

ATTACHMENT I: Concussion Policy

While we recognize that concussions cannot be fully prevented, education and training as well as prompt and appropriate management can better protect the health and well-being of our athletes, while also potentially reducing the amount of training / competition missed due to concussion. As such, Bismarck Hockey Boosters has partnered with Unbound Physical Therapy and Performance to develop and implement an evidence-based concussion policy.

All athletes Peewee level and up are required to complete a comprehensive pre-season baseline test through Unbound Physical Therapy and Performance prior to participation in any training or competition. As part of registration for the season this test is free and is required for the safety of the athletes.

Parental Involvement

Parents need to be involved whenever a player is injured. For that to happen, parents must know the signs and symptoms of a concussion, both on injury-date and post injury, and should be aware of possible resources for more information. Bismarck Hockey coaches have the final say about returning to play in the game if the coach suspects a concussion unless there is a qualified healthcare provider present at time of injury. Parents should ensure that their child is checked by a qualified health care professional when a concussion is suspected. A qualified health care professional's note of evaluation should be provided as written notification for return to play. If diagnosed, see the suggested return to play guidelines below.

Player Safety

Young hockey players tend to believe they are invincible. It is important they understand how severe head injuries are, and that it is their job to properly protect themselves. Players should securely fasten their helmet and always wear their mouth guard properly. When skating, players should have correct body stance and keep their head up. This will help them balance themselves for contact and be aware of their surroundings. Players must be able to communicate effectively with their coaches and parents. It is crucial that players are aware of the signs and symptoms of a concussion and to alert their coaches and parents if any arise during a game or practice.

Coaches

If you suspect a player has a concussion, you should take the following steps:

- 1) Remove the athlete from play, keep him/her supervised, and alert the athlete's parents of their signs and symptoms.
- 2) Ensure the athlete is evaluated by a qualified healthcare professional. Do not try to judge the seriousness of the injury yourself.
- 3) Inform the athlete's parents of Bismarck Hockey suggested "Return to Play" guidelines.

Parents

If you suspect your child has a concussion, you should take the following steps:

- 1) Remove the athlete from play and alert their coaches of any prior concussions or head injuries.
- 2) Ensure the athlete is evaluated by a qualified healthcare professional. Do not try to judge the seriousness of the injury yourself.
- 3) Review Bismarck Hockey's suggested "Return to Play" guidelines to ensure your child is healing their concussion properly and taking proper precautions.

If a concussion is suspected, whether it occurs as a part of Bismarck Hockey Boosters or otherwise, the athlete is to be removed immediately from all training and/or competition and not permitted to return until cleared by their physician or an Unbound Physical Therapy and Performance practitioner.

All suspected concussions occurring during any Bismarck Hockey Booster training or competitions must be reported through the Concussion Tracker app by a coach, trainer, or parent.

All suspected concussions should be encouraged to see their primary care physician or make an appointment at Unbound Physical Therapy and Performance as soon as possible to receive a proper diagnosis and begin the Return-to-Sport process. If any red flags are suspected the athlete should immediately visit the nearest emergency department.

BHB Return to play Guidelines

The appropriate, evidence-based management for returning a concussed athlete back to sport and other high-risk activity is done by completing the following steps in a closely supervised manner with a healthcare professional with training and experience in the management of sport related concussions.

Each stage must be separated by at least 24 hours and the athlete must not experience an increase in symptoms at any one stage in order to progress to the next. If symptoms increase at any stage, the athlete is to drop back to the previous stage for a period of 24 hours prior to attempting the next stage again.

The length of each phase varies depending on the severity of the concussion and should be decided based on consultation with a health care professional. Variables include past medical history, age, weight, severity of symptoms, return of symptoms, etc. There is no exact return to play time line, however, it may vary from one-week to not being able to play again.

Consult an informed health care professional and provide a copy of the examination note, which states the player is cleared to return to play. This examination note should be given to the coach, Program Director and President.

Phase #1: Injury Occurs

The player should be taken out of play and be treated by a qualified healthcare professional. Until cleared by a qualified healthcare professional, players should refrain from any physical or brain intense activity. If cleared, they may return to play. If diagnosed with a concussion, complete return to play protocol.

Phase #2: Symptom-Limited Physical/ Cognitive Activity

Encourage light daily walks, and household chores that do not provoke symptoms to a significant degree or place the athlete at risk for hitting their head. Light reading, TV, etc. provided there are no increase in symptoms. Also encourage plenty of rest "take it easy for a day or two but don't just lie in bed all day" 2-3 days at this stage MAX. Parents are encouraged to speak with the athlete's school to alert them of any possible side effects resulting from the concussion. Depending on the severity, players may want to refrain from exams, reading and computer work.

End of Phase #2: Cleared by an Informed Health Care Professional

If the player has been symptom free for 24 hours and cleared by a qualified healthcare professional, the player should begin the return to play protocol. Players are suggested to complete each of the below phases for a minimum of 24 hours. Consult with a qualified healthcare professional and provide a copy of the examination note to the coach who will then give it to the Program Director.

Phase #3 Light Physical Activity

Light aerobic exercise, for 15-30 min, which does not drastically increase heart rate or significantly increase concussive symptoms. A light walk, stationary bike, rower or elliptical is suggested. No weights, jumping, or skating. The athlete should perform a treadmill test with a qualified healthcare professional to obtain the optimal heart rate and exercise intensity for optimal recovery.

Phase #4 Sport-Specific Activity

Light, non-contact practice with the team or individually. Add activity that increases heart rate along with body and head movement. Players can participate in dry land practice, body weight exercises, plyometric and agility training.

- Medical Clearance
 - Once completely ASYMPTOMATIC and back to full-time school/work with no issues, and no increased symptoms with physical activity/practices: Chicago Blackhawks test is completed and comprehensive baseline re-test.

Phase #5 Non-Contact Training Drills

Higher intensity, non-contact practice with the team on the ice. The athlete can begin increasing resistance training, sprinting etc - start pushing yourself!

Phase #6 Full Contact Practice

Reintegration of the athlete back into full practices. If player is 100% symptom free, after phase #6 the player may return to games. The athlete should have at least 1 full contact practice prior to playing in a game. An in person or virtual consultation with the treating healthcare professional should be arranged after the full-contact practice and prior to full return. A final return to play medical clearance letter should be provided to the coach and director prior to returning to full game play.

*Please consult a qualified healthcare professional if the signs and symptoms continue throughout the return to play protocol.

PARENTS FACT SHEET:

What Is A Concussion?

A **concussion** is a functional brain injury caused by a blow or sudden acceleration and deceleration to the head, neck or body, with forces transmitted to the brain. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious. You can’t see a concussion which can make diagnosis and treatment difficult. Signs and symptoms of concussion can present right after the injury or may not appear or be noticed until days or weeks following the injury. If your child reports any symptoms of concussion, or if you notice the symptoms yourself, seek medical attention right away.

What Are the Signs and Symptoms of a Concussion?

Signs Observed by Parents or Guardians

****If your child has experienced a bump or blow to the head, big hits or falls during a game or practice, look for any of the following signs and symptoms of a concussion****

- Appears dazed or stunned
- Moves clumsily
- Is confused about assignment or position
- Answers questions slowly
- Forgets an instruction
- Can’t recall events prior to hit or fall
- Is unsure of game, score, or opponent
- Can’t recall events after hit or fall
- Loses consciousness (even briefly)
- Shows behavior or personality changes

Symptoms Reported by Athlete

- Headache or “pressure” in head
- Sensitivity to noise
- Nausea or vomiting
- Feeling sluggish, hazy, foggy, or groggy
- Balance problems or dizziness
- Concentration or memory problems
- Double or blurry vision
- Confusion

- Sensitivity to light
- Does not “feel right”

What Should You Do if You Think Your Child Has a Concussion?

1. Seek medical attention right away.

A qualified healthcare professional trained in concussion management will be able to decide how serious the concussion is and when it is safe for your child to return to sports.

2. Keep your child out of play.

Concussions take time to heal. Don't let your child return to play until a qualified healthcare professional performs an examination and clears them for activity and sport. Children who return to play too soon—while the brain is still healing—are at greater risk of having a second concussion. Second or later concussions can be very serious and can cause permanent brain damage, affecting your child for a lifetime.

3. Tell your child's coach about any recent concussion.

Coaches should be informed if your child had a recent concussion in ANY sport. Your child's coach may not know about a concussion your child received in another sport or activity unless you tell them. Open communication is imperative for athlete safety.

COACH FACT SHEET:

On-Bench Assessment

The following are ways to assess a player if you suspect a concussion. This is not a diagnostic tool, and the player should still be seen by a qualified healthcare professional.

MEMORY:

Ask the player questions they should know the answer to, such as date, period, opponent or team to score.

FOCUS:

Talk with the player, are they focusing on the conversation? Able to speak with coherent sentences?

PHYSICAL TEST:

Ask the player to touch the index finger to their nose numerous times, alternating between sides. Are they able to perform this smoothly and properly?

Observed by Coaching Staff

1. Appears dazed or stunned
2. Is confused about assignment or position
3. Forgets general hockey plays (breakout, etc...)
4. Is unsure of game, score, or opponent
5. Moves clumsily
6. Answers questions slowly
7. Loses consciousness (even briefly)
8. Shows behavior or personality changes
9. Can't recall events prior to or after hit or fall

Symptoms Reported by Athlete

1. Headache or "pressure" in head
2. Nausea or vomiting
3. Balance problems or dizziness
4. Double or blurry vision
5. Sensitivity to light and/or noise
6. Feeling sluggish, hazy, foggy, or groggy
7. Concentration or memory problems
8. Confusion
9. Does not "feel right"

KING-DEVIK SIDELINE CONCUSSION TEST:

The **King-Devick Test** is a quick and reliable sideline screening tool to help identify potential concussions. It involves reading numbers as quickly and accurately as possible from test cards. The cards and instructions of the screening tool are provided by Unbound Physical Therapy and Performance. Coaches will be provided baseline numbers for the test to compare in the event that a concussion may be suspected.

If the athlete's time is slower than their baseline by greater than **5 seconds** the athlete should **NOT** return to play and should be referred to a qualified healthcare provider.

COACH ACTION PLAN

If you suspect a player has a concussion, you should take the following steps:

- 1) Remove athlete from play, keep him/her supervised, and alert the athlete's parents of their signs and symptoms.
- 2) Ensure the athlete is evaluated by a qualified healthcare professional. Do not try to

judge the seriousness of the injury yourself.

3) Inform athlete's parents of the Bismarck Hockey "Return to Play" guidelines and refer athlete's parents to the "Parents Fact Sheet".

Sources:

Complete Concussion Management Inc. Complete Concussion Management Program. Accessed April 16, 2025. <https://completeconcussions.com>

McCrory P, Iverson GL, Dvořák J, et al. Consensus statement on concussion in sport: the 6th International Conference on Concussion in Sport–Amsterdam, October 2022. *Br J Sports Med.* 2023;57(11):695-711. doi:10.1136/bjsports-2023-106898

Tearse, Hal. Concussion Guidelines. Minnesota Hockey Center for Disease Control