

T H E C O M M O N W E A L T H O F M A S S A C H U S E T T S

In the Year Two Thousand and Ten

AN ACT RELATIVE TO SAFETY REGULATIONS FOR SCHOOL ATHLETIC PROGRAMS.

Whereas, The deferred operation of this act would tend to defeat its purpose, which is to enhance forthwith the public health of school athletes, therefore it is hereby declared to be an emergency law, necessary for the immediate preservation of the public health. _____

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

SECTION 1. Chapter 111 of the General Laws is hereby amended by adding the following section:-

Section 222. (a) The department shall direct the division of violence and injury prevention to develop an interscholastic athletic head injury safety training program in which all public schools and any school subject to the Massachusetts Interscholastic Athletic Association rules shall participate. Participation in the program shall be required annually of coaches, trainers and parent volunteers for any extracurricular athletic activity; physicians and nurses who are employed by a school or school district or who volunteer to assist with an extracurricular athletic activity; school athletic directors; directors responsible for a school marching band; and a parent or legal guardian of a child who participates in an extracurricular athletic activity.

In developing the program, the division may use any of the materials readily available from the Centers for Disease Control and Prevention. The program shall include, but not be limited to: (1) current training in recognizing the symptoms of potentially catastrophic head injuries, concussions and injuries related to second impact syndrome; and (2) providing students that participate in any extracurricular athletic activity, including membership in a marching band, the following information annually: a summary of department rules and regulations relative to safety regulations for students participation in extracurricular athletic activities, including the medical protocol for post-concussion participation or participation in an extracurricular athletic activity; written information related to the recognition of symptoms of head injuries, the biology and the short-term and long-term consequences of a concussion.

(b) The department shall develop forms on which students shall be instructed to provide information relative to any sports head injury history at the start of each sports season. These forms shall require the signature of both the student and the parent or legal guardian thereof. Once complete, the forms shall be forwarded to all coaches prior to allowing any student to participate in an extracurricular athletic activity so as to provide coaches with up-to-date information relative to an athlete's head injury history and to enable coaches to identify students who are at greater risk for repeated head injuries.

(c) If a student participating in an extracurricular athletic activity becomes unconscious during a practice or competition, the student shall not return to the practice or competition during which the student became unconscious or participate in any extracurricular athletic activity until the student provides written authorization for such participation, from a licensed physician, licensed neuropsychologist, certified athletic trainer or other appropriately trained or licensed health care professional as determined by the department of public health, to the school's athletic director.

If a student suffers a concussion as diagnosed by a medical professional, or is suspected to have suffered a concussion while participating in an extracurricular athletic activity, the student shall not return to the practice or competition during which the student suffered, or is suspected to have suffered, a concussion and shall not participate in any extracurricular athletic activity until the student provides written authorization for such participation, from a licensed physician, licensed neuropsychologist, certified athletic trainer or other appropriately trained or licensed health care professional as determined by the department of public health, to the school's athletic director.

(d) A coach, trainer or volunteer for an extracurricular athletic activity shall not encourage or permit a student participating in the activity to engage in any unreasonably dangerous athletic technique that unnecessarily endangers the health of a student, including using a helmet or any other sports equipment as a weapon.

(e) The superintendent of the school district or the director of a school shall maintain complete and accurate records of the district's or school's compliance with the requirements of this section. A school that fails to comply with this section, as determined by the department, shall be subject to penalties as determined by the department.

(f) Nothing in this section shall be construed to waive liability or immunity of a school district or its officers or employees. This section shall

not create any liability for a course of legal action against a school district, its officers or employees.

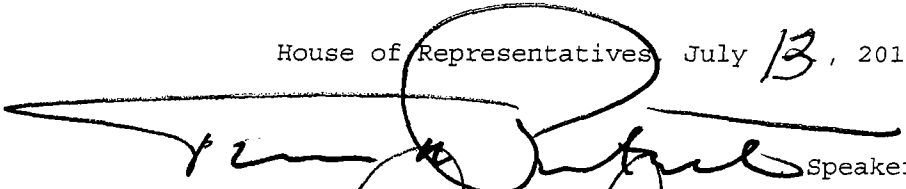
(g) A person who volunteers to assist with an extracurricular athletic activity shall not be liable for civil damages arising out of any act or omission relating to the requirements of this section, unless such person is willfully or wantonly negligent in his act or omission.

(h) The division shall adopt regulations to carry out this section.

SECTION 2. Penalties for noncompliance with the program or regulations promulgated pursuant to said section 222 of said chapter 111 shall not be imposed before January 1, 2011.

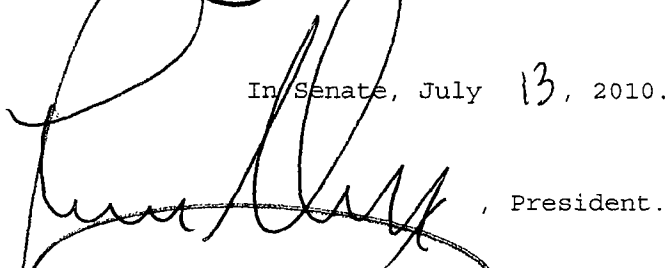
House of Representatives July 13, 2010.

Preamble adopted,

 Speaker.

In Senate, July 13, 2010.

Preamble adopted,

 President.

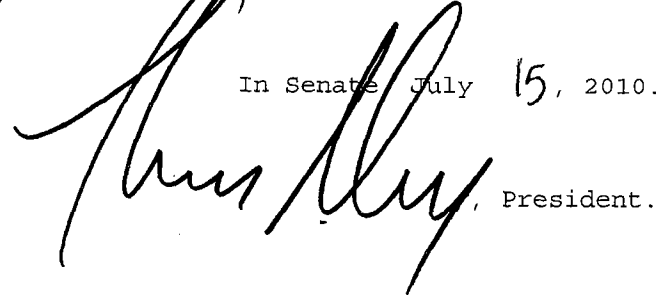
House of Representatives, July 13, 2010.

Bill passed to be enacted,

 Speaker.

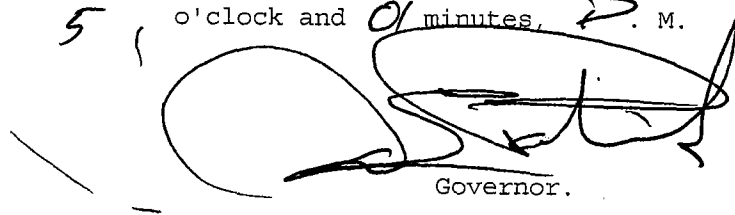
In Senate July 15, 2010.

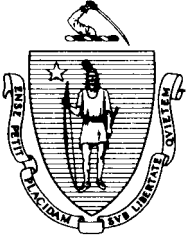
Bill passed to be enacted,

 President.

19 July, 2010.
Approved,

at 5 o'clock and 01 minutes, P. M.

 Governor.



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
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Memorandum

To: Athletic Trainers of Massachusetts, Massachusetts Association of School Committees, Massachusetts Association of Secondary School Administrators, Massachusetts Association of School Superintendents, Massachusetts Interscholastic Athletic Association, Massachusetts School Nurses Association

From: Lauren A. Smith, MD, MPH, Medical Director
Department of Public Health

Re: Updated guidance regarding sports-related head injury law

Date: October 22, 2010

As you are aware, in order to promote the safety and wellbeing of young athletes in Massachusetts, Governor Patrick signed a law on sports-related head injuries this past July. I am writing to ask for your assistance in disseminating the attached Updated Guidance on this law with your members. We hope that your members will also share it with athletic directors, coaches, and other individuals involved with the implementation of the law. In addition to providing a general summary of the law and what it means for key stakeholders, including your members, this Updated Guidance further clarifies an important aspect of the law concerning returning athletes to play.

The new law, Chapter 166 of the Acts of 2010, clearly states that students who become unconscious, who suffer a concussion, or who are *suspected* of having suffered a concussion may not return to the competition or practice where the injury occurred. In addition, the new law states that the injured student may not engage in any extracurricular athletic activity without written authorization. Therefore, our guidance, like that of the Centers for Disease Control's *Heads Up: Concussion in Youth Sports* initiative, is: "Keep the athlete out of play the day of the injury and until a health care professional, experienced in evaluating for concussion, says the athlete is symptom-free and it's OK to return to play."

I am sure your organizations are keenly aware of the growing body of scientific literature clearly demonstrating the short and long-term risks of inappropriately treated concussions. Returning a

student to play after a known or suspected concussion places the student at risk for long term health consequences, including serious injury or even death. This sound medical guidance has been summarized in several international clinical conferences on concussions and most recently by the Centers for Disease Control.

We look forward to working collaboratively with your organizations as the health and safety of student athletes in the Commonwealth is the foremost concern for all of us. If you have any questions, feel free to contact me at (617) 624-5200. Thank you again for your assistance with this important matter.

105 CMR 201.000

HEAD INJURIES AND CONCUSSIONS IN EXTRACURRICULAR ATHLETIC
ACTIVITIES

Section

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201.001: Purpose

The purpose of 105 CMR 201.000 is to provide standardized procedures for persons involved in the prevention, training, management and return to activity decisions regarding students who incur head injuries while involved in extracurricular athletic activities, including but not limited to interscholastic sports, in order to protect their health and safety.

201.002: Authority

105 CMR 201.000 is promulgated pursuant to M.G.L. c. 111, §222.

201.003: Citation

105 CMR 201.000 et seq. shall be known and may be cited as 105 CMR 201.000: Head Injuries and Concussions in Extracurricular Athletic Activities.

201.004: Effective Date

The requirements of 105 CMR 201.000 shall apply upon publication in the Massachusetts Register.

201.005 Scope

The requirements of 105 CMR 201.000 shall apply to all public middle and high schools, however configured, serving grades 6 through high school graduation, and other schools subject to the official rules of the Massachusetts Interscholastic Athletic Association. The requirements of 105 CMR 201.000 shall apply to students who participate in any extracurricular athletic activities.

201.006: Definitions

As used in 105 CMR 201.000, unless the context clearly requires otherwise, the following words shall have the following meanings:

Athlete means a student who prepares for or participates in an extracurricular athletic activity.

Athletic Director means an individual employed by a school district or school and responsible for administering the athletic program or programs of a school. The term Athletic Director refers to the Director and Assistant Directors. For schools that do not employ an Athletic Director, the term Athletic Director refers to the individual designated to be responsible for administering the athletic program or programs of a school.

Centers for Disease Control and Prevention refers to one of the major agencies of the United States Department of Health and Human Services to protect the health of people and communities through health promotion, prevention of disease, injury and disability.

Certified athletic trainer or athletic trainer means any person who is licensed by the Board of Registration in Allied Health Professions in accordance with G.L. c.112 §23A and 259 CMR 4.00 as an athletic trainer and whose practice includes schools, teams or organizations with whom the trainer is associated. Pursuant to G.L. c.112 §23A, the athletic trainer practices under the direction of a physician or dentist duly registered in the Commonwealth.

Coach means an employee or volunteer responsible for organizing and supervising student athletes to teach them the fundamental skills of extracurricular athletic activities. The term coach refers to both head coaches and assistant coaches.

Commissioner means the Commissioner of the Department of Public Health or his designee.

Concussion means a complex disturbance in brain function, due to direct or indirect trauma to the head, related to neurometabolic dysfunction, rather than structural injury.

Department means the Department of Public Health.

Diagnosis means a physician's opinion, derived from observation, examination, and evaluation of procedures or tests of a patient, including those by a nurse practitioner or certified athletic trainer.

Extracurricular athletic activity means an organized school sponsored athletic activity generally occurring outside of school instructional hours under the direction of a coach, athletic director or band leader including but not limited to Alpine and Nordic skiing and snowboarding, baseball, basketball, cheerleading, cross country track, fencing, field hockey, football, golf, gymnastics, horseback riding, ice hockey, lacrosse, marching band, rifle, rugby, soccer, skating, softball, squash, swimming and diving, tennis, track (indoor and outdoor), ultimate frisbee, volleyball, water polo, and wrestling. All interscholastic athletics are deemed to be extracurricular athletic activities.

Head injury means direct or indirect trauma to the head including a concussion or traumatic brain injury.

Massachusetts Interscholastic Athletic Association (MIAA) is a private, non-profit association organized by its member schools, public and private, to govern, coordinate and promote athletic activities in 33 sports for high school students.

MIAA member schools means all schools, whether public or private, that participate in interscholastic athletics under the auspices and rules of the Massachusetts Interscholastic Athletic Association.

Neuropsychologist means a licensed psychologist with training and experience in administering and interpreting neuropsychological tests. The neuropsychologist duties may include, but are not limited to pre-injury measurement of the cognitive abilities that may be disturbed by a concussion, testing within the first few days post-head injury, and periodic retesting to track resolution of the student's subjective symptoms and improvement in cognitive functioning. The neuropsychologist may also advise school staff regarding the student's need for post injury academic accommodations.

Parent means the parent or guardian of a student.

School means a single school that operates under the direct administration of a principal, head master, director or school leader appointed by a school district, or a charter school board or independent school board of trustees. School includes a

public school operated by a municipal or regional school district, an education collaborative established under G.L. c.40 §4E, or a school granted a charter by the Board of Elementary and Secondary Education under G.L. c.71 §89 and 603 CMR 1.00 and operated by a board of trustees including Commonwealth and Horace Mann charter schools. School includes, but is not limited to, public and other schools that are members of MIAA. The term does not include associations of home-schooled students.

School district means a municipal school department or regional school district, acting through its school committee or superintendent of schools; a county agricultural school, acting through its board of trustees or superintendent director; a charter school, acting through its board of trustees or school leader; an educational collaborative; or any other public school established by statute or charter, acting through its governing board.

School nurse means a nurse practicing in a school setting, including but not limited to a nurse who is licensed to practice as a Registered Nurse by the Board of Registration in Nursing pursuant to G.L. c.112, who is licensed to work as an educator in a school by the Department of Elementary and Secondary Education pursuant to 603 CMR 7.00, and who is appointed or assigned to a public school by a school committee or a board of health in accordance with G.L. c.71 §53 or employed by a superintendency district comprised of several towns in accordance with G.L. c. 71 §§ 53A and 53B or, who is employed, in the case of a charter or private school, by a board of trustees.

School physician means a licensed physician practicing in a school setting including but not limited to a physician who is appointed or employed by a school committee or board of health in accordance with G.L. c.71 § 53, or employed by a superintendency district comprised of several towns in accordance G.L. c.71 §§ 53A, 53B or, in the case of a charter or private school, by the board of trustees. School physician includes but is not limited to physicians assigned to examine children who apply for health certificates in order to obtain an employment permit pursuant to G.L.c.71 §54 and physicians assigned to every interscholastic football game played by any team representing a public secondary school in the Commonwealth pursuant to G.L.c.71 §54A.

School health advisory/wellness committee means a committee consisting of school and community members who advise the school district on its comprehensive, coordinated school health program.

Second impact syndrome means a potentially lethal condition that can occur when a person sustains a head injury prior to complete healing of a previous brain injury, causing dysregulation of cerebral blood flow with subsequent vascular engorgement.

Sports means extracurricular athletic activities.

Student means a person enrolled for part-time or full-time attendance in an educational program operated by a school or school district.

Teacher is any person employed in a school or school district under a license listed in 603 CMR 7.00 or person employed to teach students in a non-public school.

Traumatic brain injury (TBI) means a complex pathophysiological process affecting the brain, induced by traumatic biomechanical forces. TBI may be caused either by a direct blow to the head, face, neck or elsewhere on the body with an impulsive force transmitted to the head. TBI includes, but is not limited to, a concussion.

Volunteer means an adult who volunteers as a referee, coach, assistant coach, team parent, physician, nurse, or in an authoritative role to assist students who are engaged in an extracurricular athletic activity.

201.007: School Policies

- A. All school districts and schools must have policies and procedures governing the prevention and management of sports-related head injuries within the school district or school. The School Committee or Board of Trustees, consulting with the Board of Health where appropriate, shall adopt policies and procedures governing the prevention and management of sports-related head injuries within the school district or school following development of a proposal by a team consisting, at a minimum, of a school administrator, school nurse, school physician, athletic director, and certified athletic trainer, if available, in consultation with any existing school health/wellness advisory committee. Policies and procedures must address sports-related head injuries occurring in extracurricular athletic activities but may be applied to all head injuries in students. Review and revision of such policies and procedures shall occur as needed but at least every two years. At a minimum, these policies shall include:
- (1) Designation, by the superintendent or head master, principal or school leader, of the Athletic Director as the person responsible for the implementation of these policies and protocols;
 - (2) Annual training of persons specified in 105 CMR 201.008 in the prevention and recognition of a sports-related head injury, including second impact syndrome, and documentation of each person's completion of such training;
 - (3) Documentation of a student's history of head injury(ies) including concussion(s);

- (4) Documentation of annual physical examination of students participating in extracurricular athletic activities, consistent with 105 CMR 200.000, and completion of the Department Pre-participation Head Injury/Concussion Reporting Form For Extracurricular Activities (herein after “Department Pre-participation Form”);
- (5) Inclusion of the sports-related head injury policy and information in the student handbook;
- (6) A requirement that head injuries or suspected concussions sustained in practices or games be reported to the student’s parent so the parent may take the student to a medical provider for appropriate medical evaluation and treatment;
- (7) A requirement that head injuries or suspected concussions be reported to the school nurse, school physician and certified athletic trainer, if there are such health care professionals on staff;
- (8) A procedure for post-head injury graduated re-entry accommodation plans to school and academic activities if indicated;
- (9) Inclusion of certified athletic trainers and school nurses in development of the graduated re-entry accommodation plans for individual students as needed;
- (10) Instructions to coaches, trainers and volunteers to teach form, techniques and skills that minimize sports-related head injury. A coach, trainer or volunteer for an extracurricular athletic activity shall be directed to discourage and prohibit a student athlete from engaging in any unreasonably dangerous athletic technique that endangers the health or safety of a student, including using a helmet or any other sports equipment as a weapon; and
- (11) Penalties, including but not limited to personnel sanctions, for failure to comply with provisions of the school district’s or school’s policy.

B. These policies and procedures shall be made available to the Department and to the Department of Elementary and Secondary Education upon request.

201.008 Training Program

A. Before beginning any extracurricular athletic activity the following persons shall complete one of the training programs approved by the Department as found on the Department’s website:

- (1) Coaches;

- (2) Certified athletic trainers;
- (3) Volunteers;
- (4) School physicians;
- (5) School nurses;
- (6) Athletic Directors;
- (7) Referees and umpires who are employees, contractors, or agents of a school;
- (8) Directors responsible for a school marching band, whether employed by a school or school district or serving in such capacity as a volunteer;
- (9) Parents of a student who participates in an extracurricular athletic activity; and
- (10) Students who participate in an extracurricular athletic activity.

B. The superintendent or school leader or designee shall maintain a record of persons trained in accord with 105 CMR 201.015.

201.009 Participation Requirements for Students and Parents

A. Education and Training

- (1) Each year at the required pre-season meeting for every season, a school shall provide current Department-approved materials to all students who plan to participate in extracurricular athletic activities and their parents in advance of the student's participation. Such materials shall be posted on the Department's website and shall at minimum include a summary of the Department's rules relative to safety including but not limited to recognition of symptoms of head injury, the biology and short-term and long-term consequences of a concussion, second impact syndrome and rules for return to play after a head injury or concussion.
- (2) The student and parent shall submit to the Athletic Director as a pre-requisite to participation in extracurricular athletic activities either (a) a certification of completion for any Department approved on-line course or (b) a signed acknowledgment as to their receipt of Department approved written material required by 105 CMR 201.009(A)(1).

- (3) The training and education required by 105 CMR 201.009(A)(2) applies to one school year and must be repeated for every subsequent year.

B. Documentation of Head Injury and Concussion History

- (1) At or before the start of each sport or band season, all students who plan to participate in extracurricular athletic activities shall complete and submit to the Athletic Director a current Department Pre-participation Form, signed by both the student and the parent, that provides comprehensive history with up-to-date information relative to concussion history; any head, face or cervical spine injury history; and any history of co-existent concussive injuries.
- (2) The Athletic Director shall ensure that all forms that are required by 105 CMR 201.009(B)(1) are completed and reviewed, and shall:
 - (a) Provide each coach or band director with copies of forms from all students participating on that coach's team or band director's band;
 - (b) Distribute copies of forms which indicate a history of head injury to:
 - (i) The school physician, and
 - (ii) The school nurse; and
 - (c) Batch copies of forms which indicate a history of head injury by team or band grouping and distribute to:
 - (i) The team's physician if any, and
 - (ii) The team's certified athletic trainer(s).
- (3) If a student sustains a head injury or concussion during the season, the Department Report of Head Injury During Sports Season Form (hereinafter "Department Report of Head Injury Form") must be completed (a) by the coach or band director, if the injury or suspected concussion occurs during a game or practice, or (b) by a parent if the injury occurs outside of those settings, and forwarded to the coach or band director. The Athletic Director shall ensure that these forms are reviewed and provided to the persons specified in 105 CMR 201.009(B)(2).

201.010 Suspected Concussion Exclusion from Play

- A. Any student, who during a practice or competition, sustains a head injury or suspected concussion, or exhibits signs and symptoms of a concussion, shall be removed from the practice or competition immediately and may not return to the practice or competition that day.
- B. The student shall not return to play unless and until the student provides medical clearance and authorization as specified in 105 CMR 201.011.
- C. The coach shall communicate the nature of the injury directly to the parent in person or by phone immediately after the game or practice in which a student has been removed from play for a head injury or suspected concussion. The coach also must provide this information to the parent in writing by the end of the next business day.
- D. The coach or his/her designee shall communicate, by the end of the next business day, with the Athletic Director that the student has been removed from play for a head injury or suspected concussion.
- E. Each student who is removed from play and subsequently diagnosed with a concussion shall have a written graduated reentry plan for return to full academic and extracurricular activities.
 - (1) The plan shall be developed by the student's teachers, school nurse, certified athletic trainer (if present in the school), parent, members of the building-based student support and assistance team or individualized education program team as appropriate and in consultation with the student's physician.
 - (2) The written plan shall include but not be limited to:
 - (a) Physical and cognitive rest as appropriate;
 - (b) Graduated return to classroom studies as appropriate;
 - (c) Estimated time intervals for resumption of activities;
 - (d) Frequent assessments by the school nurse as appropriate; and
 - (e) Periodic medical assessments until full return to classroom activities and extracurricular athletic activities are authorized.
 - (3) The student must be completely symptom free and medically cleared in order to begin graduated reentry to extracurricular athletic activities.

201.011: Medical Clearance and Authorization to Return to Play

Each student who is removed from play for a head injury or suspected concussion shall obtain and present to the Athletic Director a Department Post Sports-Related Head Injury Medical Clearance and Authorization Form (herein after “Department Medical Clearance and Authorization Form”) prior to resuming the extracurricular athletic activity. This form must be completed by a physician or one of the individuals as authorized by 105 CMR 201.011(A). The ultimate return to play decision is a medical decision that may involve a multidisciplinary approach, including consultation with parents, the school nurse and teachers as appropriate.

- A. Only the following individuals may authorize a student to return to play:
- (1) A duly licensed physician;
 - (2) A certified athletic trainer in consultation with a licensed physician;
 - (3) A duly licensed nurse practitioner in consultation with a licensed physician; or
 - (4) A neuropsychologist after the student has been examined and cleared by a licensed physician.
- B. By September 2013, physicians, nurse practitioners and certified athletic trainers providing medical clearance for return to play shall verify that they have received Department-approved training in post traumatic head injury assessment or, in the case of certified athletic trainers, have received equivalent training as part of their licensure.

201.012: Responsibilities of the Athletic Director

- A. The Athletic Director shall participate in the development and biannual review of the policies and procedures required by 105 CMR 201.007 for the prevention and management of sports related head injuries within the school district or school.
- B. The Athletic Director shall be responsible for:
- (1) Completing the annual educational training as required by 105 CMR 201.008;
 - (2) Ensuring that the training requirements for staff, parents, volunteers, coaches and student are met, recorded, and records are maintained in accord with 105 CMR 201.015;
 - (3) Ensuring that all students meet the physical examination

requirements consistent with 105 CMR 200.000 prior to participation in any extracurricular athletic activity;

- (4) Ensuring that all students participating in extracurricular athletic activities have completed and submitted the Department Pre-participation Form prior to participation each season;
- (5) Ensuring that copies of the students' Department Pre-participation Form are distributed to the students' coach and/or band leader;
- (6) Ensuring that all Department Pre-participation Forms are reviewed and those positive for prior head injuries or those that raise questions regarding student health and safety are copied and provided to the school nurse, certified athletic trainer and school or team physician;
- (7) Ensuring that the Department Report of Head Injury Form are copied and provided to the school nurse, certified athletic trainer and school or team physician for follow-up;
- (8) Discouraging and prohibiting a student athlete from engaging in any unreasonably dangerous athletic technique that endangers the health or safety of a student, including using a helmet or any other sports equipment as a weapon; and
- (9) Reporting annual statistics to the Department in accord with 105 CMR 201.016.

201.013: Responsibilities of Coaches, Certified Athletic Trainers, and Volunteers

A. Coaches, certified athletic trainers, and volunteers shall be responsible for:

- (1) Completing the annual educational training as required by 105 CMR 201.008;
- (2) Ensuring that all students have submitted (a) updated physical examinations consistent with 105 CMR 200.00 and (b) completed Department Pre-participation Forms required by 105 CMR 201.009(B)(1) before participating in practice or extracurricular athletic activities;
- (3) Teaching techniques aimed at minimizing sports-related head injury;
- (4) Discouraging and prohibiting student athletes from engaging in any unreasonably dangerous athletic technique that endangers the health or safety of a student, including using a helmet or any other sports equipment as a weapon; and
- (5) Identifying students with head injuries or suspected concussions that occur in play or practice and removing them from play.

- B. Coaches are responsible for communicating promptly with the parent of any student removed from play as directed in 105 CMR 201.010(C) and (D).
- C. Coaches or certified athletic trainers, upon identification of students with head injuries or suspected concussion that occur in play or practice, shall complete a Department Report of Head Injury Form and transmit it to the Athletic Director, the parent, the certified athletic trainer, and the school nurse.

201.014: Responsibilities of the School Nurse

The School Nurse shall be responsible for:

- A. Completing the annual educational training as required by 105 CMR 201.008;
- B. Reviewing any questions raised by the Athletic Director regarding Department Pre-participation Forms and following up with parents as needed prior to the student's participation in extracurricular athletic activities;
- C. Maintaining (1) Department Pre-participation Forms and (2) Department Report of Head Injury Forms in the student's health record;
- D. Participating in the graduated reentry planning meeting for students who have been diagnosed with a concussion to discuss any necessary accommodations or modifications with respect to academics, course requirements, homework, testing, scheduling and other aspects of school activities consistent with a graduated reentry plan for return to full academic and extracurricular activities after a head injury and revising the health care plan as needed;
- E. Monitoring recuperating students with head injuries and collaborating with teachers to ensure that the graduated reentry plan for return to full academic and extracurricular activities required by 105 CMR 201.010(E) is being followed;
and
- F. Providing ongoing educational materials on head injury and concussion to teachers, staff and students.

201.015 Record Maintenance

- A. The school, consistent with any applicable state and federal law, shall maintain the following records for 3 years or at a minimum until the student graduates:
 - (1) Verifications of completion of annual training and receipt of materials;
 - (2) Department Pre-participation Forms;

- (3) Department Report of Head Injury Forms;
 - (4) Department Medical Clearance and Authorization Forms; and
 - (5) Graduated re-entry plans for return to full academic and extracurricular activities.
- B. The school shall make these records available to the Department and the Department of Elementary and Secondary Education, upon request or in connection with any inspection or program review.

201.016 Reporting

Starting school year 2011-2012, schools shall be responsible for maintaining and reporting annual statistics on a Department form or electronic format that at minimum report:

- A. The total number of Department Report of Head Injury Forms received by the school; and
- B. The total number of students who incur head injuries and suspected concussions when engaged in any extracurricular athletic activities.