

The athletic trainer has evaluated your athlete and assessed the injury as a suspected head injury. Please follow the recommendations listed below to ensure proper care and treatment for the injury.

Your child will need to be seen by a physician to confirm the head injury and fill out an ACE report (school modifications to be provided to the nurse). Your child will need to be seen **again** for clearance to begin the second half or contact portion of the gradual return-to-athletics.

DEFINITION of a CONCUSSION: a concussion is a disturbance in brain function. A concussion may occur from a direct blow to the head, a blow to the body, or whiplash. Signs and symptoms can occur immediately following or several hours after the head injury. No concrete timeline can be given for full recovery, and each concussion is treated on a case-by-case basis. Previous medical history can be a major factor in recovery.

INSTRUCTIONS during the next 24 hours:

- Check the athlete every 2-3 hours. Look for normal breathing or anything out of the ordinary
- **DO NOT** take any type of medication for the symptoms you are currently experiencing
 - This helps to monitor the severity of symptoms and keep an eye on any crucial changes
- Refer to ER if athlete has a change in mental status, acts in uncharacteristic way or starts vomiting
- Limited use of computers, TV, phone, texting or other visual devices unless symptoms resolve
- Limited time spent reading or completing homework unless symptoms resolve
- Driving is not recommended unless symptoms resolve
- It is ok for the athlete to sleep as long as they have had something to eat and drink without vomiting; having normal conversation; not experiencing an increase in symptoms and have been awake for 4 hours.
- Parents should contact the school nurse regarding school absence and any school modifications.
- Refrain from **ANY** physical activity until you are cleared by a trained/qualified health care professional
 - This includes gym class, club/town/rec sports, coaching, going to the gym, etc.

Return to Athletics Recommendations:

- Can begin within 24 hours of injury
 - Stage 1 - Symptom-limited activity: reintroduction to daily activities without exacerbating symptoms
- **Must be supervised by the Athletic Trainer** and at school at least part-time
 - Stage 2 - Aerobic exercise: stationary bike or walking at a slow to medium pace. May start light resistance training that does not result in a more than mild or brief exacerbation of symptoms
 - Stage 3 - Individual sport-specific exercise: sport-specific training away from the team environment. No activities that risk head impact.
- At this point, athlete must be symptom-free with a medical clearance note by a physician
 - Stage 4 - Non Contact training drills: Exercise to high intensity and integrate into team environment
 - Stage 5 - Full practice or participation with contact
 - Stage 6 - Full return to activity

*Each stage takes a minimum of 24 hours to complete.

*More than mild or brief exacerbation of symptoms during stages 1-3 will result in cessation of the activity and restarting that stage the next day if symptoms resolve. More than mild to brief exacerbation of symptoms during stages 4-6 warrants returning to stage 3 until complete resolution of symptoms.