

[Protecting Student Athletes From Concussions Act of 2017 \(HR 3580, 115th Congress\)](#)

Encourages the development and implementation of a concussion safety plan for public elementary and secondary schools served by local education agencies.

Updated last **November 28, 2017**
for the 07/28/2017 version of HR 3580.

WHAT IT DOES

The Protecting Student Athletes from Concussions Act of 2017 ([HR 3580](#)) encourages states to implement laws and regulations that would require local education agencies to promote awareness of and implement policies for the prevention and treatment of concussion-related injuries in primary and/or secondary schools.

The bill defines a concussion as a mild traumatic brain injury caused by a blow or jolt to the head that causes the brain to move rapidly in the skull and results in impaired brain functioning, which can present physically, cognitively, and emotionally.

HR 3580 specifically amends the [Elementary and Secondary Education Act of 1965 \(20 U.S.C. 7881 et seq.\)](#) to incentivize states to develop legislation that would require local education agencies to develop and implement a standardized plan for concussion safety and management. These plans must include strategies for the following:

- Training school personnel on evidence-based concussion safety and management;
- Providing students and parents with information and forms regarding concussion observation, treatment, monitoring, and reports, as well as post-injury and prevention information;
- Guiding students in resuming participation in athletic and academic activities, including by progressively reintroducing cognitive demands;
- Evaluating students in accordance with the [Individuals with Disabilities Education Act \(20 U.S.C. 1400 et seq.\)](#) and the [Rehabilitation Act of 1973 \(29 U.S.C. 701 et seq.\)](#), if concussion symptoms persist for substantial periods of time, to see if they qualify for services provided under those acts; and
- Developing the best practices designed to ensure uniformity of safety standards, treatment, and management.

Furthermore, in order to receive federal funding, states would need to require the following:

- That information regarding concussion risks, signs, symptoms, and response measures shall be posted on school grounds and school websites. This may include the definition of a concussion;
- That any school official that suspects a student has suffered a concussion during a school-sponsored activity report their suspicions to the school's concussion management team so that the student will be removed from participation in that activity. That team will notify the student's parents of the injury;
- That a student who suffered a concussion will only be allowed to return to athletics if they are completely asymptomatic and if the reintroduction is progressive; and
- That the student's reintroduction to academics is gradual and allows for flexibility, accommodations to the injury, and periods of cognitive rest.

RELEVANT SCIENCE

[Concussions](#), as defined by the Centers for Disease Control and Prevention (CDC), are a form of traumatic brain injury that is caused by a bump, blow, or jolt to the head or by a hit to the body, which causes the head and brain to move rapidly back and forth. This

sudden movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging brain cells. Concussions are often referred to as mild traumatic brain injuries because in most cases they do not directly lead to death; however, mild traumatic brain injuries may lead to severe long-term effects.

[The Brain Injury Association of America](#) defines the three main symptoms of mild traumatic brain injuries as the following:

- Physical symptoms, including changes in vision, headaches, sensitivity to sound, feeling dizzy/unbalanced, and nausea;
- Cognitive symptoms, including trouble with thinking through problems, a slow-moving feeling, feeling foggy or confused while concentrating, and having difficulty remembering; and
- Behavioral symptoms, including irritability, impulsiveness, lack of emotional responsiveness, depression, anxiety, and an overall change in sleeping patterns.

A person suffering from a severe mild traumatic brain injury can experience long-term effects such as defects in memory, speech, hearing, vision, balance, and emotions; the likelihood of developing these symptoms will increase if appropriate measures are not taken immediately post-injury.

In recent years, traumatic brain injuries have been a principal focus of medical research. A [study](#) published in the Journal of American Medical Association found that concussion rates for high school athletes increased 16% every year between 1997 and 2008. Additionally, other groups have [shown](#) that the number of sports-related concussions that occur each year in adolescent athletes is often underreported due to limited efforts to detect and monitor concussions in this age demographic.

Notably, [researchers](#) from two [groups](#) have identified adolescent athletes as particularly more susceptible to working memory impairments and development of [second impact syndrome](#) (SIS) compared to all other age groups. SIS refers to a second concussion that is endured before the first concussion is fully healed. This second concussion can lead to rapid and severe swelling of the brain. Increased risk for developing SIS is explained by the ongoing development of the frontal lobe of the brain in adolescents. The frontal lobe, the foremost area of the brain in the front of the skull, is the area of the brain where cognition and memory learning take place. Damage to this area of the brain during development could permanently change the architecture and functionality of this lobe and lead to permanent, long-term, adverse effects.

RELEVANT EXPERTS

[Dr. Jeffrey Ryszard Bytomski](#), D.O., is an Associate Professor in Community and Family Medicine at Duke University. His research and practice to date has been focused on sports medicine and sports-related injuries. Dr. Bytomski's work examines the evolution of prevention, cause, and treatment of concussions as well as other injuries.

Relevant publications:

- Bytomski, Jeffrey, and Blake Boggess. 2013. "[Medicolegal Aspects of Sports Medicine](#)." *Primary Care: Clinics in Office Practice* 40(1): 525 - 535. doi:[10.1016/j.pop.2013.02.008](#)

BACKGROUND

Currently there are not any standardized practices in place for monitoring the return of a student recovering from a concussion to either athletics or academics. According to the CDC, there are only [support services](#) available such as the [Response to Intervention Protocol](#), the [504 Plan](#), and the [Individualized Education Plan](#). The CDC also offers a free, online concussion training course specifically for children in grades kindergarten through twelve called [Heads Up](#). However, all of these programs and courses are only encouraged as suggested resources and not mandated for use in primary or secondary schools.

ENDORSEMENTS & OPPOSITION

At present, there have not been any publicly reported endorsements of or opposition to this bill. However, the topic of youth concussion awareness has received much support from elected officials.

Senators Tom Udall (D-NM), Amy Klobuchar (D-MN), and Richard Blumenthal (D-CT), and Representatives Bill Pascrell (D-NJ-9) and Tom Rooney (R-FL-17) previously [supported](#) legislation ([HR 4460](#) / [S 2508](#), 114th Congress; [SciPol brief available](#)) that would have increased government oversight on protective sports equipment. Senator Udall said, “The important thing here is educating people about what the risks [of concussions] are. So that’s what we’re trying to educate people on, and make sure that these manufacturers of equipment aren’t trying to prey on people’s fears, because frequently that’s what they’re doing.”

A previous version of this bill ([S 988](#), 114th Congress), was publicly [endorsed](#) by the National Football League, the National Hockey League, the National Basketball Association, the Major League Baseball, the National Collegiate Athletic Association, the [American Academy of Neurology](#), the [American College of Sports Medicine](#), the [Illinois High School Association](#) (whose concussion protocols and policies originally inspired the legislation), and the [National Council of Youth Sports](#).

STATUS

HR 3580 was introduced in the House of Representatives on July 28, 2017, and referred to the [House Committee on Education and the Workforce](#) on the same date.

RELATED POLICIES

The attention around concussion prevention, awareness, and treatment has increased over the past few decades. In 2009, Washington state became the first state to pass a comprehensive youth sports concussion law, the [Zackery Lystedt Law](#), named after a high-school student who faced [life-threatening head injuries](#) while remaining in a football game after receiving a concussion. This law [prohibits](#) any youth athlete suspected of having a concussion from returning to sports until they receive a doctor’s approval. By 2014, all 50 states and the District of Columbia had enacted similar legislation.

In the 115th Congress, the Concussion Awareness and Education Act of 2017 ([HR 2360](#); [SciPol brief available](#)) would standardize the data collection process for concussion injuries across the nation.

Along with legislation, various localities have also implemented diagnostic tests for assessing concussions, such as [ImPACT](#) (Immediate Post-Concussion Assessment and Cognitive Testing) ([SciPol brief available](#)). This test has been cleared by the Food and Drug Administration to assess concussions in ages five through 59 and evaluates multiple aspects of neuropsychological function including medical history, attention span, and impulse control.

POLICY HISTORY

HR 3580 is the fifth version of the Protecting Student Athletes from Concussions Act. The bill was originally introduced as the Protecting Student Athletes from Concussions Act of 2010 ([HR 6172](#), 111th Congress) and again as the Protecting Student Athletes from Concussions Act of 2011 ([HR 469](#), 112th Congress); both of these versions were sponsored by [Representative Timothy H. Bishop](#) (D-NY-1). The bill was next introduced into the Senate and the House for the third time as the Protecting Student Athletes from Concussions Act of 2013 ([S 1546](#) / [HR 3532](#), 113th Congress) by [Senator Richard Durbin](#) (D-IL) and Representative Timothy H. Bishop (D-NY-1), respectively. The fourth introduction of this bill was in 2015 ([S 988](#) / [HR 2062](#), 114th Congress) by Senator Richard Durbin (D-IL) and [Representative Mark DeSaulnier](#) (D-CA-11), respectively.

SPONSORS

[Representative Mark DeSaulnier](#) (D-CA-11)

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