

CONCUSSION & SAFETY PROTOCOL

The USA Wheelchair Football League takes the health and safety of its players seriously. This document highlights recommendations for teams to follow to ensure teams have a proper emergency action plan for practices and games and that proper concussion protocol is followed throughout the season.

For more concussion-specific information, please review [Move United's Concussion Awareness PDF](#) for coaches working with athletes with disabilities.

PRE-SEASON

1. Coaches should be trained in concussion safety, through a program such as the [CDC's Heads Up Training](#).
2. Athletes should be provided with information on concussion and concussion safety, and sign off showing that they will follow all required protocol for the team.
3. Provide athletes with information on neck strengthening exercises. Studies have shown that particularly with athletes with disabilities, strong neck muscles have been a predictor of fewer and less severe concussions.
4. Teams are encouraged to have each athlete participating in their football program get a baseline concussion test by trained personnel. This test will be kept on file to be used to check against any potential concussion symptoms during the season.

Particularly for athletes with disabilities, a baseline test can help rule out symptoms, such as headache, that may be a comorbidity with their primary diagnosis and not a new concussion symptom.

- a. The Wisconsin College of Medicine has developed a baseline test for athletes in wheelchairs. More information can be found at [usawfl.org](#).

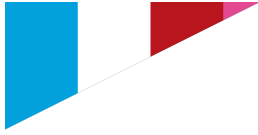
NOTE: A baseline test is a medical document, and storage of these documents must follow all proper HIPAA requirements.

5. Prior to starting the season, ensure every player has a properly fitted helmet in good condition. Helmets should be a model that has been tested and approved as part of the [NFL/NFLPA Helmet Laboratory Testing](#), originally released in April 2019.

DURING PRACTICE & COMPETITION

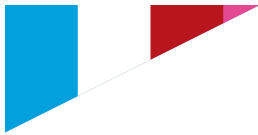
1. Medical personnel with training in the diagnoses, treatment and initial management of acute injury and concussion must be 'available' at all practices. To be available means that, at a minimum, medical personnel can be contacted at any time during the practice via telephone, messaging or other immediate communication means. Further, the case can be discussed through such communication, and immediate arrangements can be made for the athlete to be evaluated.
2. Medical personnel with training in the diagnoses, treatment and initial management of acute injury and concussion must be 'present' at all competitions. To be present means to be on site at the competition venue. Medical personnel may be from either team or may be independently contracted for the event.
3. Coaches should model good behavior, and ensure athletes are participating in drills and scrimmages at a safe speed and with good form to help prevent injuries.
4. Athletes who are not wearing the appropriate safety gear, such as helmets, should not be allowed to practice or compete.
5. All injuries and treatment plans should follow the team's Emergency Action Plan (see sample below).
6. Any athlete involved in an incident where a concussion is suspected or showing signs/symptoms/behaviors consistent with concussion:
 - MUST be removed from practice for evaluation by a medical professional with concussion experience
 - MUST be removed from practice/play for that day if concussion is confirmed or suspected
7. Athletes with a concussion should be monitored until the end of practice or tournament AND be provided with written concussion care instructions to be followed at home.
 - It is also recommended to provide a written description of the event for a medical care provider for follow up care.
8. After an athlete has been treated for concussion, Return to Play protocol should be directed by a medical professional.
 - Sample Return to Play protocol for football athletes can be found at [USA Football's Head Up Concussion in Football](#) protocol.

SAMPLE EMERGENCY ACTION PLAN



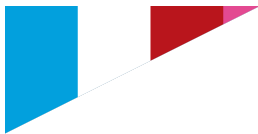
TO BE BROUGHT OUT EACH DAY

- First Aid Kit
- AED (if available)
- Emergency Phone Number List



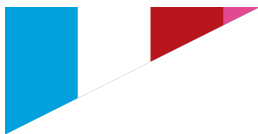
IN CASE OF MILD INJURY

- Provide Necessary Care: *Coach #1*
- Check for Concussion Symptoms: *Coach #2*
- Monitor Athlete for Rest of Practice or Until
Emergency Contact/Additional Medical Help
Arrives: *Coach #3*



IN CASE OF SERIOUS INJURY

- Call 911: *Coach #1*
- Provide Necessary Care: *Coach #2*
- Provides Additional Help/Directions to Emergency
Personnel: *Coach #3*
- Take Other Team Members to Another Area: *Coach #4*



QUESTIONS TO CONSIDER:

- Is a medical professional on-site or does all coaching staff have a number of an available medical professional?
- Do we have access to emergency contact information?
- Do we know if players have any existing allergies that might affect medical care?
- Is there cell phone access throughout the facility, or do we need to account for dead zones?