

Concussion Home Instructions

I believe that _____ sustained a possible concussion during practice/game today. Parents play a key role in maximizing a child's recovery from a concussion. To make sure your student athlete recovers as safely and quickly as possible, please follow the recommendations listed below.

1. Contact your child's healthcare provider for further evaluation/instructions.
2. Please follow the instructions outlined below for home care until your child can be seen by a healthcare provider:
 - a. Do not take pain-relieving medication such as Tylenol or Ibuprofen until directed by your healthcare provider.
 - b. Eat a light diet
 - c. Drink water
 - d. Rest comfortable
 - e. Go to sleep, but wake every 3 hours to check for responsiveness
 - f. Eliminate/Minimize the use of computers, cell phones, and T.V.
3. Seek immediate care if the following occur:
 - a. Significant increase or localized headache
 - b. Decreasing level of consciousness
 - c. Increasing symptoms of dizziness, disorientation
 - d. Unequal pupil size
 - e. Mental status changes: lethargy difficulty maintaining arousal, change in attitude/demeanor (confusion, agitation)
 - f. Seizure activity
 - g. Vomiting
 - h. Inability to move a body part or loss of balance
 - i. Anything out of ordinary for your child
4. If a diagnosis of a concussion is received from your healthcare provider, you will need to continue to monitor symptoms and activities at home.
5. Enforce rest, both physical and cognitive, and ensure your child receives sufficient sleep and engages in quiet, restful activities immediately following a concussion.
6. Take students to follow-up appointments with the healthcare provider.
7. For the first few days, the student/athlete may have symptoms that interfere with concentration and may need to stay home from school to rest for a day or two and refrain from:
 - a. Watching TV
 - b. Playing video games
 - c. Texting
 - d. working/playing on computer or iPad
 - e. Driving
 - f. Use of cell phone
 - g. Blowing on a musical instrument
 - h. Piano lessons

8. Light mental activities can resume as long as symptoms do not worsen. When the student/athlete can tolerate 30-45 minutes of light mental activity, a gradual return to school can commence.
9. An individualized Return to Learn Plan, stating any modifications or accommodations needed at school, will be developed and shared with you by the CMT (Concussion Management Team). The Return to Learn protocol is followed until the athlete/student is symptom free.
10. Once your child has returned to school, continue to monitor and track symptoms at home using the Sway Medical symptoms testing on a daily basis and communicate regularly with the school Concussion Management team (CMT) Coordinator and/or healthcare provider.
11. Sign permission at the school for a two-way Release of Information between your medical provider and the school district.
12. Athletes/students who are diagnosed with a concussion will not be permitted to engage in any form of physical activity including, but not limited to, sports practice/games, P.E. classes, marching band, dance or cheer team practice/performances, recess, etc. until clearance has been received from the CMT, medical healthcare professional, and parents.
13. Once the athlete/student is symptom free and has returned to full classroom activity with no accommodations in place, a neurocognitive test will be conducted. If the athlete is determined to be at their baseline, the stepwise Return to Play criteria will be followed once you and your child's physician have signed the Concussion Return to Play Clearance Form.
14. You will be responsible for delivering medical clearance from your healthcare provider to the CMT when appropriate.
15. For more information or questions on concussion or concussion management, please contact the CMT at school or go online to "Bridging the Gap from Concussion to the Classroom."

Recommendations Provided to: _____

Recommendations Provided by: _____

Date: _____

Please feel free to contact me if you have any questions at: _____

Signature: _____