

## Checklist

# Creating an Athletics Concussion Management Plan

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*No athletic safety issue has garnered more attention recently than concussions, a type of mild traumatic brain injury (TBI). The potential for catastrophic injury coupled with evolving science and legal requirements makes TBI a serious safety and liability concern. The NCAA estimates that concussions account for nearly 20% of athletic injuries. All 50 states have established standards for handling youth concussions. The NCAA also updated its concussion guidelines multiple times in recent years. According to a 2018 report from The American Journal of Sports Medicine, research on the effects of concussions in the adolescent population is minimal.*

For each question, check the appropriate “yes” or “no” box. Review any box checked “no” to determine whether the suggested practice is possible. Use the “actions needed” box to identify any follow-up actions your institution may wish to take.

A concussion management plan is critical to colleges in ensuring player safety and reducing liability risks related to concussions in varsity sports. Since 2010, the NCAA has required institutions to have a plan on file. Other athletic associations, like the National Association of Intercollegiate Athletics and the National Junior College Athletic Association, recommend concussion management plans to their members. College administrators can use this checklist, which suggests a protocol for pre-participation and response, to develop a sound concussion management plan for intercollegiate athletics. Institution club and recreational sports programs also may find this checklist helpful.

## Pre-participation

### Actions Needed

### A. Legal Landscape

Has your institution consulted with an attorney about complying with league rules, athletic association requirements, and relevant state laws pertaining to concussions, such as those addressing the:

- Education of coaches, parents, and athletes about the nature and risks of concussions?  Yes  No
- Removal from play of any athlete suspected of having a concussion?  Yes  No
- Requirements for evaluating and returning to play an athlete suspected of having a concussion?  Yes  No

### B. Signs and Symptoms

Does your institution's concussion management plan identify the following signs and symptoms of a concussion?

- Loss of consciousness
  - Amnesia
  - Disorientation
  - Drowsiness
  - Difficulty concentrating
  - Ringing in the ears
  - Confusion
  - Headache
  - Nausea/vomiting
  - Fuzzy or blurry vision
  - Balance problems
  - Sensitivity to light and/or noise
- Yes  No

### C. Education

Does your institution annually educate or train athletes about concussions?  Yes  No

Does your institution educate or train the following individuals about concussions:  Yes  No

- Coaching staff (including volunteers)?
- Athletics health care providers?

Does your institution make resources about concussions available for the entire campus community?  Yes  No

At a minimum, do your institution’s concussion education, training, and resources:

- Define concussions and TBI?  Yes  No
- Explain the potential seriousness of concussion injuries?  Yes  No
- Emphasize that purposeful or flagrant head contact is not permitted or safe in any sport?  Yes  No
- Provide the signs and symptoms of a concussion?  Yes  No
- Address the importance of promptly reporting concussion symptoms to medical staff?  Yes  No
- Explain the role of physical and cognitive recovery?  Yes  No

**D. Documentation**

Does your institution document which individuals it educates about concussions?  Yes  No

**Assumption of Risk or Waiver**

Do athletes annually sign an assumption of risk or waiver acknowledging:

- A concussion is a potentially serious head injury that can result in brain injury or death?  Yes  No
- Participating in their sport may result in a head injury or a concussion?  Yes  No
- They have received information about the signs and symptoms of a concussion?  Yes  No
- Helmets, face shields, mouth guards, and other protective equipment do not eliminate the risk of concussions?  Yes  No
- Purposeful head contact in any sport is not permitted?  Yes  No
- They will immediately report to medical staff if they suspect a teammate has a concussion?  Yes  No
- They will immediately report to medical staff if, following a blow to the head or body, they experience signs and symptoms of a concussion?  Yes  No

- They will not return to practices or games if experiencing concussion-like symptoms following a blow to the head or body?  Yes  No

- A repeat concussion is more likely when an athlete returns to play before symptoms resolve?  Yes  No

- The institution has the authority to permanently retire an athlete from sports if it determines the risks of concussive injury present a serious threat to his or her safety and well-being?  Yes  No

- *As permitted by state law:* They waive their right to sue the institution for losses arising out of a concussion injury?  Yes  No

- Given potential differences in the laws where your institution operates and where athletics competitions occur, has your institution consulted with legal counsel about which form — an assumption of risk or a waiver — is preferable for athletes to sign?**
- Yes  No

### Coach Acknowledgement Form

Do coaches annually sign a form acknowledging that they:

- Received information about the signs and symptoms of concussions?  Yes  No

- Received and read the institution's concussion management plan?  Yes  No

- Understand their role in the institution's concussion management plan?  Yes  No

- Agree to follow the recommendations of athletics health care providers regarding removing athletes from and returning them to play?  Yes  No

### Athletics Health Care Providers Acknowledgement Form

Do athletics health care providers affiliated with your institution annually sign a form acknowledging that they:

- Received information about the signs and symptoms of concussions?  Yes  No

- Read the institution's concussion management plan?  Yes  No

- Understand their role in the institution's concussion management plan?  Yes  No

- Agree to encourage athletes to report to a medical staff member any suspected illness or injury including the signs and symptoms of concussions?  Yes  No

## E. Roles of Athletics Health Care Providers and Coaches

### Actions Needed

With respect to athletics health care providers affiliated with your institution, does your institution:

- Give them unchallengeable authority to determine the removal and return-to-play of injured athletes?  Yes  
 No
- Outline their roles in writing?  Yes  
 No
- Require them to practice within the standards established for their profession?  Yes  
 No

Are coaches prohibited from:

- Serving as the primary supervisor for athletics health care providers?  Yes  
 No
- Having sole hiring or firing authority over athletics health care providers?  Yes  
 No
- Challenging the authority of health care providers to determine the removal and return-to-play of injured athletes?  Yes  
 No

## F. Medical History, Assessments, and Planning

### Medical History

During the pre-participation evaluation of athletes, is information collected about:

- Previous concussions, including:
  - The number of such injuries?  Yes  
 No
  - Approximate dates?  Yes  
 No
  - Whether the athlete experienced loss of consciousness or amnesia?  Yes  
 No
  - The approximate length of time required for symptom resolution?  Yes  
 No
- Learning disabilities?  Yes  
 No
- Migraine or other headache disorders?  Yes  
 No
- Psychiatric illnesses?  Yes  
 No
- Chemical dependency?  Yes  
 No
- Seizures?  Yes  
 No

**Baseline Assessment**

During a baseline test a trained health professional may assess an athlete’s history of concussions, balance, and, potentially, cognitive function. Baseline test results are then compared to a similar exam conducted during the season if an athlete has a suspected concussion. Does your institution:

- Use a baseline assessment that consists of:
  - A symptoms checklist?  Yes  No
  - A standardized cognitive and balance assessment?  Yes  No
  - A test of eye motor function?  Yes  No
- Use the same assessment tools post-injury?  Yes  No
- If your institution uses neuropsychological testing as part of its baseline assessment, is a neuropsychologist or a physician experienced in the use and interpretation of such testing consulted in:
  - Developing and administering the test?  Yes  No
  - Interpreting the results?  Yes  No
- Does your institution record at least one baseline assessment for all varsity athletes?  Yes  No

**Health Care Plan**

For each varsity sport, does your institution provide athletes with:

- Access to health insurance?  Yes  No
- Equal access to athletics health care providers?  Yes  No

Has your institution explored catastrophic injury insurance for student athletes?  Yes  No

**Emergency Action Plan**

For each athletic venue, is there an emergency action plan addressing:

- Methods of emergency communication?  Yes  No
- Emergency contact information?  Yes  No

## Actions Needed

- Emergency transportation?  Yes  
 No
- Available emergency equipment?  Yes  
 No
- Response to the following catastrophic athletic injuries and illnesses?
  - TBIs
  - Heat illness
  - Spine injury
  - Cardiac arrest
  - Respiratory distress, such as asthma
  - Collapses due to sickle cell trait Yes  
 No

### Is the emergency action plan:

- Reviewed and practiced annually by coaches and athletics health care providers?  Yes  
 No
- Updated annually?  Yes  
 No
- Easily accessible (such as posted at the venue and on the web)?  Yes  
 No

## Response

### A. Removal From Play

#### Is any athlete suspected of suffering the signs or symptoms of a concussion:

- Immediately removed from play (such as competition, practice, and conditioning)?  Yes  
 No
- Evaluated by a medical professional with experience in the evaluation and management of concussions?  Yes  
 No

### B. Medical Evaluation

#### Sideline Evaluation

#### Does the sideline evaluation of an athlete with a potential concussion include:

- An assessment of airway, breathing, and circulation (ABCs)?  Yes  
 No
- An assessment of cervical spine and skull for associated injury?  Yes  
 No

- The same baseline tests used previously on the athlete, such as a:
  - Symptoms checklist?  Yes  No
  - Standardized cognitive and balance assessment?  Yes  No
  - Eye motor function tests?

**Because amnesia, confusion, and mental status changes are more sensitive indicators of concussion severity, does your institution note the following when evaluating an athlete:**

- The presence of and duration of amnesia?  Yes  No
- The presence of and duration of confusion?  Yes  No
- The time between the injury and the development of symptoms?  Yes  No
- Are athletes immediately referred to emergency medical services if these events occur?
  - Prolonged loss of consciousness
  - Seizure like activity
  - Slurring of speech  Yes  No
  - Paralysis of limbs
  - Unequal or dilated and non-reactive pupils
  - The severity of the injury exceeds the comfort level of the responding athletic or medical staff

### Returning to Play From a Sideline Evaluation

- If athletes are allowed to return to play following a concussion evaluation, does a medical professional monitor performance and periodically re-evaluate them?  Yes  No

## C. Concussion Management

### Removal From Play Following a Medical Evaluation

**For athletes diagnosed with a concussion or exhibiting significant concussion symptoms, does your institution:**

- Prohibit them from returning to play until medical clearance is granted and, at a minimum, for the remainder of the day?  Yes  No
- Take one of the following actions?
  - Refer them to a physician or emergency department  Yes  No
  - Continue to observe and monitor them
  - Admit them to a hospital

- Ensure they are not left alone for an initial period of time?  Yes  
 No

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- Provide athletes and someone who can assist them, such as a roommate, with written instructions advising the concussed athlete to:
  - Avoid alcohol or other substances that will impair cognitive function?
  - Avoid aspirin or other medication that increase the risk of bleeding?  Yes  
 No
  - Immediately contact medical staff if the following problems occur?
 

<ul style="list-style-type: none"> <li>• Worsening headache</li> <li>• Decreased level of consciousness</li> </ul>	<ul style="list-style-type: none"> <li>• Increased confusion</li> <li>• Increased irritability</li> </ul>	<ul style="list-style-type: none"> <li>• Vomiting</li> <li>• Dilated pupils</li> <li>• Stumbling/loss of balance</li> </ul>
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- Regularly monitor the athlete for deterioration?  Yes  
 No

**Physical and Cognitive Recovery**

**Until an athlete is asymptomatic, does your institution require those diagnosed with a concussion to:**

- Refrain from athletic play, practice, or conditioning?  Yes  
 No

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- Limit some cognitive activities, such as:
 

<ul style="list-style-type: none"> <li>• Studying?</li> <li>• Class attendance?</li> <li>• Homework?</li> </ul>	<ul style="list-style-type: none"> <li>• Video games?</li> <li>• Texting?</li> <li>• Accessing social networking tools?</li> </ul>
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 Yes  
 No

**When cognitive recovery is required for an athlete, does your institution:**

- Receive permission to share health status with academic advisors and professors?  Yes  
 No

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- Notify academic advisors and professors about the concussion and related signs and symptoms?  Yes  
 No

**In crafting a physical and cognitive recovery plan for the student athlete, does your institution's medical staff consider:**

- Post-concussive clinical symptoms?  Yes  
 No

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- Previous history of concussions?  Yes  
 No

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- Severity of previous concussions?  Yes  
 No

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- Recent physical exam?  Yes  
 No

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- Sport?  Yes  
 No

- Position?  Yes  
 No

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- Age?  Yes  
 No

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- Support system?  Yes  
 No

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- Overall “readiness” to return to sport?  Yes  
 No

### Return to Learn

Before an athlete returns to the classroom, does your institution require:

- Review by an academic adjustment team comprised of the student-athlete, an academic counselor, professor(s), disability office representative, and/or a neuropsychologist?  Yes  
 No

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- A graduated step-wise progression that is highly individualized?  Yes  
 No

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- Identification of co-morbid conditions that may impair recovery, such as migraine, attention deficit hyperactivity disorder (ADHD), mood disorders, anxiety, or depression?  Yes  
 No

### Return to Play

Before an athlete returns to play after a concussion, does your institution require:

- Clearance by a physician or physician’s designee?  Yes  
 No

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- Completion of a medically supervised stepwise process that begins only after the athlete:  Yes  
 No
  - Is asymptomatic?
  - Has post-exertion assessments that are within baseline limits?

### Retiring From the Sport

- Does your institution reserve, in writing, the right to permanently retire an athlete from sports?  Yes  
 No

Is an athlete’s permanent retirement considered if he or she has:

- A history of concussions, particularly when there is evidence that smaller forces are sufficient to cause another concussion?  Yes  
 No

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- Post-concussion symptoms lasting more than three months?  Yes  
 No

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- Evidence of a head or neck injury that would increase the risk of future concussions?  Yes  
 No

## Actions Needed

Before your institution permanently retires an athlete from sports, does it consult:

- Legal counsel?  Yes  
 No
- Applicable medical professionals, such as the team physician, trainer, and a neurologist?  Yes  
 No
- The athlete?  Yes  
 No
- The athlete's family?  Yes  
 No

### Documenting Treatment

When treating suspected and confirmed concussions, does your institution document the:

- Incident that caused the injury?  Yes  
 No
- Evaluation of the athlete?  Yes  
 No
- Management of the athlete?  Yes  
 No
- Clearance of the athlete?  Yes  
 No

*By Alyssa Keehan, Esq., CPCU, ARM, Director of Risk Management Research & Consulting. Alyssa oversees the development of UE's risk management content and consulting initiatives, ensuring reliable and trustworthy guidance for our members. Her areas of expertise include campus sexual misconduct, Title IX, threat assessment, campus security, contracts, and risk transfer. She previously handled UE liability claims and held positions in the fields of education and insurance.*

## Resources

NCAA Sport Science Institute:  
Interassociation Consensus: Diagnosis and Management of Sport-Related Concussion Best Practices

Centers for Disease Control and Prevention:  
Returning to School After a Concussion: A Fact Sheet for School Professionals



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