



**Carson Tigersharks Swim Team**  
**PO Box 1876 Carson City NV 89702**  
**www.tigersharks.org**

**Concussion Prevention, Treatment and Management Policy**

The 2011 Nevada Legislature enacted NRS 455A.200 which requires youth sports organizations to adopt a policy concerning the prevention and treatment of injuries to the head which may occur during a youth's participation in competitive sports, including, without limitation, a concussion of the brain.

A concussion is a brain injury that results from a bump, blow or jolt to the head or body which causes the brain to move rapidly in the skull and which disrupts normal brain function. The Centers for Disease Control and Prevention of the United States Department of Health and Human Services estimates that as many as 3.8 million concussions occur each year in the United States which are related to participation in sports and other recreational activities. Athletes who continue to participate in an athletic activity while suffering from a concussion or suffering from the symptoms of an injury to the head are at greater risk for catastrophic injury to the brain or even death. Ensuring that a Tigershark swimmer who sustains or is suspected of sustaining a concussion or other injury to the head receives appropriate medical care before returning to swimming activity will significantly reduce the child's risk of sustaining greater injury in the future.

THEREFORE, the Carson Tigersharks hereby adopts the following policy for purposes of prevention, treatment and management of injuries to the head that may occur during a swimmer's participation in the Tigershark program, including, without limitation, a concussion of the brain:

1. Prior to each swim season, all coaches shall:
  - a. Familiarize themselves with the CDC publication "Heads Up – Concussion in Youth Sports – A Fact Sheet for Coaches". This publication will be provided to all such individuals by the team manager or Board members; and,
  - b. Complete the CDC on line training course at:  
[http://www.cdc.gov/concussion/HeadsUp/online\\_training.html](http://www.cdc.gov/concussion/HeadsUp/online_training.html)  
 A copy of the Certificate of Completion for each of the above individuals shall be submitted to the team manager.
  
2. If a Tigershark swimmer sustains, or is suspected of sustaining, an injury to the head while participating in any Tigershark event the swimmer must:
  - a. Be immediately removed from the pool or event; and
    - a) May only return to Tigersharks activity if the parent or legal guardian of the swimmer provides a signed statement from a provider of health care indicating that the youth is medically cleared for Tigershark participation and the date on which the swimmer may return to participation.
  
3. The Tigershark swimmer and his or her parent or legal guardian must sign the statement below acknowledging that they have read and understand the terms and conditions of the policy, and agree to be bound by the policy.
  
4. Carson Tigersharks Concussion Prevention, Management and Treatment Policy
  
5. Swimmer and Parental Acknowledgement:
6. We, the undersigned, acknowledge that we have been provided with a copy of the Carson Tigersharks Concussion Prevention, Management and Treatment Policy, and that we have read and understand the policy, or it has been read to us and we understand the same. We hereby agree to follow all procedures set forth in said Policy at all times during which our son or daughter participates in Tigershark activities and events.

**Carson Tigersharks Concussion Prevention, Management and Treatment Policy; Player and Parental Acknowledgement**

We, the undersigned, acknowledge that we have been provided with a copy of the Carson Tigersharks Concussion Prevention, Management and Treatment Policy, and that we have read and understand the policy, or it has been read to us and we understand the same. We hereby agree to follow all procedures set forth in said Policy at all times during which our son or daughter participates in Tigershark activities and events.

Dated: \_\_\_\_\_ Swimmer \_\_\_\_\_

Dated: \_\_\_\_\_ Parent/Legal Guardian \_\_\_\_\_

Parent/Legal Guardian signature: \_\_\_\_\_