DEFINITION OF A BRAIN CONCUSSION

• A concussion is an injury to the brain caused by direct or indirect blow to the head or body
• A concussion usually causes immediate, but temporary impairment of brain function. However, in some instances, symptoms of head injury may not appear for several hours after trauma.
• A person does NOT have to lose consciousness to have a concussion.
• Every head injury should be taken seriously and each dealt with appropriately.

WHEN TO GO TO THE HOSPITAL

Keep careful watch over the athlete for several days. If you witness any of the symptoms listed below, transport the athlete immediately to the nearest hospital emergency department.

• Suspicion of a spine injury, skull fracture or bleeding
• Any loss of consciousness (LOC) or unresponsiveness
• Irregular vital signs (heart rate, breathing, blood pressure, etc.)
• Repeated vomiting
• Seizure activity
• Difficulty in waking the athlete
• Dizziness or disorientation
• Amnesia, or Severe headache, particularly at a specific location, which is continuing, increasing or changing in pattern
• Blurred vision
• Pupils which are dilated, unequal in size, or non-reactive to light
• Poor balance or unsteadiness
• Weakness or numbness in either arm or leg
• Difficulty in remembering relevant people, events or facts
• Deteriorating level of consciousness or convulsions
• Unusual or bizarre behavior
• Any discharge from the ears or nose
• Slurring of speech
• Confusion, strangeness or irritability

COMMON CONCUSSION SIGNS & SYMPTOMS

These are SOME SIGNS & SYMPTOMS of concussion (what the athlete reports and what others can see):

• Headache
• Nausea
• Dizzy or unsteady
• Sensitive to light or noise
• Feeling mentally foggy
• Problems with concentration and memory
• Confused
• Feeling slowed down
• Dazed or stunned appearance
• Change in the level of consciousness or awareness
• Confused about assignment
• Forgets plays
• Unsure of score, game, opponent
• Clumsy
• Answers more slowly than usual
• Shows behavior changes
• Loss of consciousness
• Asks repetitive questions or memory concerns

INITIAL TREATMENT

Immediately remove athlete suspected of having a concussion from activity.

A licensed medical provider should evaluate every athlete suspected of having a concussion.

After being assessed, the main treatment for concussion is rest, both physical and mental. Attempting to carry out one’s normal activities while concussed will likely only prolong symptoms and slow recovery. Activities to avoid while symptomatic include but are not limited to: any physical activity, use of a computer, reading or studying, text messaging and video gaming. The athlete should not be allowed to operate a motor vehicle. Any other activities that exacerbate symptoms should also be curtailed or eliminated all together until his/her licensed medical provider clears the athlete to reintroduce the activity.

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PAIN RELIEF SUGGESTIONS

The use of anti-inflammatory drugs such as ibuprofen, naproxen and aspirin is not recommended for use when a concussion is suspected. Consult your licensed medical provider for pain relief recommendations.

VERNON MEMORIAL CONCUSSION CLINIC

Vernon Memorial Healthcare offers a Concussion/Head Injury Clinic for athletes who are suspected have suffered a concussion. Appointments involve an evaluation from a licensed medical provider and ImPACT® Neurocognitive computerized testing. Call the Hirsch Clinic at 637-3174 or the La Farge Clinic at 625-2494 for more information or to set up an appointment.

HELMET/SAFETY EQUIPMENT INFO

Helmets are designed to protect to head and skull from external injuries, they do not prevent a concussion. Correct tackling and checking procedures along with properly fitted helmets and mouth guards can reduce the risk of a concussion, but not completely prevent them. Contact should never be initiated with the helmet.

GENERAL RETURN TO PLAY RECOMMENDATIONS

A licensed medical provider should clear the athlete before resuming physical activity and his/her progress monitored by a licensed athletic trainer.

If symptoms return at any time during this progression, activities should be stopped for the day. Symptoms should be reported to the supervising licensed medical provider. The athlete is advised to resume the progression once an asymptomatic status has been re-achieved.

Returning too soon can slow the recovery process, increase the chances of re-injury and risk permanent disability or death.

SAMPLE RETURN TO ACTIVITY PROTOCOL

The program below represents a minimum timetable to return athletes back to competition. When utilized for an athlete’s concussion, Steps 2-6 take a minimum of five days to complete.

There should be approximately 24 hours (or longer) between stages and the athlete should stop activity immediately if symptoms recur and consult their licensed medical provider.

Every concussion and its recovery are unique. For that reason, the following Return to Activity Protocol is only a guideline.

Step 1: No activity. Symptom limited physical and cognitive rest. Limit screen time (tablet, computer, phone, video games, etc).

Step 2: Athlete is symptom free for at least 24 hours and can tolerate a full academic schedule. Light aerobic exercise (15 minutes walking, swimming or stationary bike). No resistance training.

Step 3: Sport-specific exercise or drills (skating drills in hockey, running drills in soccer). No head impact.

Step 4: Non-contact training drills. Progression to more complex training drills (ex: passing). Begin progressive resistance training.

Step 5: Full-contact practice. Following medical clearance, athlete can participate in normal training activities. Restore confidence & assess functional skills.

Step 6: Return to play. Normal game play.

More Concussion Information

http://www.cdc.gov/concussion/HeadsUp/youth.html
http://www.wiaawi.org/Health/Concussions.aspx
http://www.impacttest.com

Download the ImPACT® Concussion Awareness Tool Application on your smartphone by searching ImPACT®.