

Parents and students: Please read and keep for reference.
Student must turn in the signed back page prior to the start of practices/school activities.

RSU #38
GUIDELINES FOR CONCUSSION MANAGEMENT

Introduction

A concussion is a type of traumatic brain injury that interferes with the normal function of the brain.

What is a concussion?

A concussion is caused by a bump, blow, or jolt to the head or body. Basically, any force that is transmitted to the head causes the brain to literally bounce around or twist within the skull, potentially resulting in a concussion. The sudden movement of the brain causes stretching and tearing of brain cells, damaging the cells and creating chemical changes in the brain.

You've probably heard the terms "ding" and "bell-ringer." These terms were once used to refer to minor head injuries and thought to be a normal part of being active. There is no such thing as a minor brain injury. Any suspected concussion must be taken seriously.

Recognizing Concussion:

If a student exhibits any signs, symptoms, or behaviors that make you suspicious that he or she may have had a concussion, that student must be removed from all physical activity, including sports and recreation. Continuing to participate in physical activity after a concussion can lead to worsening concussion symptoms, increased risk for further injury, and even death.

SYMPTOMS REPORTED BY STUDENT	SIGNS OBSERVED BY PARENTS, FRIENDS, TEACHERS OR COACHES
Headache	Dazed or in a fog
Nausea	Is confused about what to do
Dizziness	Forgets plays
Double or blurred vision	Is unsure of game, score, or opponent
Sensitivity to light or noise	Moves clumsily/unbalanced
Feeling sluggish or groggy	Answers questions slowly/slurred speech
Ringing in ears	Loses consciousness
Difficulty concentrating	Behavior or personality changes
Confusion	Loss of memory
Vomiting	Uneven pupils
When in doubt, sit them out!	

After suffering a head injury, **no student should return to play or practice on that same day unless cleared by a licensed health care provider trained in concussion management.** Previously students were allowed to return to play if their symptoms resolved within 15 minutes of injury. Newer studies have shown us that the young brain does not recover quickly enough for an athlete to return to activity in such a short time.

The signs, symptoms, and behaviors of a concussion are not always apparent immediately after a bump, blow, or jolt to the head or body and may develop over a few hours. A student should be observed following a suspected concussion and should never be left alone.

Management of Concussion:

The student should be evaluated by a licensed health care provider who is trained in concussion management. Following a suspected concussion, **the school will require a medical note** either confirming the diagnosis or clearing the student for full participation in school activities.

The first step in recovering from a concussion is mental and physical rest for the first 24-48 hours. This is essential to help the brain heal. Activities including use of computers, video games, television, and phones (including texting) may need to be limited. Exposure to loud noises, bright lights may magnify symptoms.

Concussion in the Classroom:

Following a concussion, many students will have difficulty in school. These problems may last from days to months and often involve difficulties with short- and long-term memory, concentration, and organization. In many cases, it is best to lessen the student's class load early on after the injury. This may include staying home from school for a few days, followed by a lightened schedule as necessary. Talk to the school nurse and teachers if you have any concerns.

Return to Physical Activity:

Once a student is able to participate fully in the classroom with no return of symptoms, the licensed health care provider will clear the student to begin a gradual return to physical activity. This will occur in a step-wise fashion over a period of several days, allowing the brain to re-adjust. If symptoms return, the student must discontinue all physical activity and be re-evaluated. The school will require **written clearance from the licensed health care provider** before a student can return to full participation in physical activities.

Progressive Physical Activity Program:

Day 1: Non-contact light aerobic exercise- 5 to 10 minutes on an exercise bike or light jog; no weight lifting, resistance training, or any other exercises.

Day 2: Non-contact moderate aerobic exercise- 15 to 20 minutes of running at moderate intensity in the gym or on the field without a helmet or other equipment.

Day 3: Non-contact training drills in full uniform. May begin weight lifting, resistance training, and other exercises.

Day 4: Full contact practice or training.

Day 5: Full game play.

References

Guskiewicz KM, et al. National Athletic Trainers' Association position statement: management of sport-related concussion. *Journal of Athletic Training* 2004; 39:280-297.

McCroly P, et al. Consensus statement on concussion in sport: the 3rd International Conference on Concussion in Sport held in Zurich, November 2008. *Journal of Athletic Training* 2009; 44:434-48.

Additional Resources

Heads Up: Concussion in High School Sports http://www.cdc.gov/concussion/headsup/high_school.html

Concussion in Sports- What you need to know.

<http://www.nfhslearn.com/electiveDetail.aspx?courseID=15000>

NFHS Sports Medicine Handbook, 4th Ed, 2011.

Legal Reference: M.R.S.A. 20-A §254, sub-§17, Model Policy for Management of Concussive and Other Head Injuries

I have read the Guidelines for Concussion Management, and agree to abide by these guidelines.

Student Name Printed

Student Signature

Date

Parent or Legal Guardian Printed

Parent or Legal Guardian Signature

Date