



The Lighthouse Christian Academy

1424 Yale Street · Santa Monica, CA 90404 · p 310.829.2522 · f 310.829.5544

www.LCAsaints.org

PHYSICAL EXAM FORM

Student Name: _____

Address: _____

Date of Physical: _____ Age: _____ Date of Birth: _____

MEDICAL HISTORY (To be completed by parent prior to examination)

| | Yes | No | | Yes | No | | Yes | No |
|---------------------------------|--------------------------|--------------------------|--------------------------------|--------------------------|--------------------------|----------------------------|--------------------------|--------------------------|
| Asthma | <input type="checkbox"/> | <input type="checkbox"/> | Head injuries within last year | <input type="checkbox"/> | <input type="checkbox"/> | Palpitations | <input type="checkbox"/> | <input type="checkbox"/> |
| Allergies | <input type="checkbox"/> | <input type="checkbox"/> | Serious Illness | <input type="checkbox"/> | <input type="checkbox"/> | Chest Pains | <input type="checkbox"/> | <input type="checkbox"/> |
| Glasses/Contacts | <input type="checkbox"/> | <input type="checkbox"/> | Bleeding tendencies | <input type="checkbox"/> | <input type="checkbox"/> | Dizziness | <input type="checkbox"/> | <input type="checkbox"/> |
| Dental Braces or bridges | <input type="checkbox"/> | <input type="checkbox"/> | Sickle Cell Tendency | <input type="checkbox"/> | <input type="checkbox"/> | History of heart murmur | <input type="checkbox"/> | <input type="checkbox"/> |
| Repeated bone or joint injuries | <input type="checkbox"/> | <input type="checkbox"/> | Surgery within past year | <input type="checkbox"/> | <input type="checkbox"/> | Kidney Diseases/infections | <input type="checkbox"/> | <input type="checkbox"/> |
| Fractures within past year | <input type="checkbox"/> | <input type="checkbox"/> | Diabetes | <input type="checkbox"/> | <input type="checkbox"/> | Seizures | <input type="checkbox"/> | <input type="checkbox"/> |

Tetanus (shot date if known) _____ Any Current Medications List: _____

The Section Below MUST Be Completed By A Licensed Medical Doctor (MD) ONLY:

Height: _____ Weight: _____ Temp: _____ Blood Pressure: _____ Pulse: _____ Respiration: _____

| | NORMAL | | NORMAL |
|--|--------|---|--------|
| 1. Eyes | | 10. Musculoskeletal, Rom, Strength: | |
| 2. Ears, Nose, Throat | | Neck | |
| 3. Mouth and Teeth | | Spine | |
| 4. Neck | | Shoulders | |
| 5. Cardiovascular | | Arms / Hands | |
| 6. Chest and Lungs | | Hips | |
| 7. Abdomen | | Thighs | |
| 8. Neuromuscular | | Knees | |
| | | Ankles | |
| 9. Genitalia-Hernia (Male) | | Feet | |
| ABNORMAL FINDINGS (If any) | | | |
| If cleared to participate in sports, appropriate category of play: (Doctor Only) | | | |
| Restrictions (If any) | | | |
| () NOT CLEARED to participate in sport | | () Refer to Family Physician for Clearance | |

I, hereby my signature below, do certify that I am licensed by the state and am qualified in determining that (Child's Name) _____ is physically fit and I have found no medical or observable conditions which would contraindicate him/her from participating in youth flag football, tackle football, volleyball, soccer, swimming or athletic activities. I am therefore clearing this individual for athletic participation.

Doctor's Stamp:

Doctor's Name (printed): _____

Doctor's Signature: _____ License #: _____

School: _____

CIF Concussion Information Sheet

You are receiving this information sheet about concussions because of California state law AB 25 (effective January 1, 2012), now Education Code § 49475:

1. The law requires a student athlete who may have a concussion during a practice or game to be removed from the activity for the remainder of the day.
2. Any athlete removed for this reason must receive a written note from a medical doctor trained in the management of concussion before returning to practice.
3. Before an athlete can start the season and begin practice in a sport, a concussion information sheet must be signed and returned to the school by the athlete and the parent or guardian.

Every 2 years all coaches are required to receive training about concussions (AB 1451), as well as certification in First Aid training, CPR, and AEDs (life-saving electrical devices that can be used during CPR).

For current and up-to date information on concussions you can visit:

<http://www.cdc.gov/concussion/HeadUp/youth.html>

I acknowledge that I have received and read the CIF Concussion Information Sheet.

Student-Athlete Name
Printed

Student-Athlete
Signature

Date

Parent or Legal Guardian
Printed

Parent or Legal Guardian
Signature

Date

Keep Their Heart in the Game

A Sudden Cardiac Arrest Information Sheet for Athletes and Parents/Guardians

What is sudden cardiac arrest?

Sudden cardiac arrest (SCA) is when the heart stops beating, suddenly and unexpectedly. When this happens blood stops flowing to the brain and other vital organs. SCA is NOT a heart attack. A heart attack is caused by a blockage that stops the flow of blood to the heart. SCA is a malfunction in the heart's electrical system, causing the victim to collapse. The malfunction is caused by a congenital or genetic defect in the heart's structure.

How common is sudden cardiac arrest in the United States?

As the leading cause of death in the U.S., there are more than 300,000 cardiac arrests outside hospitals each year, with nine out of 10 resulting in death. Thousands of sudden cardiac arrests occur among youth, as it is the #2 cause of death under 25 and the #1 killer of student athletes during exercise.

Who is at risk for sudden cardiac arrest?

SCA is more likely to occur during exercise or physical activity, so student-athletes are at greater risk. While a heart condition may have no warning signs, studies show that many young people do have symptoms but neglect to tell an adult. This may be because they are embarrassed, they do not want to jeopardize their playing time, they mistakenly think they're out of shape and need to train harder, or they simply ignore the symptoms, assuming they will "just go away." Additionally, some health history factors increase the risk of SCA.

FAINTING
is the
#1 SYMPTOM
OF A HEART CONDITION

What should you do if your student-athlete is experiencing any of these symptoms?

We need to let student-athletes know that if they experience any SCA-related symptoms it is crucial to alert an adult and get follow-up care as soon as possible with a primary care physician. If the athlete has any of the SCA risk factors, these should also be discussed with a doctor to determine if further testing is needed. Wait for your doctor's feedback before returning to play, and alert your coach, trainer and school nurse about any diagnosed conditions.

What is an AED?

An automated external defibrillator (AED) is the only way to save a sudden cardiac arrest victim. An AED is a portable, user-friendly device that automatically diagnoses potentially life-threatening heart rhythms and delivers an electric shock to restore normal rhythm. Anyone can operate an AED, regardless of training. Simple audio direction instructs the rescuer when to press a button to deliver the shock, while other AEDs provide an automatic shock if a fatal heart rhythm is detected. A rescuer cannot accidentally hurt a victim with an AED—quick action can only help. AEDs are designed to only shock victims whose hearts need to be restored to a healthy rhythm. Check with your school for locations of on-campus AEDs.



The Cardiac Chain of Survival

On average it takes EMS teams up to 12 minutes to arrive to a cardiac emergency. Every minute delay in attending to a sudden cardiac arrest victim decreases the chance of survival by 10%. Everyone should be prepared to take action in the first minutes of collapse.

Early Recognition of Sudden Cardiac Arrest



Collapsed and unresponsive.
Gasping, gurgling, snorting, moaning or labored breathing noises.
Seizure-like activity.

Early Access to 9-1-1



Confirm unresponsiveness.
Call 9-1-1 and follow emergency dispatcher's instructions.
Call any on-site Emergency Responders.

Early CPR



Begin cardiopulmonary resuscitation (CPR) immediately. Hands-only CPR involves fast and continual two-inch chest compressions—about 100 per minute.

Early Defibrillation



Immediately retrieve and use an automated external defibrillator (AED) as soon as possible to restore the heart to its normal rhythm. Mobile AED units have step-by-step instructions for a bystander to use in an emergency situation.

Early Advanced Care



Emergency Medical Services (EMS) Responders begin advanced life support including additional resuscitative measures and transfer to a hospital.

Keep Their Heart in the Game

Recognize the Warning Signs & Risk Factors of Sudden Cardiac Arrest (SCA)

Tell Your Coach and Consult Your Doctor if These Conditions are Present in Your Student-Athlete

Potential Indicators That SCA May Occur

- Fainting or seizure, especially during or right after exercise
- Fainting repeatedly or with excitement or startle
- Excessive shortness of breath during exercise
- Racing or fluttering heart palpitations or irregular heartbeat
- Repeated dizziness or lightheadedness
- Chest pain or discomfort with exercise
- Excessive, unexpected fatigue during or after exercise

Factors That Increase the Risk of SCA

- Family history of known heart abnormalities or sudden death before age 50
- Specific family history of Long QT Syndrome, Brugada Syndrome, Hypertrophic Cardiomyopathy, or Arrhythmogenic Right Ventricular Dysplasia (ARVD)
- Family members with unexplained fainting, seizures, drowning or near drowning or car accidents
- Known structural heart abnormality, repaired or unrepaired
- Use of drugs, such as cocaine, inhalants, "recreational" drugs, excessive energy drinks or performance-enhancing supplements

What is CIF doing to help protect student-athletes?

CIF amended its bylaws to include language that adds SCA training to coach certification and practice and game protocol that empowers coaches to remove from play a student-athlete who exhibits fainting—the number one warning sign of a potential heart condition. A student-athlete who has been removed from play after displaying signs or symptoms associated with SCA may not return to play until he or she is evaluated and cleared by a licensed health care provider. Parents, guardians and caregivers are urged to dialogue with student-athletes about their heart health and everyone associated with high school sports should be familiar with the cardiac chain of survival so they are prepared in the event of a cardiac emergency.

I have reviewed and understand the symptoms and warning signs of SCA and the new CIF protocol to incorporate SCA prevention strategies into my student's sports program.

STUDENT-ATHLETE SIGNATURE

PRINT STUDENT-ATHLETE'S NAME

DATE

PARENT/GUARDIAN SIGNATURE

PRINT PARENT/GUARDIAN'S NAME

DATE

For more information about Sudden Cardiac Arrest visit

California Interscholastic Federation
<http://www.cifstate.org>

Eric Paredes Save A Life Foundation
<http://www.epsavealife.org>

CardiacWise (20-minute training video)
<http://www.sportsafetyinternational.org>





Waiver of Liability, Assumption of Risk, and Indemnity Agreement for the LCA Athletics Program

*This waiver and sign up will cover your son/daughter as long as they are enrolled as a student at Lighthouse Christian Academy. You will only need to fill this out one time.

Athlete Name: _____ Sport 1: _____

Year Enrolled at LCA: _____ Sport 2: _____

Graduation Year: _____ Sport 3: _____

Waiver: In consideration of being permitted to participate in any way in LCA Athletics, I, for myself, my heirs, personal representatives or assigns, do hereby release, waive, discharge, and covenant not to sue Lighthouse Christian Academy and its owners, agents, officers and employees from liability from any and all claims resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in the LCA Athletics Program so long as they are enrolled as a student at Lighthouse Christian Academy. (Initials _____).

Assumption of Risks: Participation in the LCA Athletics Program carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains to 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions to 3) catastrophic injuries including paralysis and death. I understand that sports requires a minimum level of fitness for safe participation and that the LCA Athletics Program requires all participants to have a physical examination in the year previous to the beginning of the sport to ensure healthy activity. I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in the LCA Athletics Program. I hereby assert that my participation is voluntary and that I knowingly assume all such risks (Initials _____).

Indemnification and Hold Harmless: I also agree to INDEMNIFY AND HOLD Lighthouse Christian Academy and its owners, agents, officers and employees HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement in the LCA Athletics Program and to reimburse them for any such expenses incurred (Initials _____).

Transportation Waiver and Release of Liability: In consideration of LCA Athletics furnishing transportation services to my child in conjunction with LCA Athletics activities, I, on behalf of myself, my child, and our respective representatives and heirs, authorize LCA to and request that LCA provide transportation services to my child in conjunction with LCA Athletics activities, and hereby voluntarily release, waive, discharge, hold harmless, defend and indemnify Lighthouse Christian Academy and its owners, agents, officers and employees from and against any and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of



services or otherwise which may arise as a result of the providing of transportation services to my child in conjunction with LCA Athletics activities including without limitation transportation to, from or during any athletic activity whether with parent transportation or by bus. I specifically understand that I am releasing, discharging and waiving any claim or actions that I may have presently or in the future for the acts or other conduct by the owners, agents, officers or employees of Lighthouse Christian Academy. (Initials_____).

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect (Initials_____).

Photo Release: I authorize Lighthouse Christian Academy to use my or my child’s photo for reproduction in any manner LCA Athletics desires such as advertising, display, audio-visual, exhibition or editorial use. (Initials_____).

Athlete’s Acknowledgment of Understanding (only complete if 18 or over): I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Athlete Name Signature Date

Parent or Guardian: I am the parent or legal guardian of the above named minor child and, as such, I am authorized to enter into this agreement. I agree that my minor child and I are bound by and subject to the terms of this agreement. I understand that my signature here reflects my agreement to hereby release, waive, discharge, and covenant not to sue Lighthouse Christian Academy and its owners, agents, officers and employees from liability from any and all claims resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in the LCA Athletics Program.

Parent Name Signature Date



Parent/Student CIF Heat Illness Information Sheet



WHY AM I GETTING THIS INFORMATION SHEET?

You are receiving this information sheet about Heat Illness because of California state law AB 2800 (effective January 1, 2019), now Education Code § 35179 and CIF Bylaws 22.B.(9) and 503.K (Approved Federated Council January 31, 2019):

1. *CIF rules require a student athlete, who has been removed from practice or play after displaying signs and symptoms associated with heat illness, must receive a written note from a licensed health care provider before returning to practice.*
2. *Before an athlete can start the season and begin practice in a sport, a Heat Illness information sheet must be signed and returned to the school by the athlete and the parent or guardian.*

Every 2 years all coaches are required to receive separate trainings about concussions (AB 1451), sudden cardiac arrest (AB 1639), and heat illness (AB 2800), as well as certification in First Aid training, CPR, and AEDs (life-saving electrical devices that can be used during CPR).

WHAT IS HEAT ILLNESS AND HOW WOULD I RECOGNIZE IT?

Intense and prolonged exercise, hot and humid weather and dehydration can seriously compromise athlete performance and increase the risk of exertional heat injury. Exercise produces heat within the body and when performed on a hot or humid day with additional barriers to heat loss, such as padding and equipment, the athlete's core body temperature can become dangerously high. If left untreated, this elevation of core body temperature can cause organ systems to shut down in the body.

Young athletes should be pre-screened at their pre-participation physical evaluation for heat illness risk factors including medication/supplement use, cardiac disease, history of sickle cell trait, febrile or gastrointestinal illness, obesity, and previous heat injury. Athletes with non-modifiable risk factors should be closely supervised during strenuous activities in a hot or humid climate.

Sweating is one way the body tries to reduce an elevated core temperature. Once sweat (salt and water) leaves the body, it must be replaced. Water is the best hydration replacement, but for those athletes exercising for long periods of time where electrolytes may be lost, commercial sports drinks with electrolytes are available. Energy drinks that contain caffeine or other "natural" stimulants are not adequate or appropriate hydration for athletes and can even be dangerous by causing abnormal heart rhythms.

PREVENTION There are several ways to try to prevent heat illness:

ADEQUATE HYDRATION

Arrive well-hydrated at practices, games and in between exercise sessions. Urine appears clear or light yellow (like lemonade) in well-hydrated individuals and dark (like apple juice) in dehydrated individuals. Water/sports drinks should be readily available and served chilled in containers that allow adequate volumes of fluid to be ingested. Water breaks should occur at least every 15-20 minutes and should be long enough to allow athletes to ingest adequate fluid volumes (4-8 ounces).

GRADUAL ACCLIMATIZATION

Intensity and duration of exercise should be gradually increased over a period of 7-14 days to give athletes time to build fitness levels and become accustomed to practicing in the heat. Protective equipment should be introduced in phases (start with helmet, progress to helmet and shoulder pads, and finally fully equipped).

ADDITIONAL PREVENTION MEASURES

Wear light-colored, light-weight synthetic clothing, when possible, to aid heat loss. Allow for adequate rest breaks in the shade if available. Avoid drinks containing stimulants such as ephedrine or high doses of caffeine. Be ready to alter practice or game plans in extreme environmental conditions. Eat a well-balanced diet which aids in replacing lost electrolytes.

A **FREE** online course "Heat Illness Prevention" is available through the CIF and NFHS at <https://nfhslearn.com/courses/61140/heat-illness-prevention>.



Parent/Student CIF Heat Illness Information Sheet



HEAT EXHAUSTION

Inability to continue exercise due to heat-induced symptoms. Occurs with an elevated core body temperature between 97 and 104 degrees Fahrenheit.

- Dizziness, lightheadedness, weakness
- Headache
- Nausea
- Diarrhea, urge to defecate
- Pallor, chills
- Profuse sweating
- Cool, clammy skin
- Hyperventilation
- Decreased urine output

TREATMENT OF HEAT EXHAUSTION

Stop exercise, move player to a cool place, remove excess clothing, give fluids if conscious, COOL BODY: fans, cold water, ice towels, ice bath or ice packs. Fluid replacement should occur as soon as possible. The Emergency Medical System (EMS) should be activated if recovery is not rapid. When in doubt, CALL 911. Athletes with heat exhaustion should be assessed by a physician as soon as possible in all cases.

HEAT STROKE

Dysfunction or shutdown of body systems due to elevated body temperature which cannot be controlled. This occurs with a core body temperature greater than 107 degrees Fahrenheit. **Signs observed by teammates, parents, and coaches include:**

- Dizziness
- Drowsiness, loss of consciousness
- Seizures
- Staggering, disorientation
- Behavioral/cognitive changes (confusion, irritability, aggressiveness, hysteria, emotional instability)
- Weakness
- Hot and wet or dry skin
- Rapid heartbeat, low blood pressure
- Hyperventilation
- Vomiting, diarrhea

TREATMENT OF HEAT STROKE

This is a MEDICAL EMERGENCY. Death may result if not treated properly and rapidly.

Stop exercise, Call 911, remove from heat, remove clothing, immerse athlete in cold water for aggressive, rapid cooling (if immersion is not possible, cool the athlete as described for heat exhaustion), monitor vital signs until paramedics arrive.

FINAL THOUGHTS FOR PARENTS AND GUARDIANS

Heat stress should be considered when planning and preparing for any sports activity. Summer and fall sports are conducted in very hot and humid weather across regions of California. While exertional heat illness can affect any athlete, the incidence is consistently highest among football athletes due to additional protective equipment which hinders heat dissipation. Several heatstroke deaths continue to occur in high school sports each season in the United States. Heatstroke deaths are preventable, if the proper precautions are taken.

You should also feel comfortable talking to the coaches or athletic trainer about preventative measures and potential signs and symptoms of heat illness that you may be seeing in your child.

I acknowledge that I have received and read the CIF Heat Illness Information Sheet.

Student-Athlete Name
Printed

Student-Athlete
Signature

Date

Parent or Legal Guardian Name
Printed

Parent or Legal Guardian
Signature

Date

CIF CONCUSSION INFORMATION SHEET

Why am I getting this information sheet?

You are receiving this information sheet about concussions because of California state law AB25 (effective January 1, 2012) now Education Code § 49475:

1. The law requires a student athlete who may have a concussion during a practice or game to be removed from the activity for the remainder of the day.
2. Any athlete removed for this reason must receive a written note from a medical doctor trained in the management of concussion before returning to practice.
3. Before an athlete can start the season and begin practice in a sport, a concussion information sheet must be signed and returned to the school by the athlete and the parent or guardian.

Every 2 years all coaches are required to receive training about concussions (AB 1451). As well as certification in First Aid training, CPR and AEDs (life-saving electrical devices that can be used during CPR).

What is a concussion and how would I recognize one?

A concussion is a kind of brain injury. It can be caused by a bump or hit to the head, or by a blow to another part of the body with the force that shakes the head. Concussions can appear in any sport, and can look differently in each person.

Most concussions get better with rest and over 90% of athletes fully recover. However, all concussions should be considered serious. If not recognized and managed the right way, they may result in problems including brain damage and even death.

Most concussions occur without being knocked out. Signs and symptoms of concussion may show up right after the injury or can take hours to appear. If your child reports any symptoms of concussion or if you notice some symptoms and signs, seek medical evaluation from your team's athletic trainer and a medical doctor trained in the evaluation and management of concussion. If your child is vomiting, has severe headache, or is having difficulty staying awake or answering simple questions, call 911 to take him or her immediately to the emergency department of your local hospital.

On the CIF website is a Graded Concussion Symptom Checklist. If your child fills this out after having had a concussion, it helps the doctor, athletic trainer or coach understand how he or she is feeling and hopefully shows improvement. We ask that you have your child fill out the checklist at the start of the season even before a concussion has occurred so that we can understand if some symptoms such as headache might be part of his or her everyday life. We call this a "baseline" so that we know what symptoms are normal and common for your child. Keep a copy for your records, and turn in the original. If a concussion occurs, he or she should fill out this checklist daily. This Graded Symptom Checklist provides a list of symptoms to compare over time to make sure the athlete is recovering from the concussion.

What can happen if my child keeps playing with concussion symptoms or returns too soon after getting a concussion?

Athletes with the signs and symptoms of concussion should be removed from play immediately. There is NO same day return to play for a youth with a suspected concussion. Youth athletes may take more time to recover from concussion and are more prone to long-term serious problems from a concussion.

Even though a traditional brain scan (e.g., MRI or CT) may be "normal", the brain has still been injured. Animal and human research studies show that a second blow before the brain has recovered can result in serious damage to the brain. If your athlete suffers another concussion before completely recovering from the first one, this can lead to prolonged recovery (weeks to months), or even to severe brain swelling (Second Impact Syndrome) with devastating consequences.

There is an increasing concern that head impact exposure and recurrent concussions may contribute to long-term neurological problems. One goal of this concussion program is to prevent a too early return to play so that serious brain damage can be prevented.

Signs observed by teammates, parents and coaches include:

| | |
|--|---|
| <ul style="list-style-type: none">• Looks dizzy• Looks spaced out• Confused about plays• Forgets plays• Is unsure of game, score, or opponent• Moves clumsily or awkwardly• Answers questions slowly | <ul style="list-style-type: none">• Slurred speech• Shows a change in personality or way of acting• Can't recall events before or after the injury• Seizures or has a fit• Any change in typical behavior or personality• Passes out |
|--|---|

Symptoms may include one or more of the following:

| | |
|--|---|
| <ul style="list-style-type: none">• Headaches• "Pressure in head"• Nausea or throws up• Neck pain• Has trouble standing or walking• Blurred, double, or fuzzy vision• Bothered by light or noise• Feeling sluggish or slowed down• Feeling foggy or groggy• Drowsiness• Change in sleep patterns | <ul style="list-style-type: none">• Loss of memory• "Don't feel right"• Tired or low energy• Sadness• Nervousness or feeling on edge• Irritability• More emotional• Confused• Concentration or memory problems• Repeating the same questions/comment |
|--|---|

What is Return to Learn?

Following a concussion, student athletes may have difficulties with short-and long-term memory, concentration and organization. They will require rest while recovering from injury (e.g., avoid reading, texting, video games, loud movies), and may even need to stay home from school for a few days. As they return to school, the schedule might need to start with a few classes or a half-day depending on how they feel. If recovery from a concussion is taking longer than expected, they may also benefit from a reduced class schedule and/or limited homework; a formal school assessment may also be necessary. Your school or doctor can help suggest and make these changes. Student athletes should complete the Return to Learn guidelines and return to complete school before beginning any sports or physical activities, unless your doctor makes other recommendations. Go to the CIF website for more information on Return to Learn.

How is Return to Play (RTP) determined?

Concussion symptoms should be completely gone before returning to competition. A RTP progression involves a gradual, step-wise increase in physical effort, sports-specific activities and the risk for contact. If symptoms occur with activity, the progression should be stopped. If there are no symptoms the next day, exercise can be restarted at the previous stage.

RTP after concussion should occur only with medical clearance from a medical doctor trained in the evaluation and management of concussions, and a step-wise progression program monitored by an athletic trainer, coach, or other identified school administrator. Please see cifstate.org for a graduated return to play plan. (AB 2127, a California state law effective 1/15/15, states that return to play (i.e., full competition) must be no sooner than 7 days after the concussion diagnosis has been made by a physician.)

Final Thoughts for Parents and Guardians:

It is well known that high school athletes will often not talk about signs of concussions, which is why this information sheet is so important to review with them. Teach your child to tell the coaching staff if he or she experiences such symptoms, or if he or she suspects that a teammate has had a concussion. You should also feel comfortable talking to the coaches or athletic trainer about possible concussion signs and symptoms that you may be seeing in your child.

References

- American Medical Society for Sports Medicine position statement; concussion in sport (2013)
- Consensus statement on concussion in sport; the 4th International Conference on Concussion in Sport held in Zurich, November 2012
- <http://www.cdc.gov/concussion/HeadsUp/youth.html>