



State of Tennessee
PUBLIC CHAPTER NO. 148

SENATE BILL NO. 882

By Tracy, Hensley, Dickerson, Massey, Tate, Burks, Ford, Green, Haile

Substituted for: House Bill No. 867

By Sexton, Ramsey, Casada, Fitzhugh, Hardaway, Stewart, Favors, Powell, McCormick,
Ryan Williams, Kevin Brooks, Marsh, Travis

AN ACT to amend Tennessee Code Annotated, Title 49 and Title 68, Chapter 55, relative to youth sports-related injuries.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Title 68, Chapter 55, is amended by adding the following as a new Part 5:

68-55-501. As used in this part, unless the context otherwise requires:

(1) "Community-based youth athletic activity" or "youth athletic activity" means an athletic activity organized by a city, county, business or nonprofit organization where the majority of the participants are under eighteen (18) years of age, and are engaging in an organized athletic game or competition against another team, club or entity or in practice or preparation for an organized game or competition against another team, club or entity. "Community-based youth athletic activity" does not include college or university activities or an activity which is entered into for instructional purposes only, an athletic activity that is incidental to a nonathletic program or a lesson;

(2) "Department" means the department of health;

(3) "Health care provider" means a Tennessee licensed medical doctor (M.D.), osteopathic physician (D.O.), or a clinical neuropsychologist with concussion training;

(4) "Person" means any individual or governmental entity, corporation, association, organization, nonprofit institution or other entity or such entities' representatives; and

(5) "School youth athletic activity" means a school or local education agency organized athletic activity where the majority of the participants are under eighteen (18) years of age, and are engaging in an organized athletic game or competition against another team, club or entity or in practice or preparation for an organized game or competition against another team, club, or entity. "School youth athletic activity" does not include college or university activities or an activity which is entered into for instructional purposes only, an athletic activity that is incidental to a nonathletic program or a lesson.

68-55-502.

(a) This section applies to school youth athletic activity.

(b)(1) The governing authority of each public and nonpublic elementary school, middle school, junior high school and high school, working through guidance approved by the department of health and communicated through the department of education, shall at a minimum:

(A) Adopt guidelines and other pertinent information and forms as approved by the department of health to inform and educate coaches, school administrators, youth athletes and their parents or guardians of the nature, risk and symptoms of concussion and head injury, including continuing to play after concussion or head injury;

(B) Require annual completion by all coaches, whether the coach is employed or a volunteer, and by school athletic directors of a concussion recognition and head injury safety education course program approved by the department. In developing the program, the department may use any of the materials readily available from the centers for disease control and prevention, but shall include the centers' concussion signs and symptoms checklist which must be used by a licensed health care professional, coach or other designated person making a determination as to whether a youth athlete exhibits signs, symptoms or behaviors consistent with a concussion. The department shall make the concussion recognition and head injury safety education course program available on its website for any school to access free of charge. The program shall include, but not be limited to:

(i) Current training in recognizing the signs and symptoms of potentially catastrophic head injuries, concussions and injuries related to second impact syndrome;

(ii) The necessity of obtaining proper medical attention for a person suspected of having sustained a concussion; and

(iii) The nature and risk of concussions, including the danger of continuing to play after sustaining a concussion and the proper method and statutory requirements that must be satisfied in order for a youth athlete to return to play in the athletic activity;

(C) Require that, on a yearly basis, a concussion and head injury information sheet be signed and returned by each coach and athletic director and, if appointed, a licensed health care professional to the lead administrator of a nonpublic school or, for a public school, the local education agency's director of schools prior to initiating practice or competition for the year;

(D) Require that, on a yearly basis, a concussion and head injury information sheet be reviewed by all youth athletes and an athlete's parent or guardian. The information sheet shall be signed and returned by the youth athlete, if the youth athlete is eighteen (18) years of age or older, otherwise by the athlete's parent or guardian, prior to the youth athlete's initiating practice or competition to confirm that both the parent or guardian and the youth athlete have reviewed the information and understand its contents. The information sheet shall include, but not be limited to:

(i) Written information related to the recognition of symptoms of head injuries;

(ii) The biology and the short-term and long-term consequences of a concussion written in layman's terminology;

(iii) A summary of state board of education rules and regulations relative to safety regulations for the student's participation in extracurricular athletic activities; and

(iv) The medical standard of care for post-concussion participation or participation in an extracurricular athletic activity;

(E) Maintain all documentation of the completion of a concussion recognition and head injury safety education course program and signed concussion and head injury information sheets for a period of three (3) years;

(F) Establish as policy the immediate removal of any youth athlete who shows signs, symptoms and behaviors consistent with a concussion from the activity or competition for evaluation by a licensed health care professional, if available, and, if not, by the coach or other designated person. In determining whether a youth athlete suffered from a possible concussion, the centers for disease control and

prevention's concussion signs and symptoms checklist shall be utilized; and

(G) Establish as policy that a youth athlete who has been removed from play shall not return to the practice or competition during which the youth athlete suffered, or is suspected to have suffered, a concussion and not return to play or participate in any supervised team activities involving physical exertion, including games, competitions or practices, until the youth athlete is evaluated by a health care provider and receives written clearance from the health care provider for a full or graduated return to play. This subdivision (G) shall not apply if there is a legitimate explanation other than a concussion for the signs, symptoms or behaviors observed.

(2) After a youth athlete who has sustained a concussion or head injury has been evaluated and received clearance for a graduated return to play from a health care provider, then a school may allow a licensed health care professional, if available, with specific knowledge of the youth athlete's condition to manage the youth athlete's graduated return to play based upon the health care provider's recommendations. The licensed health care professional, if not the youth athlete's health care provider, shall provide updates to the health care provider on the progress of the youth athlete, if requested.

(3) No licensed health care professional or other person acting in good faith within the authority prescribed under subdivisions (b)(1)(F) and (b)(1)(G) or subdivision (b)(2) shall be liable on account of any act or omission in "good faith" while so engaged; provided, that "good faith", as used in this subdivision (b)(3), shall not include willful misconduct, gross negligence or reckless disregard.

(4) Excluding health care providers, all licensed health care professionals, performing any of the functions required by this act, shall receive training in the evaluation and management of concussions. Each such licensed health care professional shall, at a minimum, complete the National Federation of State High School Association's (NFHS) training course on concussions in sports or review the CDC Concussion Toolkit for Physicians and shall also complete additional training as may be required by the department.

68-55-503.

(a) This section applies to community-based youth athletic activity.

(b)(1) Any city, county, business or nonprofit organization that organizes a community-based youth athletic activity for which an activity fee is charged, working through guidance from the department of health, shall at a minimum:

(A) Adopt guidelines and other pertinent information and forms as developed by the department of health to inform and educate the director of the youth athletic activity, coaches, youth athletes and their parents or guardians of the nature, risk and symptoms of concussion and head injury, including continuing to play after concussion or head injury;

(B) Require annual completion by the director of the youth athletic activity, all coaches, whether a coach is employed or a volunteer, and, if appointed, the licensed health care professional of a concussion recognition and head injury safety education course program developed by the department. In developing the program, the department may use any of the materials readily available from the centers for disease control and prevention, but shall include the centers' concussion signs and symptoms checklist which must be used by a licensed health care professional, coach or other designated person making a determination as to whether a youth athlete exhibits signs, symptoms or behaviors consistent with a concussion. The department shall make the concussion recognition and head injury safety education course program available on its website for any youth athletic activity operated by a city, county, business or nonprofit

organization to access free of charge. The program shall include, but not be limited to:

(i) Current training in recognizing the signs and symptoms of potentially catastrophic head injuries, concussions and injuries related to second impact syndrome;

(ii) The necessity of obtaining proper medical attention for a person suspected of having sustained a concussion; and

(iii) The nature and risk of concussions, including the danger of continuing to play after sustaining a concussion and the proper method and statutory requirements that must be satisfied in order for a youth athlete to return to play in the athletic activity;

(C) Require that, on a yearly basis, a concussion and head injury information sheet be signed and returned by each coach to the head of the youth athletic activity prior to initiating practice or competition for the year;

(D) Require that, on a yearly basis, a concussion and head injury information sheet be reviewed by all youth athletes and an athlete's parent or guardian. The information sheet shall be signed and returned by the youth athlete, if the youth athlete is eighteen (18) years of age or older, otherwise by the athlete's parent or guardian, prior to the youth athlete's initiating practice or competition to confirm that both the parent or guardian and the youth athlete have reviewed the information and understand its contents. The information sheet shall include, but not be limited to:

(i) Written information related to the recognition of symptoms of head injuries;

(ii) The biology and the short-term and long-term consequences of a concussion written in layman's terminology; and

(iii) The medical standard of care for post-concussion participation or participation in an athletic activity;

(E) Maintain all documentation of the completion of a concussion recognition and head injury safety education course program and signed concussion and head injury information sheets for a period of three (3) years;

(F) Establish as policy the immediate removal of any youth athlete who shows signs, symptoms, and behaviors consistent with a concussion from the activity or competition for evaluation by the licensed health care professional, if available, and, if not, by the coach or other designated person. In determining whether a youth athlete suffered from a possible concussion, the centers for disease control and prevention's concussion signs and symptoms checklist shall be utilized;

(G) Establish as policy that a youth athlete who has been removed from play shall not return to the practice or competition during which the youth athlete suffered, or is suspected to have suffered, a concussion and not return to play or participate in any supervised team activities involving physical exertion, including games, competitions or practices, until the youth athlete is evaluated by a health care provider and receives written clearance from the health care provider for a full or graduated return to play. This subdivision (G) shall not apply if there is a legitimate explanation other than a concussion for the signs, symptoms, or behaviors observed.

(2) After a youth athlete who has sustained a concussion or head injury has been evaluated and received clearance for a graduated return to play from a health care provider, then the organizer of the community-based youth athletic activity may allow a licensed health care professional, if

available, with specific knowledge of the youth athlete's condition to manage the youth athlete's graduated return to play based upon the health care provider's recommendations. The licensed health care professional, if not the youth athlete's health care provider, shall provide updates to the health care provider on the progress of the youth athlete, if requested.

(3) No licensed health care professional or other person acting in good faith within the authority prescribed under subdivisions (b)(1)(F) and (b)(1)(G) or subdivision (b)(2) shall be liable on account of any act or omission in "good faith" while so engaged; provided, that "good faith" as used in this subdivision (b)(3) shall not include willful misconduct, gross negligence or reckless disregard.

(4) Excluding health care providers, all licensed health care professionals, performing any of the functions required by this act, shall receive training in the evaluation and management of concussions. Each such licensed health care professional shall, at a minimum, complete the National Federation of State High School Association's (NFHS) training course on concussions in sports or review the CDC Concussion Toolkit for Physicians and shall also complete additional training as may be required by the department.

SECTION 2. This act shall take effect January 1, 2014, the public welfare requiring it.

SENATE BILL NO. 882

PASSED: March 21, 2013



RON RAMSEY
SPEAKER OF THE SENATE



BETH HARWELL, SPEAKER
HOUSE OF REPRESENTATIVES

APPROVED this 12th day of April 2013



BILL HASLAM, GOVERNOR