

FORT HILL HIGH SCHOOL ATHLETIC PARENT'S PACKET

PARENT PAPERS DO NOT RETURN

Pages 2,3 - Discipline Standards for Athletics. Reference page 7 of Athletics Packet

Pages 4,5,6 - COVID Awareness. Reference page 10 of Athletics Packet

Pages 14,15,16,17- Concussion Awareness. Reference pages 1-12 of Athletics Packet.

****Other information is available to read on the ACPS Athletics
Website**

DISCIPLINE STANDARDS

FORT HILL ATHLETICS

Representing Fort Hill High School as a student athlete is a privilege. Our student athletes are viewed as leaders in our school whether in or out of uniform. Keeping this in mind, all student athletes are expected to uphold a positive image in our classrooms, on the playing fields, and within our communities.

The following standards of discipline will apply to all students and are consistent with the standards identified for participation agreement provided to all student athletes as governed by Policy JJIC-E1.

LEVEL 1 Offenses:

Absences from school, or tardiness to school, announced meetings, activities, practices, etc. in accordance with the school and/or team rules set by the individual coach

LEVEL 2 Offenses:

Insubordination or use of profanity to ANY faculty member, school administrator, coach, advisor, or game official

Flagrant misconduct and/or misbehavior in school

Misbehavior or misconduct within the school community

LEVEL 3 Offenses:

Misconduct on school property or at a school sponsored function which also results in the athlete being charged with a Reportable Offense in accordance with Annotated Code 7-303 and COMAR 13A.08.01.17

Possession, use or showing evidence of use, sale, and/or distribution of proscribed substances as defined in JICH (Defined as Alcohol, Inhalants, Drugs/Drug paraphernalia, Prescribed medications except as prescribed for the individual student, Tobacco, Electronic Smoking Devices, Unapproved Performance Enhancing Substances, Look-alike products) See policy on ACPS website for more detailed descriptions.

CONSEQUENCES FOR LEVEL 1, 2, and 3 OFFENSES

LEVEL 1 Consequences:

- **1st offense:** Conference with Coach, Student Athlete, Athletic Director (when appropriate). Review of expectation set by team rules.
- **2nd offense:** Conference with Coach, Student Athlete, Parent, Athletic Director (when appropriate). Review of expectation of team rules and initiation of standards of discipline outlined by the coach. May result in suspension from game(s).
- **3rd offense:** Conference with Coach, Student Athlete, Parent, Athletic Director, and Principal. Review of previous infractions and discipline plans outlined by the coach. May result in suspension from game(s) or dismissal from team.

LEVEL 2 Consequences: see ** and * below**

- **1st offense:** School discipline procedures will be instituted resulting in an assignment of In School Intervention for 1-3 days depending on the nature of the incident. Student may not participate in practices or contests throughout duration of ISI. If school discipline calls for out-of-school suspension, student may not participate in any contest or practice throughout the duration of the suspension. Omission from a portion of the next contest not to exceed ½ of the contest.
- **2nd offense:** School discipline procedures will be instituted resulting in an assignment of In School Intervention 3 days. Student may not participate in practices or contests throughout duration of ISI. If school discipline calls for out-of-school suspension, student may not participate in any contest or practice throughout the duration of the suspension. Omission from the next contest.
- **3rd offense:** School discipline procedures will be instituted. Dismissal from the team.

LEVEL 3 Consequences:

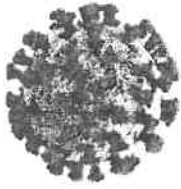
- **1st offense:** Suspension for 20% of the season remaining games, unless such offense results in charges. Any incident resulting in charges will result in immediate dismissal from the team. Student who is not dismissed entirely is required to continue to attend all practices and abide by team rules. Level 3 offenses involving drug use must be accompanied by a negative drug screening presented to the principal.
- **2nd offense:** Immediate dismissal from the team.

***GAME EJECTIONS:** Standards outlined per participation agreement.

****Should an incident occur in the last season contest which results in Level 2 Consequences, a review of the incident will be made by the AD, Coach, and Administration to determine appropriate consequence.**

*****Athletes who flagrantly disrespect the coaching staff or negatively act within the community or at school in a manner which, in the opinion of the Head Coach is unacceptable, may be dismissed from the team at the discretion of the Head Coach.**

What you should know about COVID-19 to protect yourself and others



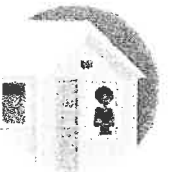
Know about COVID-19

- Coronavirus (COVID-19) is an illness caused by a virus that can spread from person to person.
- The virus that causes COVID-19 is a new coronavirus that has spread throughout the world.
- COVID-19 symptoms can range from mild (or no symptoms) to severe illness.



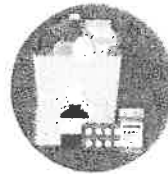
Know how COVID-19 is spread

- You can become infected by coming into close contact (about 6 feet or two arm lengths) with a person who has COVID-19. COVID-19 is primarily spread from person to person.
- You can become infected from respiratory droplets when an infected person coughs, sneezes, or talks.
- You may also be able to get it by touching a surface or object that has the virus on it, and then by touching your mouth, nose, or eyes.



Protect yourself and others from COVID-19

- There is currently no vaccine to protect against COVID-19. The best way to protect yourself is to avoid being exposed to the virus that causes COVID-19.
- Stay home as much as possible and avoid close contact with others.
- Wear a cloth face covering that covers your nose and mouth in public settings.
- Clean and disinfect frequently touched surfaces.
- Wash your hands often with soap and water for at least 20 seconds, or use an alcohol-based hand sanitizer that contains at least 60% alcohol.



Practice social distancing

- Buy groceries and medicine, go to the doctor, and complete banking activities online when possible.
- If you must go in person, stay at least 6 feet away from others and disinfect items you must touch.
- Get deliveries and takeout, and limit in-person contact as much as possible.



Prevent the spread of COVID-19 if you are sick

- Stay home if you are sick, except to get medical care.
- Avoid public transportation, ride-sharing, or taxis.
- Separate yourself from other people and pets in your home.
- There is no specific treatment for COVID-19, but you can seek medical care to help relieve your symptoms.
- If you need medical attention, call ahead.



Know your risk for severe illness

- Everyone is at risk of getting COVID-19.
- Older adults and people of any age who have serious underlying medical conditions may be at higher risk for more severe illness.



Share facts about COVID-19

Know the facts about coronavirus (COVID-19) and help stop the spread of rumors.

FACT

1

Diseases can make anyone sick regardless of their race or ethnicity.

Fear and anxiety about COVID-19 can cause people to avoid or reject others even though they are not at risk for spreading the virus.

FACT

2

For most people, the immediate risk of becoming seriously ill from the virus that causes COVID-19 is thought to be low.

Older adults and people of any age who have serious underlying medical conditions may be at higher risk for more serious complications from COVID-19.

FACT

3

Someone who has completed quarantine or has been released from isolation does not pose a risk of infection to other people.

For up-to-date information, visit CDC's coronavirus disease 2019 web page.

FACT

4

There are simple things you can do to help keep yourself and others healthy.

- Wash your hands often with soap and water for at least 20 seconds, especially after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food.
- When in public, wear a cloth face covering that covers your mouth and nose.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Stay home when you are sick.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash.

FACT

5

You can help stop COVID-19 by knowing the signs and symptoms, which can include:

- Fever
- Cough
- Shortness of breath

Seek medical attention immediately if you or someone you love has emergency warning signs, including:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion or not able to be woken
- Bluish lips or face

This list is not all inclusive. Please consult your medical provider for any other symptoms that are severe or concerning.





Multisystem Inflammatory Syndrome in Children (MIS-C)

Updated May 20, 2020

MIS-C is a severe inflammatory syndrome where pediatric patients present with features similar to Kawasaki disease and toxic shock syndrome. The condition can cause problems with the heart and other organs and may result in hospitalization.

MIS-C appears to be rare and most children who get COVID-19 will not develop MIS-C, according to the Centers for Disease Control and Prevention (CDC). However, children with this syndrome may become seriously ill. If you have any concerns about your child's health, please call your child's doctor.

What are the symptoms of MIS-C?

Symptoms of MIS-C might include persistent fever (temperature of 100.4 degrees F or 38.0 degrees C or greater), a rash or changes in skin color, red eyes or conjunctivitis, red cracked lips or red, bumpy tongue that looks like a strawberry, swollen hands and feet, abdominal pain or swollen lymph nodes.

When should I get emergency care?

Call your child's doctor and seek immediate care if your child has:

- Persistent fever for several days
- Difficulty feeding (infants) or is too sick to drink fluids
- Severe abdominal pain, diarrhea or vomiting
- Dehydration with decreased frequency of urination
- Change in skin color or appearance — becoming pale, patchy or blue, swelling
- Trouble breathing, breathing is painful or breathing very quickly
- Racing heart or chest pain
- Acting unusually sleepy, dizzy or confused

If your child is severely ill, go to the nearest emergency room or call 911 immediately.

Is MIS-C contagious?

MIS-C is not contagious, but it is possible that your child has COVID-19 or another infection that may be contagious.

Is there a treatment for MIS-C?

Children with MIS-C are being treated with therapeutic medications to support the body's immune system and inflammatory response. Children may also receive medications to protect their heart, kidneys and other organs.

How can I prevent my child from getting MIS-C?

You should take steps to prevent your child from being exposed to COVID-19. Stay home when you can, practice social distancing and wear a mask if you must go out and wash hands frequently. Children with underlying medical conditions can be at higher risk for poor outcomes of COVID-19.

For more information about COVID-19 in Maryland, visit coronavirus.maryland.gov.



ATHLETIC GUIDE FOR STUDENTS AND PARENTS

GENERAL STANDARDS FOR PARTICIPATION IN INTERSCHOLASTIC ATHLETICS

Purpose: This athletic factsheet is designed to be useful as a guide to student athletes and parents. The intent is to condense information that is necessary to effectively understand and participate in the athletic program in Allegheny County. **Athletic participation is a privilege, not a right.**

The guide includes a collection of information pertaining to state and county procedures and regulations. Additional references on the administration of interscholastic athletics will be found in the Maryland Public Secondary Schools Athletic Association Handbook. Copies of these documents are available online at www.MPSSAA.org and www.acpsmd.org.

There may be questions that arise that may not be covered. Remember, this factsheet is only a guide. Only open communications between coaching staff, athletic director, parents, students, and school administrators will ensure an effective athletic program.

GENERAL ELIGIBILITY

Enrollment: Students shall be officially registered as required by Maryland school laws and attending a member MPSSAA school. They may represent only the school in which they are registered and at which it is anticipated they will complete their graduation requirements.

Age: Students who are 19 years or older as of August 31st are ineligible to participate in interscholastic athletics for the school year ahead.

Seasons of Competition: Students may participate in interscholastic athletic contests a maximum of four (4) seasons in any one sport in grades 9-12.

Physical Examination: A student shall be examined and certified as being physically fit to participate in any tryout or practice. A qualified physician within the current calendar year shall perform this examination.

Athletic Insurance and Parental Permission: Every candidate for and participant on an interscholastic team must provide proof of parental permission and have insurance covering possible accident or injury in school-sponsored games, practice sessions and travel to and from athletic contests.

Sports Insurance: ACPS may obtain supplemental insurance to cover injuries that occur which are not covered by the regular Student Accident Insurance policy. This insurance may provide additional coverage for an injured athlete. Claims for reimbursement under this insurance should be filed by the parent through the school office. The Board's insurance office should be advised of all claims filed on this policy. This should be done by completing a school accident form as well as completing the insurance claim forms. This insurance may not guarantee 100% coverage of claims.

Squad Membership: The coach of each sport is responsible for the determination of squad membership. Seniors are not eligible for junior varsity competition in any sport.



Outside Team Membership: The outside participation shall not conflict with the practice or contest schedule of the school, including district, regional and state championship play. A principal may authorize in advance an absence from a school-scheduled practice for competition.

Transfer: A student attending a high school without the benefit of residing within the school's attendance area and/or without special permission of the Office of Pupil Services is subject to disciplinary action, which will result in the loss of athletic eligibility, and other penalties as may seem justified in the particular case.

Recruiting Statement: No coach or school personnel may discuss or otherwise promote transfers or changes in residence or residence arrangements with any student, parent, or other person of influence, or knowingly permit such activity to take place for the purpose of facilitating athletic participation.

Amateur Status: Any student, who has not or is not using his athletic skill as a player for financial gain or has not competed under an assumed name as a player, shall be considered an amateur. Employment as an instructor, counselor, or official may not be considered a violation. Students may not apply for reinstatement until at least 60 days after the date of violation.

ACADEMICS

Academic Eligibility: Student extracurricular activities are an integral part of school life and are used as a means of developing wholesome attitudes and good human relations; as well as knowledge and skills. These activities often require as much careful planning and supervision as student experiences in the academic subject area; however, care must be taken that these activities do not take precedence over subject matter areas, but remain as supplemental activities to the basic courses of study.

While it is desirable that students participate in such activities to the extent that the further their educational development, it is of paramount importance that such participation shall not jeopardize pupils' academic achievement nor exploit their time and talents.

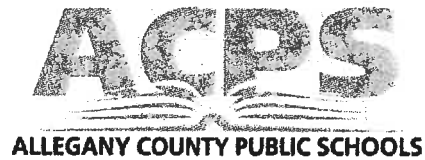
Eligibility for a marking period shall be determined by the student's grades for the most recently completed marking period. Students must achieve a minimum grade point average of 2.0. All new 9th grade students are eligible to participate in the first quarter of the 9th grade.

Grades used to determine eligibility will be those recorded on the report card earned while attending a county school or as a result of transferring from a non-county school. The student will become eligible or ineligible on the day of distribution of report cards.

The student may not practice with the team during the ineligible period.

Eligibility shall be determined by the previous marking period grades except that for the first marking period. Eligibility prior to the first marking period is determined by the fourth nine week's grades of the preceding year.

Eligibility Reinstatement: If a student becomes eligible during a sports season, he or she may try out for a team provided that he or she practices as indicated in ACPS rules and meets all other eligibility criteria (e.g. insurance, passes the physical exam, etc.). No other member of the team may be cut as a result of this regulation.



A reinstated athlete shall not participate in a regular scheduled game/contest until at least seven (7) calendar days following distribution of report cards.

ATTENDANCE

Each athlete is expected to attend school and all classes regularly and on time. Unless there is a lawful absence or tardy, students who are members of any school team/activity should attend all classes on time each day.

CONDUCT OF STUDENT ATHELETES

Student Conduct: Refer to the agreement governing participation in athletics.

Ejection: Students ejected from a scheduled athletic contest by an official of the contest may not participate on the next playing date of that same activity. This includes post-season play of that activity.

Substance Abuse: Alcohol, drug and tobacco use are extremely serious offenses. Not only is the quality of life of the student athlete in jeopardy, but the quality of life of innocent bystanders may be in jeopardy as well. Individuals participating in athletics depend on one another to be mentally and physically prepared to give their best effort each day. This cannot happen if the student athlete is using alcohol, tobacco or drugs that are not prescribed by a physician. Athletes using, possessing or distributing drugs, alcohol or tobacco on school premises or at a school-sponsored event shall be subject to discipline. Discipline may exclude student participation up to as much as the remainder of the season.

Serious Acts by Student Leaders: Students holding leadership positions or representing the school through academics, athletics and/or activities such as a club or organization, who commit an offense classified as a serious, unlawful act in the community or a serious suspendable offense may be removed from the position. Arrest, conviction, or legal judgment is not required.

Hazing/Bullying: Hazing/bullying will not be tolerated to any degree and may result in disciplinary action including suspension and expulsion. Any action taken or situation created that causes or is reasonably likely to cause harassment, physical harm, serious mental or emotional harm, extreme embarrassment, ridicule, or loss of dignity to another student for purposes or initiation into a student organization or activity will not be tolerated.

TITLE IX

ACPS supports the provisions of title IX and believes the implementation of the athletic program should reflect equity in funding, scheduling, and access to programs and facilities. The supervisor of athletics in cooperation with the athletic director and building principal will annually evaluate the following areas to ensure equity in athletic programs at all ACPS high schools.

PRACTICE

Starting Dates for Practice: Fall sports, August 12th; Winter sports, November 15th; Spring sports, March 1st. IF the first day of practice falls on a Sunday, practice can begin on the preceding Saturday.



EQUIPMENT

Equipment Responsibility: It is the responsibility of the student athlete to maintain and return all equipment and uniforms issued to them. Parents will be financially responsible for any equipment or uniforms that are lost, stolen or misplaced during the time the student athlete is responsible for them.

AWARDS

The minimum criteria for awarding a school athletic letter or other similar award must include: 1) The participant must complete the season in good standing; 2) The participant must fulfill all team-related obligations; and 3) The coach may establish more specific requirements with the approval of the athletic director and principal.

LIMITS OF PARTICIPATION

A student who participates in both varsity and junior varsity teams may not play in a number of games that exceeds the maximum number allowed in a sport in a week or season for the varsity team. A student may not compete on both a varsity and junior varsity team on the same day.

All-Star Games: Student athletes may participate in the maximum number of all-star games per sport, upon the completion of their eligibility in the sport in which the participation occurs as determined by MPSSAA.

Graduates: Graduates of high schools are not eligible to practice on interscholastic sports teams. However, they may participate in the remaining athletic contests of that sport season. MPSSAA member schools shall practice with or play against only high school teams.

INCLEMENT WEATHER

When schools are dismissed early or do not open due to inclement weather, all athletic activities, scheduled games and/or practices are cancelled.

SPORTSMANSHIP

Admission to interscholastic athletic events in Allegheny County entitles spectators to enjoy a competitive exhibition of skills in an education setting. We ask that spectators give student athletes positive encouragement and support. Booing, taunting or intimidating the officials and opponents is unfriendly and unacceptable.

To assure a positive and safe atmosphere, only uniformed cheerleaders will lead cheers. Noisemakers are not permitted and we request that spectators not pound or stomp on bleachers. We encourage support for allowing all athletes the opportunity to compete in a sportsmanlike atmosphere.

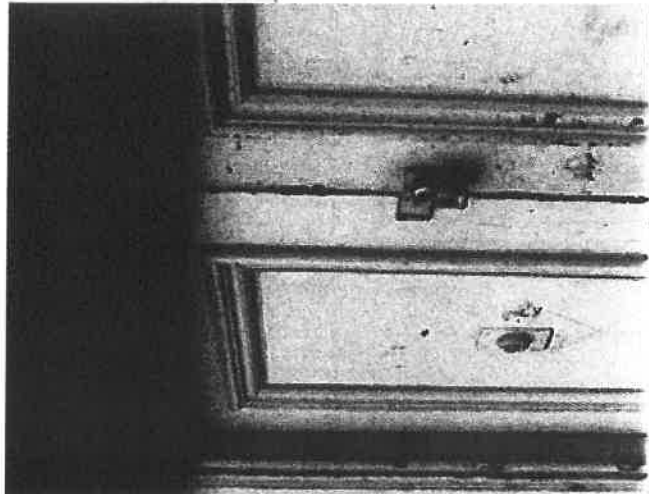
CONDUCT OF SPECTATORS

The supervising personnel at an athletic function are required to maintain and enforce appropriate conduct of the spectators.

- Spectators represent their schools, as do athletes.
- Spectators are expected to demonstrate the highest standards of sportsmanship.
- Booing, taunting, yelling profanities, inappropriate cheers or attempts to intimidate athletes, coaching staffs, event personnel, administrators, officials and opponents are unacceptable behaviors.
- Spectators should support and cheer for their teams in a positive manner.



- Spectators who exhibit unacceptable behavior will be asked to leave the contest without reimbursement of game fees and will not be permitted to re-enter that contest. The school principal may impose further disciplinary action.
- Spectators will not be permitted to leave and re-enter without paying a second admission.
- Spectators must comply with the ACPS alcohol, drug and tobacco policies.
- Spectators must stay in the bleachers or stands. For spectator safety, there is no jumping on the bleachers or stands.
- Only authorized coaches for the designated activity and/or authorized school supervisory personnel so designated by the school are permitted on the sidelines.
- School dress code extends to athletic contests.
- During contest, spectators may not play catch or pickup games inside the stadium or gymnasium.
- Noisemakers are prohibited at athletic events.



Key Elements of a Good Reporting System:

1. Communicate to your students, coaches/ activity personnel, officials and parents that you have a policy against hazing, sexual misconduct and other forms of harassment
2. Make the process of reporting allegations simple and direct.
3. Make the principal as the highest administrative official in the building, directly responsible for directing the investigation of any allegation of misconduct, hazing or harassment.
4. Document, in writing, any allegation of misconduct, hazing or harassment, and the results of the investigation.
5. Promptly take such remedial action as is necessary and appropriate.

Two Generally Recognized Categories of Sexual Harassment

1. Quid Pro Quo

Quid Pro Quo Harassment occurs when one person (generally in a supervisory capacity such as an upper-classman or a coach) makes known, unwelcome sexual demands of a subordinate (such as an underclassman, or an athlete) in order for him or her to gain an advantage, promotion, influence an evaluation, affect playing time or other benefits that come from educational, athletic or employment opportunities.

2. Hostile Environment

Hostile Environment Harassment is unwelcome conduct by a person that is sufficiently serious, persistent or pervasive, so that it affects another person's ability to participate in or benefit from the school program or activity by creating an intimidating, threatening or abusive environment. Conduct contributing to a hostile environment might include:

- Sexual propositions communicated via e-mail, in person, graphically;
- Verbal expressions of a sexual nature including comments about hair, dress, physical appearance or sexual activities;
- Sexually suggestive jokes, innuendoes, sounds, gestures or leering;
- Anecdotes, questions or comments about sexual activities;
- Excessive or inappropriate physical contact;
- Use of sexually suggestive objects, articles, tapes, pictures or other materials;
- Any persistent and pervasive pattern of sex-related conduct that is offensive;
- Deliberate indifference by supervisory personnel in responding to allegations of harassment.

Sexual Harassment and Hazing: Your Actions Make a Difference

This brochure addresses the legal rights of high school students, coaches/activity personnel and officials to enjoy an appropriate environment in athletics and other activities. All forms of harassment should be reported to school authorities.

Key Elements of a Good Reporting System

A clearly worded and well-publicized policy is essential in order to inform students and employees that sexual harassment or other forms of hazing will not be tolerated, ensure that they know how to report complaints, and assure them that harassment may be reported without fear of repercussions.

Sexual Harassment and Hazing:

Your Actions Make a Difference

Each school and community has a responsibility to protect against harassment and hazing. This responsibility extends to the school's athletic programs. Each school should have a policy against discrimination, including grievance procedures, providing for prompt and equitable resolution of hazing, harassment, and sex discrimination complaints. This information should be shared with students and any persons who have direct or indirect contact with students.



National Federation of State High School Associations

National Federation of State High School Associations
PO Box 680 • Indianapolis, Indiana 46206
www.nfhs.org

Factors That Affect Sexual Harassment

- The degree to which the conduct affects one or more students' education.
- The degree to which the conduct affects the coaching or work environment.
- The type, frequency and duration of the conduct.
- The identity of and relationship between the alleged harasser and the subject or subjects of the harassment.
- The number of individuals involved.
- The age and gender of the alleged harasser and the subject or subjects of the harassment.
- The size of the school, location of the incidents and context in which they occurred.
- Other incidents of sexual harassment at the school.
- Incidents of gender-based, but non-sexual harassment.
- Consensual behaviors.

(Source: Federal Register Vol 65, No 214, November 2, 2000)

Indiana Coalition Against Sexual Assault, INCASA is a private, non-profit organization funded from federal dollars through the Indiana Department of Health Family and Social Services Administration, Indiana Criminal Justice Institute and through a grant from the Office on Violence Against Women. This project is made possible through a grant from the Women's Fund and from the Rape Prevention Education Funds through the Centers for Disease Control and Prevention, administered by the Indiana State Department of Health. All contributions to INCASA are tax-deductible to the extent allowable by the Internal Revenue Service. Equal Access/Equal Opportunity organization www.incasa.org

Sexual Harassment and Hazing:

Your Actions Make a Difference!

Reporting Hazing and Harassment

Hazing or harassment by any name is wrong. Anyone who witnesses or hears about a form of harassment can and should report it. Allegations of harassment may be the result of words, physical contact, e-mail or other unbecome verbal or non-verbal communication.

Communication – A victim of hazing or harassment can report it, but so can a person who may not know the victim. The information may have come to him/her through conversation or may have been overheard in a classroom situation. Even in situations where information is gathered indirectly, members of the school community have a responsibility to report intimidating behavior.

Observation – Supervisors or teachers have responsibilities for the behavior of students. Whenever harassment is observed by a teacher or the adult in charge, he or she should recognize and address the matter for what it is – a serious violation of school policy.

Who can report hazing or harassment?

- A victim.
- A person who witnesses the incident.
- A third party who may not have witnessed the incident, but hears about it.

What to Do

1. Establish welcome programs for first-year and transfer students.
2. Reconsider all "team-bonding" or "initiation" traditions in all school groups.
3. Urge your school to adopt a statement of awareness.
4. Create a spirit of camaraderie.
5. Don't cover-up hazing incidents.

(Source: "High School Hazing: When Rules Become Wrong" by Hank Nurner)

Establishing Guidelines

Sexual Misconduct

Sexual Misconduct covers a wide spectrum of inappropriate behavior. Individuals who engage in sexual misconduct may be subject to disciplinary actions at school or in a court of law.

Sexual Harassment

Sexual Harassment is a form of gender discrimination that consists of unwelcome verbal, electronic, or physical interaction between two or more people. Harassment can happen between people of the same gender or people of different genders.

Hazing

Hazing is any action or activity which inflicts physical or mental harm or anxiety, or which demeans, degrades or disgraces a person, regardless of location, intent or consent of participants.

(Employment Practice Group 2000, 8)

Ten Recommendations for Preventing Sexual Harassment in Schools and Athletics Programs

1. Teachers and athletics personnel should never use sexually explicit language or tell sexually explicit/off color jokes in the presence of students or student-athletes.
2. Teachers and athletics personnel should never display sexually explicit or pornographic pictures/materials on school property and should never show such materials to students or student-athletes under any circumstances.
3. Teachers and athletics personnel should avoid engaging in excessively personal conversations, both in person and on the phone, with students or student-athletes.
4. Teachers and athletics personnel should avoid sending excessively personal letters, cards, e-mails, or gifts to students or student-athletes.
5. Teachers and athletics personnel should avoid commenting on the physical appearance, including manner of dress and specific physical attributes, of students or student-athletes.
6. Teachers and athletics personnel should avoid to the greatest extent possible physical contact with or touching of students or student-athletes.
7. Teachers and athletics personnel should avoid giving students or student-athletes rides home alone or even in groups where eventually only one student will remain in the car alone with the adult.
8. Teachers and athletics personnel should avoid off-school-property, one-on-one meetings alone with students or student-athletes, especially in the home of the student or the adult.
9. Teachers and athletics personnel should never plan or take unchaperoned overnight school or athletics trips with students or student-athletes and, on properly chaperoned trips, should exercise the highest degree of caution and propriety regarding interaction with students or student-athletes.
10. Teachers and athletics personnel should never date students or student-athletes under any circumstances. Issues of power differential, consent and credibility make such relationships untenable within any level of educational institution.

(Source: Dr. Lee Green, Baker University Sportslaw Publishing, com/slpnewval.htm)

CONCUSSION Information Sheet



This sheet has information to help protect your children or teens from concussion or other serious brain injury. Use this information at your children's or teens' games and practices to learn how to spot a concussion and what to do if a concussion occurs.

What Is a Concussion?

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.

How Can I Help Keep My Children or Teens Safe?

Sports are a great way for children and teens to stay healthy and can help them do well in school. To help lower your children's or teens' chances of getting a concussion or other serious brain injury, you should:

- Help create a culture of safety for the team.
 - › Work with their coach to teach ways to lower the chances of getting a concussion.
 - › Talk with your children or teens about concussion and ask if they have concerns about reporting a concussion. Talk with them about their concerns; emphasize the importance of reporting concussions and taking time to recover from one.
 - › Ensure that they follow their coach's rules for safety and the rules of the sport.
 - › Tell your children or teens that you expect them to practice good sportsmanship at all times.
- When appropriate for the sport or activity, teach your children or teens that they must wear a helmet to lower the chances of the most serious types of brain or head injury. However, there is no "concussion-proof" helmet. So, even with a helmet, it is important for children and teens to avoid hits to the head.



Plan ahead. What do you want your child or teen to know about concussion?

How Can I Spot a Possible Concussion?

Children and teens who show or report one or more of the signs and symptoms listed below—or simply say they just "don't feel right" after a bump, blow, or jolt to the head or body—may have a concussion or other serious brain injury.

Signs Observed by Parents or Coaches

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

Symptoms Reported by Children and Teens

- Headache or "pressure" in head.
- Nausea or vomiting.
- Balance problems or dizziness, or double or blurry vision.
- Bothered by light or noise.
- Feeling sluggish, hazy, foggy, or groggy.
- Confusion, or concentration or memory problems.
- Just not "feeling right," or "feeling down."

Talk with your children and teens about concussion. Tell them to report their concussion symptoms to you and their coach right away. Some children and teens think concussions aren't serious or worry that if they report a concussion they will lose their position on the team or look weak. Be sure to remind them that *it's better to miss one game than the whole season.*

To learn more, go to www.cdc.gov/HEADSUP



Centers for Disease
Control and Prevention
National Center for Injury
Prevention and Control

Concussions affect each child and teen differently. While most children and teens with a concussion feel better within a couple of weeks, some will have symptoms for months or longer. Talk with your children's or teens' health care provider if their concussion symptoms do not go away or if they get worse after they return to their regular activities.



What Are Some More Serious Danger Signs to Look Out For?

In rare cases, a dangerous collection of blood (hematoma) may form on the brain after a bump, blow, or jolt to the head or body and can squeeze the brain against the skull. Call 9-1-1 or take your child or teen to the emergency department right away if, after a bump, blow, or jolt to the head or body, he or she has one or more of these danger signs:

- One pupil larger than the other.
- Drowsiness or inability to wake up.
- A headache that gets worse and does not go away.
- Slurred speech, weakness, numbness, or decreased coordination.
- Repeated vomiting or nausea, convulsions or seizures (shaking or twitching).
- Unusual behavior, increased confusion, restlessness, or agitation.
- Loss of consciousness (passed out/knocked out). Even a brief loss of consciousness should be taken seriously.

Children and teens who continue to play while having concussion symptoms or who return to play too soon—while the brain is still healing—have a greater chance of getting another concussion. A repeat concussion that occurs while the brain is still healing from the first injury can be very serious and can affect a child or teen for a lifetime. It can even be fatal.

Revised 5/2015

What Should I Do If My Child or Teen Has a Possible Concussion?

As a parent, if you think your child or teen may have a concussion, you should:

1. Remove your child or teen from play.
2. Keep your child or teen out of play the day of the injury. Your child or teen should be seen by a health care provider and only return to play with permission from a health care provider who is experienced in evaluating for concussion.
3. Ask your child's or teen's health care provider for written instructions on helping your child or teen return to school. You can give the instructions to your child's or teen's school nurse and teacher(s) and return-to-play instructions to the coach and/or athletic trainer.

Do not try to judge the severity of the injury yourself. Only a health care provider should assess a child or teen for a possible concussion. Concussion signs and symptoms often show up soon after the injury. But you may not know how serious the concussion is at first, and some symptoms may not show up for hours or days.

The brain needs time to heal after a concussion. A child's or teen's return to school and sports should be a gradual process that is carefully managed and monitored by a health care provider.



To learn more, go to
www.cdc.gov/HEADSUP

You can also download the CDC **HEADS UP** app to get concussion information at your fingertips. Just scan the QR code pictured at left with your smartphone.

Discuss the risks of concussion and other serious brain injury with your child or teen and have each person sign below

Detach the section below and keep this information sheet to use at your children's or teens' games and practices to help protect them from concussion or other serious brain injury.

☐ I learned about concussion and talked with my parent or coach about what to do if I have a concussion or other serious brain injury.

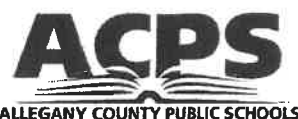
Athlete Name Printed: _____ Date: _____

Athlete Signature: _____

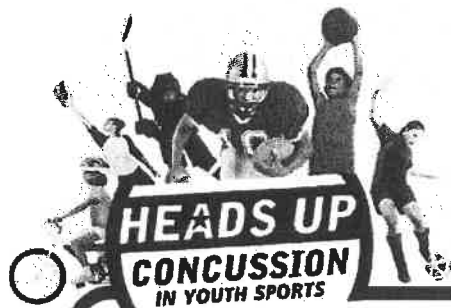
☐ I have read this fact sheet for parents on concussion with my child or teen and talked about what to do if they have a concussion or other serious brain injury.

Parent or Legal Guardian Name Printed: _____ Date: _____

Parent or Legal Guardian Signature: _____



A Fact Sheet for **ATHLETES**



WHAT IS A CONCUSSION?

A concussion is a brain injury that:

- Is caused by a bump or blow to the head
- Can change the way your brain normally works
- Can occur during practices or games in any sport
- Can happen even if you haven't been knocked out
- Can be serious even if you've just been "dinged"

WHAT ARE THE SYMPTOMS OF A CONCUSSION?

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Bothered by light
- Bothered by noise
- Feeling sluggish, hazy, foggy, or groggy
- Difficulty paying attention
- Memory problems
- Confusion
- Does not "feel right"

WHAT SHOULD I DO IF I THINK I HAVE A CONCUSSION?

- **Tell your coaches and your parents.** Never ignore a bump or blow to the head even if you feel fine. Also, tell your coach if one of your teammates might have a concussion.

- **Get a medical check up.** A doctor or health care professional can tell you if you have a concussion and when you are OK to return to play.
- **Give yourself time to get better.** If you have had a concussion, your brain needs time to heal. While your brain is still healing, you are much more likely to have a second concussion. Second or later concussions can cause damage to your brain. It is important to rest until you get approval from a doctor or health care professional to return to play.

HOW CAN I PREVENT A CONCUSSION?

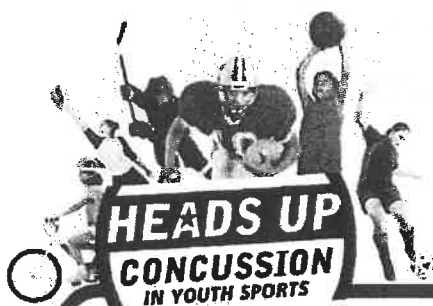
Every sport is different, but there are steps you can take to protect yourself.

- Follow your coach's rules for safety and the rules of the sport.
- Practice good sportsmanship at all times.
- Use the proper sports equipment, including personal protective equipment (such as helmets, padding, shin guards, and eye and mouth guards). In order for equipment to protect you, it must be:
 - > The right equipment for the game, position, or activity
 - > Worn correctly and fit well
 - > Used every time you play

It's better to miss one game than the whole season.

For more information and to order additional materials free-of-charge, visit:
www.cdc.gov/ConcussionInYouthSports

For more detailed information on concussion and traumatic brain injury, visit:
www.cdc.gov/injury



WHAT IS A CONCUSSION?

A concussion is a brain injury. Concussions are caused by a bump or blow to the head. 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. Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after 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 during a game or practice, look for any of the following signs and symptoms of a concussion:

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

Symptoms Reported by Athlete

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Does not "feel right"

HOW CAN YOU HELP YOUR CHILD PREVENT A CONCUSSION?

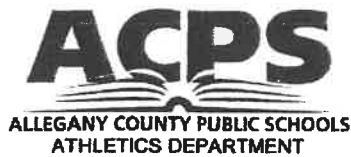
Every sport is different, but there are steps your children can take to protect themselves from concussion.

- Ensure that they follow their coach's rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.
- Make sure they wear the right protective equipment for their activity (such as helmets, padding, shin guards, and eye and mouth guards). Protective equipment should fit properly, be well maintained, and be worn consistently and correctly.
- Learn the signs and symptoms of a concussion.

WHAT SHOULD YOU DO IF YOU THINK YOUR CHILD HAS A CONCUSSION?

1. **Seek medical attention right away.** A health care professional 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 health care professional says it's OK. Children who return to play too soon—while the brain is still healing—risk a greater chance of having a second concussion. Second or later concussions can be very serious. They can cause permanent brain damage, affecting your child for a lifetime.
3. **Tell your child's coach about any recent concussion.** Coaches should know 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 the coach.

It's better to miss one game than the whole season.



SUDDEN CARDIAC ARREST (SCA)

Definition: Sudden Cardiac Arrest (SCA) is a potentially fatal condition in which the heart suddenly and unexpectedly stops beating. When this happens, blood stops flowing to the brain and other vital organs. SCA in student-athletes is rare; the chance of SCA occurring to any individual student athlete is about one in 100,000. However, student athletes' risk of SCA is nearly four times that of non-athletes due to the increased demands on the heart during exercise.

Causes: SCA is caused by several structural and electrical diseases of the heart. These conditions predispose an individual to have an abnormal rhythm that can be fatal if not treated within a few minutes. Most conditions responsible for SCA in children are inherited, which means the tendency to have these conditions is passed from parents to children through the genes. Other possible causes of SCA are a sudden blunt non-penetrating blow to the chest and the use of recreational or performance-enhancing drugs and/or energy drinks.

Warning signs of potential heart issues: The following need to be further evaluated by your primary care provider.

- Family history of heart disease/cardiac arrest
- Fainting, a seizure, or convulsions during physical activity
- Fainting or a seizure from emotional excitement, emotional distress, or being startled
- Dizziness or lightheadedness, especially during exertion
- Exercise-induced chest pain
- Palpitations: awareness of the heart beating, especially if associated with other symptoms such as dizziness
- Extreme tiredness or shortness of breath associated with exercise
- History of high blood pressure

Risk of Inaction: Ignoring such symptoms and continuing to play could be catastrophic and result in sudden cardiac death. Taking these warning symptoms seriously and seeking timely appropriate medical care can prevent serious and possibly fatal consequences.

EMERGENCY RESPONSE TO SCA

CALL 911

ADMINISTER CPR

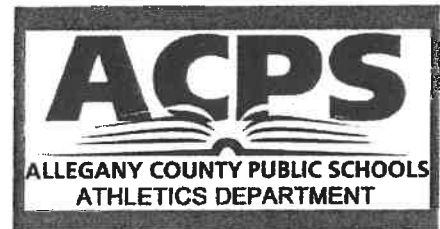
USE AN
AUTOMATIC
EXTERNAL
DEFIBRILLATOR
(AED)

Act Immediately;
time is most
critical to
increase survival
rates!

WARNING SIGNS OF SCA

- SCA strikes immediately
- SCA should be suspected in any athlete who has collapsed and is unresponsive
- No response to tapping on shoulders
- Does nothing when asked if he/she is OK
- No pulse

Frequently Asked Questions about Sudden Cardiac Arrest (SCA)



What are the most common causes of Sudden Cardiac Arrest (SCA) in a student athlete?

SCA is caused by several structural and electrical diseases of the heart. These conditions predispose an individual to have an abnormal rhythm that can be fatal if not treated within a few minutes. Most conditions responsible for SCA in children are inherited, which means the tendency to have these conditions is passed from parents to children through the genes. Some of these conditions are listed below.

1. *Hypertrophic cardiomyopathy* (HCM): HCM involves an abnormal thickening of the heart muscle and it is the most common cause of SCA in an athlete.
2. *Coronary artery anomalies*: The second most common cause is congenital (present at birth) abnormalities of coronary arteries, the blood vessels that supply blood to the heart.
3. Other possible causes of SCA are:
 - a. *Myocarditis*: an acute inflammation of the heart muscle (usually due to a virus).
 - b. Disorders of heart electrical activity such as:
 - i. *Long QT syndrome*.
 - ii. *Wolff-Parkinson-White* (WPW) syndrome.
 - iii. *Catecholaminergic Polymorphic Ventricular Tachycardia* (CPVT).
 - c. *Marfan syndrome*: a condition that affects heart valves, walls of major arteries, eyes, and the skeleton.
 - d. Congenital aortic valve abnormalities.
4. *Commotio Cordis*: concussion of the heart from sudden blunt non-penetrating blow to the chest
5. Use of recreational, performance-enhancing drugs, and energy drinks can also bring on SCA.

HANDS-ONLY CPR

2 STEPS TO SAVE A LIFE



How to Give Hands-Only CPR. If you see a teen or adult suddenly collapse, **call 911** and **push hard and fast** in the center of the chest to the beat of any tune that is 100 to 120 beats per minute. Immediate CPR can double or even triple a person's chance of survival.

How can we minimize the risk of SCA and improve outcomes?

The risk of SCA in student athletes can be minimized by providing appropriate prevention, recognition, and treatment strategies. One important strategy is the requirement for a yearly pre-participation screening evaluation, often called a sports physical, performed by the athlete's medical provider.

1. It is very important that you carefully and accurately complete the personal history and family history section of the "Pre-Participation Physical Evaluation Form".
2. Since the majority of these conditions are inherited, be aware of your family history, especially if any close family member:
 - a. had sudden unexplained and unexpected death before the age of 50.
 - b. was diagnosed with any of the heart conditions listed above.
 - c. died suddenly /unexpectedly during physical activity, during a seizure, from Sudden Infant Death Syndrome (SIDS) or from drowning.
3. Take seriously the warning signs and symptoms of SCA. Athletes should notify their parents, coaches, or school nurses if they experience any of these warning signs or symptoms.
4. Schools in Maryland have AED policies and emergency preparedness plans to address SCA and other emergencies in schools. Be aware of your school's various preventive measures.
5. If a cardiovascular disorder is suspected or diagnosed based on the comprehensive pre-participation screening evaluation, a referral to a child heart specialist or pediatric cardiologist is crucial. Such athletes will be excluded from sports pending further evaluation and clearance by their medical providers.

Heat Related Illness

WHAT YOU SHOULD KNOW!



HEAT EXHAUSTION

If your body is becoming overheated, you may experience heat exhaustion.

Symptoms:

- Heavy sweating • Muscle cramps
- Tiredness • Weakness
- Dizziness or fainting
- Headache • Nausea or vomiting

Stop activity and seek a cool place (shade or air-conditioning) and drink water or sports beverage.

HEAT STROKE

Heat stroke is the most serious heat-related illness. It occurs when the body becomes unable to control its temperature.

- the body's temperature rises rapidly, and
- the body is unable to cool down.

Body temperature may rise to 106°F or higher within 10 to 15 minutes. Heat stroke can cause death or permanent disability if emergency treatment is not provided.

*Temperature taken rectally is the most accurate method.

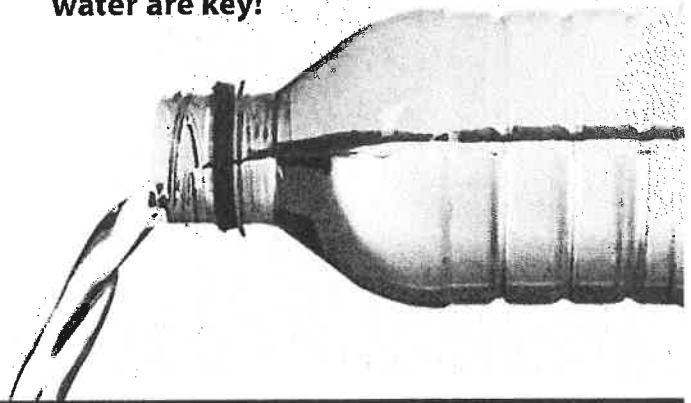
HEAT CRAMPS

If your body is dehydrated you might experience heat cramps.

Symptoms:

- Muscle pains or spasms, usually in the legs, abdomen, or arms.

Staying out of the heat and drinking water are key!



Warning signs of heat stroke vary but may include the following:

- Extremely high body temperature (104°F or above, rectally*)
- Red, hot, and dry or moist skin
- Rapid, strong pulse • Throbbing headache
- Dizziness • Nausea • Confusion
- Unconsciousness

Seek medical attention immediately and begin cooling if heat stroke is suspected!

