

# CONCUSSION MANAGEMENT PACKET

Recommendations for monitoring symptoms at home:

What should I do when I'm recovering?

Physical and mental rest are very important to your recovery. Keep your heart rate low and do not do any physical activity until instructed by a doctor or athletic trainer. Try to avoid long bouts of activities that require intense concentration and thinking. Also avoid using computers or cell phones, and minimize television use, as these things may increase symptoms.

It is okay to:

- Take TYLENOL (acetaminophen) after first 24 hours. No NSAIDs.
- Use ice pack on head/neck
- Return to school (unless instructed not to)
- Go to sleep (no need to wake athlete up every hour)

Do not:

- Take aspirin, NSAIDs, or sleep aids
- Drink alcohol
- Eat spicy foods
- Exercise (No physical activity until instructed)

The following may increase symptoms:

- Computer/phone/television screens
- Loud music/events (sporting events)
- Prolonged periods of concentration (homework, studying, reading, etc)
  - Take frequent study breaks to avoid increasing symptoms

What could happen if I return to play too early/play with a concussion?

Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences.

Report to the athletic training room on/at \_\_\_\_\_ for follow up evaluation.

Specific Recommendations: \_\_\_\_\_

Please feel free to contact me if you have any questions.

I can be reached at: (425) 837-7896 or swartzm@issaquah.wednet.edu

Megan Swartz, LAT, ATC \_\_\_\_\_ Date: \_\_\_\_\_

A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, **all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly.** In other words, even a “ding” or a bump on the head can be serious. You can’t see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear.

Symptoms may include one or more of the following:	
<ul style="list-style-type: none"> <li>• Headaches</li> <li>• “Pressure in head”</li> <li>• Nausea or vomiting</li> <li>• Neck pain</li> <li>• Balance problems or dizziness</li> <li>• Blurred, double, or fuzzy vision</li> <li>• Sensitivity to light or noise</li> <li>• Feeling sluggish or slowed down</li> <li>• Feeling foggy or groggy</li> <li>• Drowsiness</li> <li>• Change in sleep patterns</li> </ul>	<ul style="list-style-type: none"> <li>• Amnesia</li> <li>• “Don’t feel right”</li> <li>• Fatigue or low energy</li> <li>• Sadness</li> <li>• Nervousness or anxiety</li> <li>• Irritability</li> <li>• More emotional</li> <li>• Confusion</li> <li>• Concentration or memory problems (forgetting game plays)</li> <li>• Repeating the same question/comment</li> </ul>

Signs Observed by Teammates, Coaches, and Parents may include:	
<ul style="list-style-type: none"> <li>• Appears dazed</li> <li>• Vacant facial expression</li> <li>• Confused about assignment</li> <li>• Forgets plays</li> <li>• Is unsure of game, score, or opponent</li> <li>• Moves clumsily or displays incoordination</li> <li>• Answers questions slowly</li> </ul>	<ul style="list-style-type: none"> <li>• Slurred speech</li> <li>• Shows behavior or personality changes</li> <li>• Can’t recall events prior to hit</li> <li>• Can’t recall events after hit</li> <li>• Seizures or convulsions</li> <li>• Any change in typical behavior or personality</li> <li>• Loses consciousness</li> </ul>

If any of the following occur, consult a physician, or go to the Emergency Room immediately:	
<ul style="list-style-type: none"> <li>• Repeated vomiting</li> <li>• Loss of consciousness or unable to stay awake during normal hours</li> <li>• Becoming more confused, restless or agitated.</li> <li>• Convulsions or seizures</li> <li>• Difficulty with your vision</li> <li>• Slurred speech</li> </ul>	<ul style="list-style-type: none"> <li>• Headache that gets worse or does not go away.</li> <li>• Unequal pupil sizes</li> <li>• Bleeding or drainage from ears or nose</li> <li>• Unusual sounds in the ear</li> <li>• If previous symptoms become much worse.</li> </ul>

## CONCUSSION MANAGEMENT PACKET

### Return to play Protocol

1. Athlete and parent/guardian sign the **Concussion Clearance Form**, indicating they have read and understand: the signs and symptoms of a concussion, what happens if returned to sports too soon, and the 5-step Return to Play protocol.
2. Athlete and parent/guardian will complete the **Post-Concussion Symptom Inventory** on a daily basis until the athlete returns to be seen by the athletic trainer. This will continue until athlete is *completely* asymptomatic.
3. **Once symptom free**, the athlete will undergo another SCAT5 assessment to ensure all neurocognitive and balance systems are functioning properly. If a baseline test was done, the athlete must score within 95% of the baseline score to proceed to the next step.
4. The athlete will move on to the 5-step Return to Play (RTP) protocol:
  - a. Light aerobic exercise (20 minutes biking, jogging or elliptical)
  - b. Light aerobic exercise (20-30 minutes jogging or elliptical)
  - c. Non-Contact practice (positions drills), for sports that are non-contact, practice at 75% of maximal effort.
  - d. Full contact/full effort practice
  - e. Return to normal participation
    - i. **Only 1 step will be completed each day.** If athlete experiences *any* symptoms during any RTP step, they will stop and repeat the same step the following day.
5. **Only** once the athlete has fully returned to school, completed the return to play protocol in full, and received written clearance either from the athletic trainer or another licensed healthcare provider *trained in concussions* will they be allowed to return to full participation.
  - a. If clearance was obtained via a physician's note, the following must be clearly stated in order to return to full participation:
    - i. Diagnosis
    - ii. Clearance Status
    - iii. Physicians name (PRINTED) and contact information
    - iv. Clearance notes **will not** be accepted from the ER, urgent care, Chiropractors, or other health care professionals not trained in concussion management.
  - b. Clearance from a physician only releases athlete to my care. **They must complete the graduated return to play even with physician clearance.**

**THE ATHLETIC TRAINER RESERVES THE RIGHT TO HAVE THE FINAL SAY IN ALL RETURN TO PLAY DECISIONS.**

**AT NO TIME WILL A COACH MAKE A RETURN TO PLAY DECISION.**

**THIS CONCUSSION MANAGEMENT POLICY IS NOT ALL-INCLUSIVE, AND THE ATHLETIC TRAINER RESERVES THE RIGHT TO ALTER THE POLICY AT ANY TIME AS SHE SEES FIT TO PROTECT THE ATHLETE.**

# POST CONCUSSION SYMPTOMS INVENTORY

	None 0	1	Mild 2	3	Moderate 4	5	Severe 6
<b>SYMPTOMS</b>	<b>SEVERITY RATING</b>						
	<b>DATE</b>	<b>DATE</b>	<b>DATE</b>	<b>DATE</b>	<b>DATE</b>	<b>DATE</b>	<b>DATE</b>
Headache							
“Pressure in head”							
Neck Pain							
Nausea or Vomiting							
Dizziness							
Blurred vision							
Balance Problems							
Sensitivity to light							
Sensitivity to noise							
Feeling slowed down							
Fogginess							
“Don’t feel right”							
Difficulty concentrating							
Difficulty remembering							
Fatigue or low energy							
Confusion							
Drowsiness							
Trouble falling asleep							
More emotional							
Irritability							
Sadness							
Nervous or Anxious							
Other:							
Athlete’s Initials							
Parent’s Initials							

**Notes:**

**CONCUSSION CLEARANCE FORM****CONCUSSION MANAGEMENT PACKET**

Athlete's Name: \_\_\_\_\_ Age/Grade: \_\_\_\_\_

Date of Injury: \_\_\_\_\_ Sport: \_\_\_\_\_

- I have read the entirety of this packet and fully understand the following:
- I understand that continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal results.
- I know and understand the signs and symptoms of a concussion.
- I know and understand the return to play policies including the 5-step return to play protocols.

**Questions? Please contact me at (425) 837-7896 or [swartzm@issaquah.wednet.edu](mailto:swartzm@issaquah.wednet.edu)**\_\_\_\_\_  
**Parent/Guardian Signature**\_\_\_\_\_  
**Print Name**\_\_\_\_\_  
**Athlete Signature**\_\_\_\_\_  
**Print Name****Return to Play Protocol**

Protocol Step	Date	Notes	LAT Initial
Initial Injury			
Assessment (SAC)			
Post-Injury SCAT5			
Concussion Packet Given			
Athlete Reports Symptom Free			
SCAT5 within 95% baseline			
Additional SCAT5 (if needed)			
<b>RTP Protocol Begins</b>			
RTP Step 1			
RTP Step 2			
RTP Step 3			
RTP Step 4			
RTP Step 5			
Full RTP			