop this report were to reasonably limit the opportunity for multiple hits to the head and to minimize concussion risk. The goal is also to maintain the integrity of the games and avoid unintended consequences. The report can be read in its entirety in the Resources section on the Sports Medicine page of the NFHS Website.

We cannot eliminate all of the risk of concussion from sports. However, we can take what we learn from science to reduce the chance for injury and set policy to ensure that students with a concussion get the care they need.

Everyone involved in high school sports plays an active role in educating others about concussion and other serious brain injuries. Please check out the Resource section on the Sports Medicine page of the NFHS Website for more information on how you can take an active role and get involved in keeping students safe, healthy and active.

Some of this information has been adapted from the CDC's "Heads Up: Concussion in High School Sports" materials by the NFHS's Sports Medicine Advisory Committee. Please go to <a href="https://www.cdc.gov/ncipc/tbi/Coaches">www.cdc.gov/ncipc/tbi/Coaches</a> Tool Kit.htm for more information.

Revised and Approved April 2019 April 2016 April 2013 April 2010

#### **DISCLAIMER – NFHS Position Statements and Guidelines**

The NFHS regularly distributes position statements and guidelines to promote public awareness of certain health and safety-related issues. Such information is neither exhaustive nor necessarily applicable to all circumstances or individuals and is no substitute for consultation with appropriate health-care professionals. Statutes, codes or environmental conditions may be relevant. NFHS position statements or guidelines should be considered in conjunction with other pertinent materials when taking action or planning care. The NFHS reserves the right to rescind or modify any such document at any time.



#### **HYDRATION**

In addition to acclimatization, proper hydration is another critical component to prevent heat illness.

- 1. How do you know if your athlete is hydrated? There are several methods to measure an athlete's hydration level:
  - a. Urine color

The volume and color of your urine is an excellent way of determining if you're well hydrated. Small amounts of dark urine mean that you need to drink more, while a "regular" amount of light-colored or nearly clear urine generally means you are well hydrated. (See urine chart-next page)

- b. Weigh-in before and after practice
  Athletes should be weighed before and after warm weather practices in dry clothes. They should drink appropriate amounts of fluid for the amount of weight lost. An athlete should not be allowed to participate if they are at a 2% or greater weight deficit from the beginning of their previous practice.
- c. Sweat rate

You can calculate our own sweat rate. Knowing how much an athlete sweats per hour can help you calculate how much fluid to drink to replace your sweat loss and stay hydrated. See how to calculate an athlete's sweat rate on the Korey Stringer Institute website at <a href="http://ksi.uconn.edu/wp-content/uploads/sites/1222/2015/04/Sweat-Rate-Calculator.pdf">http://ksi.uconn.edu/wp-content/uploads/sites/1222/2015/04/Sweat-Rate-Calculator.pdf</a>.

# 2. There are many strategies to maintain proper hydration. The following are some basic hydration principles to follow:

- Appropriate hydration before, during and after exercise is important for maintaining peak athletic
  performance. Fluid losses of as little as 2% of body weight (less than 4 pounds in a 200-pound athlete) can
  impair performance by increasing fatigue. This is important because it's common for some athletes to lose
  between 5-8 pounds of sweat during a game or intense practice. So it's easy for athletes to become
  dehydrated if they don't drink enough to replace what is lost in sweat.
- Recognize and respond to early warning signs of dehydration.
- DRINK EARLY and DRINK OFTEN during activity. Do not let athletes rely on thirst. Schedule frequent fluid breaks for re-hydrating. If athletes wait until they are thirsty it may be too late.
- Encourage GOOD hydration choices: water, sport drinks with low sodium and carbohydrate levels, AVOID: energy drinks, soda, fruit juices, carbonated beverage, and caffeine.
- Encourage drinking fluids, not pouring them. Dumping fluid over the head won't help restore body fluids or lower body temperature.
- Provide easily accessible fluids during practice and games.

#### 3. Hyponatremia Risk

Hyponatremia is a rare, but potentially deadly disorder resulting from the over-consumption of water or other low sodium fluid (including most sports drinks). It is most commonly seen during endurance events, such as marathons, when participants consume large amounts of water or other beverages over several hours, far exceeding fluid lost through sweating. The water in the blood and the sodium content of the blood is consequently diluted to dangerous levels. Affected individuals may exhibit disorientation, altered mental status, headache, lethargy and seizures. A confirmed diagnosis can only be made by testing blood sodium levels. Suspected hyponatremia is a medical emergency and EMS (Emergency Medical Services) must be activated. It is treated by administering intravenous fluids containing high levels of sodium.

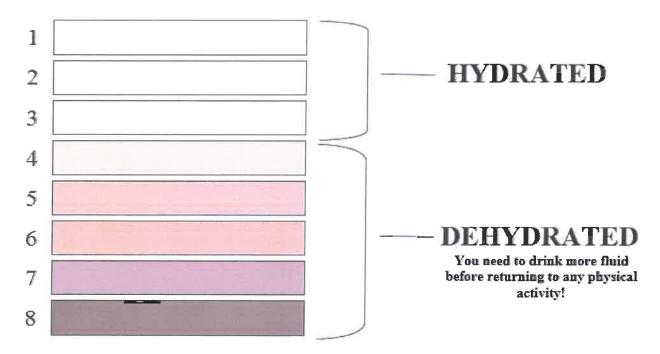


#### **HYDRATION RECOMMENDATIONS**

<b>Before</b> Exercise	Drink 16 oz. of fluid before activity/exercise (2 hours)  Drink another 8-16 oz. of fluid 10-15 minutes before exercise		
<b>During</b> Exercise	Exercise Drink 4 - 8 oz. of fluid every 15-20 minutes		
After Exercise	ink 16-20 oz. of fluid for every (one) pound lost during exercise to achieve normal fluid ate and not begin the next practice dehydrated. Rehydration should take place over a safe d comfortable period of time. Excessive fluid intake over a short amount of time can be ngerous (see hyponatremia information below).		
Fluid counter	24 oz. of fluid = 1½ of water bottle 16 oz. of fluid = 1 full water bottle 7 oz. of fluid = ½ full water bottle or 10 BIG gulps of water 4 oz. of fluid – ¼ full water bottle or 5 BIG gulps of water		

#### URINE COLOR CHART

This urine color chart is a simple tool you can use to assess if you are drinking enough fluids throughout the day to stay hydrated.



Be Aware! If you are taking vitamin supplements they can change the color of your urine for a few hours, making it bright yellow or discolored.

#### MENTAL HEALTH

Mental health has been identified as a primary concern of student-athletes for many years, with increased attention following the release of the NCAA's Mental Health Best Practices in 2016.

Recent research (e.g., NCAA StudentAthlete COVID-19 Well-Being study, 2020; Petrie et al., 2020) and clinical practice indicate an increase in psychological distress among student-athletes, especially student-athletes of color and those with economic hardships, since the outset of COVID-19 pandemic and campus/sports shutdowns.

Ongoing racial injustice, systemic oppression, and prolonged uncertainty exacerbates this distress and continues to have a significant impact across all mental health and well-being indicators, including emotional health, cognitive health, behavioral health, economic status, physical health, and world view/spiritual health.

Prevention, early intervention, and comprehensive mental health promotion will continue to be paramount. Specifically, (a) understanding student-athlete mental health needs and unique considerations, (b) coordination with local licensed mental health providers, (c) potential expansion of existing mental health resources, and (d) consistent application of proactive strategies for building resilience and maintaining connection (APA, 2012) are crucial now and moving forward.

Your Schools Behavior Support Team can be reached at each high school.

#### KCKPS Behavioral Health Social Workers:

- Meet with students who are feeling intense emotions to help them find tools to cope
- Provide staff with information on behavioral health signs and symptoms
- Meet with staff to problem solve behavioral challenges and offer intervention techniques to teachers
- Complete brief assessments to determine best treatment options for students experiencing behaviors or symptoms impacting a student's learning
- Meet with families to provide support and resources to meet their behavioral health needs
- Connect students and families to helpful resources in the community

Additional resources can be found at: KSHSAA.org and NFHSlearn.com



# **MENTAL HEALTH TOOLBOX**

The physical and emotional benefits of activity participation are numerous. We also know students who participate in your school's activity programs can encounter mental health challenges just like any other student, and at times may be even more susceptible due to the stresses associated with activity participation. Coaches, teachers and administrators are in unique positions to observe and interact with students daily and may often be one of the first people to recognize when a student may be struggling with a mental health crisis. School leaders are not expected to serve in the role of mental health professionals but understanding some simple strategies to recognize and communicate with students facing a mental health challenge are beneficial. The following information has been compiled by the KSHSAA Sports Medicine Advisory Committee to support member schools in supporting their students who may be facing a mental health challenge.

#### Things to remember

- No one is above anxiety, depression, or suicide. Each person may experience symptoms differently.
- You don't have to solve your students' problems. Being a compassionate listener is more important than giving advice.
- Know when to refer a student. Your job is not to provide treatment.
- Be direct. Asking about suicide will not push someone into doing something self-destructive.

#### **Starting the Conversation**

- "Recently, I have noticed some differences in you and wondered how you are doing."
- "I have been feeling concerned about you lately..."
- Think about the setting of the conversation, who else is around, your body language, any other distractions, etc.

#### When You Don't Know What to Say

Reflection & Paraphrasing	"So you already felt isolated and it sounds like today's incident added to what you have already been feeling?"
Validation	"It sounds like things have been really tough for you lately, no wonder you have felt so stressed."
Open Ended Questions	"Can you tell me more about the frustrating thoughts you have been having?"
Strength ID	"I'm proud of you for reaching out for help. You don't have to go through this alone."



#### **Direct Questions**

- "When you say everyone would be better off without you, are you thinking about suicide?"
- "Do you ever think about hurting yourself?"
- "Do you have a plan for how you would kill yourself?"

#### **Referring to Professionals**

- "I know it may seem uncomfortable, but a mental health professional can get you the help you need."
- "Why don't we go visit with ..... (School Counselor or other Mental Health Professional)? I can go with you if you want."
- "I know you are strong, but you don't have to go through this alone. Letting someone else help will take a lot of pressure off you."



# **EXAMPLES OF RISK**

Below are examples of different mental health risk levels and considerations for activity participation.

# Emergency

- In these situations, the student is in imminent risk of harming themselves or someone else.
- Examples: Student has injested medication or other substance in an attempt at self-harm or suicide.
  Student is making threats of harming someone else. Student is experiencing halluncinations/delusions that are putting them at risk of harm. Student is actively engaging in self-harm behavior that could potentially be lifethreatening (cutting wrists deeply).
- It is most important to get the student to safety (emergency room or hospital) immediately. Then, you can inform necessary others (parents).
- Call 911 or go to the nearest emergency department or crisis stabilization center.
- It is likely not safe for the student to engage in activities before receiving further evaluation and treatment.

# Urgent

- In these situations, the student is clearly in distress but not in immediate danger.
- Examples: The student is crying over a recent break-up, feeling panicked over a failed test, family troubles, etc., student has made vague comments about their worth, the student is in the midst of a panic attack.
- It is important to make sure the student is safe.
- If you are unsure of the student's level of safety, the student needs to be assessed by a mental health or medical professional. The student can go to the school counselor or take additional measures to make sure the student is safe.
- Once the student has reduced physiological arousal, it is likely safe for the student to return to activities with close monitoring.

# Low Risk

- The student is in need of counseling to address issues in their life but the need is not immediate.
- If the student is being seen already, encourage them to make contact with their therapist with any new important information.
- If the student is not seeking care from a counselor, encourage them to do so.
- Express concerns to the school counselor and parents if appropriate.
- Example: You learn of ongoing depression or anxiety the student is facing. The student is struggling with overwhelming stress. The student is having a difficult time with family or significant other relationships.
- It is likely that the student is safe to continue to participate in athletic activities.



# **RESOURCES**

For Emergencies, Call 911

#### **National Suicide Prevention Lifeline**

https://suicidepreventionlifeline.org/ 1-800-273-8255 (TALK)

#### **Crisis Text Line**

https://www.crisistextline.org/ Text START to 741741

#### NFHSLearn.com

Student Mental Health and Suicide Prevention online course

#### Work2BeWell

https://work2bewell.org/
Improving well-being and mental health of teens

#### **NCAA Mental Health Resources**

http://www.ncaa.org/sport-science-institute/mental-health

Contact your local physician, he/she can help find mental health resources near you.

Call your insurance provider for assistance on locating a mental health professional.



## **PEOPLE RESOURCES**

Remind students about the people in their lives that care about them and are also a resource for help:

- Friends/Teammates
- Parents
- School Counselors
- Coaches/Sponsors
- Teachers

- School Administrators
- School Nurse
- School Athletic Trainer
- Pastors

# **APPS/INTERNET RESOURCES**

- Headspace
- Calm.com
- Breathe2Relax
- iBreathe
- Mood Balance
- Relax Melodies (to help with sleep)
- MyLife
- https://www.kstate.edu/counseling/student/biofeedback/bfsample.html -Relaxation exercises
- <a href="http://athletesconnected.umich.edu">http://athletesconnected.umich.edu</a> Testimonials and strategies for athletes and their mental health
- https://www.tarabrach.com/guided-meditations/ Free mindfulness meditations
- https://self-compassion.org/category/exercises/ Guided Meditations



SidelinedUSA, https://www.sidelinedusa.org/

Resources to help support students when a season or career has unexpectedly ended.

#### **Mental Health Resources**

National Suicide Prevention Lifeline, 1-800-273-8255, <a href="https://suicidepreventionlifeline.org/">https://suicidepreventionlifeline.org/</a> Crisis Text Line, text HELLO to 741741 In case of emergency, dial 911

Disaster Distress Helpline, 1-800-985-5990 or text TalkWithUs to 66746

Mental Health America, https://mhanational.org/

Provides an extensive list of resources regarding COVID-19 including general disease information, immediate mental health resources, how-to articles and tools to connect with others.

NCAA Sports Science Institute, <a href="http://www.ncaa.org/sport-science-institute/topics/covid-19-and-mental-health">http://www.ncaa.org/sport-science-institute/topics/covid-19-and-mental-health</a>

Good reminders on how student-athletes can maintain their physical and emotional well-being during this time of separation from their school and teams.

Headspace, www.headspace.com

Calm, www.calm.com

These websites/mobile apps provide information and interactive exercises using meditation and other stress reducing activities to promote a healthy lifestyle. Free versions are available.

Psychology Today, https://www.psychologytoday.com/us

A wide range of mental health resources including the ability to search an online directory for a mental health professional in your region.

HelpGuide, <a href="https://www.helpguide.org/">https://www.helpguide.org/</a>

A wide range of mental health resources including how to cope with the stress and anxiety of COVID-19

American Foundation for Suicide Prevention, <a href="https://afsp.org/">https://afsp.org/</a>

#### **Physical Activity Resources:**

Physical Activity Alliance Resources, <a href="https://drive.google.com/file/d/1AmSL7y-zi36J9pRiJkxd4gf6libSachG/view">https://drive.google.com/file/d/1AmSL7y-zi36J9pRiJkxd4gf6libSachG/view</a>

Numerous suggestions and resources for ways to remain physically active.

TrainHeroic, <a href="https://www.trainheroic.com/">https://www.trainheroic.com/</a>

A resource for strength and conditioning coaches or any coach looking for help in designing workouts for their athletes.



Planet Fitness, <a href="https://www.planetfitness.com/">https://www.planetfitness.com/</a>

YMCA 360, https://ymca360.org/

#### **Sports Nutrition Resources**

Nutrition adjustments to consider during COVID-19, <a href="https://www.youtube.com/watch?v=GHiWP8OYAWM&feature=youtu.be">https://www.youtube.com/watch?v=GHiWP8OYAWM&feature=youtu.be</a>
Lizzie Kasparek, RD, CSSD, LN with Sanford Health; Follow @lizkasparekRD on Twitter

Top 8 Healthy Snacks for Teenagers, <a href="https://www.superhealthykids.com/recipes/top-8-healthy-snacks-teenagers/">https://www.superhealthykids.com/recipes/top-8-healthy-snacks-teenagers/</a>

Making Health and Nutrition a Priority During the Coronavirus Pandemic, <a href="https://nutrition.org/making-health-and-nutrition-a-priority-during-the-coronavirus-covid-19-pandemic/">https://nutrition.org/making-health-and-nutrition-a-priority-during-the-coronavirus-covid-19-pandemic/</a>

#### Something Fun!

Netflix Party, <a href="https://www.netflixparty.com/">https://www.netflixparty.com/</a>
A fun way to stay connected with friends and teammates.