

REDUCING HEAD AND NECK INJURIES IN FOOTBALL

1. Athletes must be given proper conditioning exercises which will strengthen their necks so they can **KEEP THE HEAD UP WHEN BLOCKING AND TACKLING**. Ball carriers should also be taught to keep their heads up when making contact with a tackler.
2. Coaches should drill the athletes in proper execution of the fundamental football skills, particularly blocking and tackling. **CONTACT SHOULD ALWAYS BE MADE WITH THE HEAD UP AND NEVER WITH THE TOP OF THE HEAD/HELMET.**
3. Coaches and officials should discourage the players from using their heads as battering rams. The **RULES PROHIBITING SPEARING AND FACE FIRST CONTACT MUST BE ENFORCED IN PRACTICE AND IN GAMES.**
4. All **COACHES, PHYSICIANS, AND ATHLETIC TRAINERS SHOULD TAKE SPECIAL CARE TO SEE THAT THE PLAYER'S EQUIPMENT IS PROPERLY FITTED, PARTICULARLY THE HELMET.**
5. **ANY PLAYER WHO HAS EXPERIENCED, OR SHOWN SIGNS, OF HEAD TRAUMA** (*loss of consciousness, visual disturbances, headache, inability to walk correctly, obvious disorientation, memory loss*) **SHOULD RECEIVE IMMEDIATE MEDICAL ATTENTION AND SHOULD NOT BE ALLOWED TO RETURN TO PRACTICE OR COMPETITION WITHOUT PERMISSION FROM THE PROPER MEDICAL AUTHORITIES.**
6. **PLAYERS SHOULD BE MADE AWARE OF THE SIGNS OF CONCUSSION.** Players should also be encouraged to inform the team physician, athletic trainer, or coach if they are experiencing any of the above-mentioned signs of brain trauma.
7. **ONLY QUALIFIED MEDICAL PERSONNEL SHOULD MAKE THE DECISION WHETHER A PLAYER RETURNS TO A GAME OR ACTIVE PARTICIPATION IN A PRACTICE IF THAT PLAYER HAS EXPERIENCED A BRAIN TRAUMA.**

IOWA HIGH SCHOOL ATHLETIC ASSOCIATION, 2009

Adapted from: The Annual Survey of Football Injury Research, 1931-2008 by The American Football Coaches Association.