Concussion Awareness
Parent/Student-Athlete Acknowledgement Statement

I ___________________________, the parent/guardian of ___________________________,

Parent/Guardian ___________________________, Name of Student-Athlete

acknowledge that I have received information on all of the following:

• The definition of a concussion

• The signs and symptoms of a concussion to observe for or that may be reported by my athlete

• How to help my athlete prevent a concussion

• What to do if I think my athlete has a concussion, specifically, to seek medical attention right away, keep my athlete out of play, tell the coach about a recent concussion, and report any concussion and/or symptoms to your physician.

Parent/Guardian ___________________________ Date __________

SIGNATURE

Student Athlete ___________________________ Date __________

SIGNATURE

It's better to miss one game than the whole season.
A Parent’s Guide to Concussion in Sports

What is a concussion?

- A concussion is a brain injury which results in a temporary disruption of normal brain function. A concussion occurs when the brain is violently rocked back and forth or twisted inside the skull as a result of a blow to the head or body. An athlete does not have to lose consciousness ("knocked-out") to suffer a concussion.

Concussion Facts

- It is estimated that over 140,000 high school athletes across the United States suffer a concussion each year. (Data from NFHS Injury Surveillance System)
- Concussions occur most frequently in football, but girl's lacrosse, girl's soccer, boy's lacrosse, wrestling and girl's basketball follow closely behind. All athletes are at risk.
- A concussion is a traumatic injury to the brain.
- Concussion symptoms may last from a few days to several months.
- Concussions can cause symptoms which interfere with school, work, and social life.
- An athlete should not return to sports while still having symptoms from a concussion as they are at risk for prolonging symptoms and further injury.
- A concussion may cause multiple symptoms. Many symptoms appear immediately after the injury, while others may develop over the next several days or weeks. The symptoms may be subtle and are often difficult to fully recognize.
What are the signs and symptoms of a concussion?

<table>
<thead>
<tr>
<th>SIGNS OBSERVED BY PARENTS, FRIENDS, TEACHERS OR COACHES</th>
<th>SYMPTOMS REPORTED BY ATHLETE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appears dazed or stunned</td>
<td>Headache</td>
</tr>
<tr>
<td>Is confused about what to do</td>
<td>Nausea</td>
</tr>
<tr>
<td>Forgets plays</td>
<td>Balance problems or dizziness</td>
</tr>
<tr>
<td>Is unsure of game, score, or opponent</td>
<td>Double or fuzzy vision</td>
</tr>
<tr>
<td>Moves clumsily</td>
<td>Sensitivity to light or noise</td>
</tr>
<tr>
<td>Answers questions slowly</td>
<td>Feeling sluggish</td>
</tr>
<tr>
<td>Loses consciousness</td>
<td>Feeling foggy or groggy</td>
</tr>
<tr>
<td>Shows behavior or personality changes</td>
<td>Concentration or memory problems</td>
</tr>
<tr>
<td>Can’t recall events prior to hit</td>
<td>Confusion</td>
</tr>
<tr>
<td>Can’t recall events after hit</td>
<td></td>
</tr>
</tbody>
</table>

What should I do if I think my child has had a concussion?

If an athlete is suspected of having a concussion, he or she must be immediately removed from play, be it a game or practice. Continuing to participate in physical activity after a concussion can lead to worsening concussion symptoms, increased risk for further injury, and even death. Parents and coaches are not expected to be able to “diagnose” a concussion, as that is the job of a medical professional. However, you must be aware of the signs and symptoms of a concussion and if you are suspicious, then your child must stop playing:

When in doubt, sit them out!

All athletes who sustain a concussion need to be evaluated by a health care professional who is familiar with sports concussions. You should call your child’s physician and explain what has happened and follow your physician’s instructions. If your child is vomiting, has a severe headache, is having difficulty staying awake or answering simple questions he or she should be taken to the emergency department immediately.
# RETURN TO ACADEMICS PROGRESSION

Progression is individual. All concussions are different. Students may start at any of these steps, depending on symptoms, and may remain at a step longer if needed. If symptoms worsen, the CMT should reassess. If symptoms quickly improve, a student may also skip a step or two. Be flexible!

<table>
<thead>
<tr>
<th>Steps</th>
<th>Progression</th>
<th>Description</th>
</tr>
</thead>
</table>
| 1     | HOME – Cognitive and physical rest | ➢ Stay at home  
➢ No driving  
➢ Limited mental exertion – computer, texting, video games, homework |
| 2     | HOME – Light Mental Activity | ➢ Stay at home  
➢ No driving  
➢ Up to 30 minutes mental exertion  
➢ No prolonged concentration |

Progress to Step 3 when student handles up to 30 minutes of sustained mental exertion without worsening of symptoms.

| 3     | SCHOOL – Part Time  
Maximum adjustments  
Shortened day/schedule  
Built-in breaks | ➢ Provide quiet place for scheduled mental rest  
Lunch in quiet environment  
No significant classroom or standardized testing  
Modify rather than postpone academics  
Provide extra time, help, and adjustment of assignments |

Progress to Step 4 when student handles 30-40 minutes of sustained mental exertion without worsening of symptoms.

| 4     | SCHOOL – Part Time  
Maximum adjustments  
Shortened day/schedule | ➢ No standardized testing  
➢ Modified classroom testing  
➢ Moderate decrease of extra time, help, and modification of assignments |

Progress to Step 5 when student handles 60 minutes of mental exertion without worsening of symptoms.

| 5     | SCHOOL – Part Time  
Minimal adjustments | ➢ No standardized testing; routine tests are OK  
Continued decrease of extra time, help, and adjustment of assignments  
May require more support in academically challenging subjects |

Progress to Step 6 when student handles all class periods in succession without worsening of symptoms AND receives medical clearance for full return to academics and athletics.

| 6     | SCHOOL – Full Time  
Full academics  
No adjustments | ➢ Attends all classes  
➢ Full homework and testing |

When symptoms continue beyond 3-4 weeks, prolonged in-school supports are required. Request a 504 meeting to plan and coordinate student supports.

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# RETURN TO PLAY PROGRESSION

Return to play is a medical decision. The CMT will be familiar with state concussion laws and understand which healthcare providers may clear a student. To begin the Return to Play Plan, the student must be free of all symptoms (see Signs and Symptoms of Concussion), have no academic adjustments in place, and be cleared by a healthcare provider. The student may spend 1-2 days at each step before advancing to the next. If post-concussion symptoms occur at any step, stop activity and have the CMT reassess.

<table>
<thead>
<tr>
<th>Rehabilitation Stage</th>
<th>Functional exercise at each stage of rehabilitation</th>
<th>Objective of each stage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. No activity</td>
<td>Symptom limited physical and cognitive rest.</td>
<td>Recovery</td>
</tr>
<tr>
<td>2. Light aerobic exercise</td>
<td>Walking, swimming or stationary cycling keeping intensity &lt;70% maximum permitted heart rate. No resistance training.</td>
<td>Increase HR</td>
</tr>
<tr>
<td>3. Sport-specific exercise</td>
<td>Skating drills in ice hockey, running drills in soccer. No head impact activities.</td>
<td>Add movement</td>
</tr>
<tr>
<td>4. Non-contact training drills</td>
<td>Progression to more complex training drills, e.g., passing drills in football and ice hockey. May start progressive resistance training.</td>
<td>Exercise, coordination and cognitive load</td>
</tr>
<tr>
<td>5. Full-contact Practice</td>
<td>Following medical clearance. Participate in normal training activities.</td>
<td>Restore confidence and assess functional skills by coaching staff</td>
</tr>
<tr>
<td>6. Return to play</td>
<td>Normal game play</td>
<td></td>
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</tbody>
</table>


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