

# OOSTBURG HIGH SCHOOL SPORTS MEDICINE

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## CONCUSSION INFORMATION SHEET (PLEASE KEEP FOR YOUR REFERENCE)

What is a concussion? Concussion is defined as a complex pathophysiological process affecting the brain, induced by traumatic biomechanical forces.

### Concussion Signs & Symptoms

- Headache/"Pressure In Head"
- Blurred Vision
- Nausea/Vomiting
- Loss Of Appetite
- Fatigue/Sleepiness
- Irritability/Emotional
- Feeling Slowed Down/Sluggish
- Difficulty Falling Asleep
- Difficulty Focusing/Concentrating
- Feeling Like You 're In A "Fog"
- Ringing In The Ears
- Sensitivity To Light Or Noise
- Temporary Loss Of Memory
- Balance Problems/Dizziness

If any signs/symptoms worsen, there is loss of consciousness, or your child begins to seize, take your child to the ER immediately

### Concussion Facts

1. Symptoms can be subtle, such as a headache or feeling sluggish.
2. Symptoms may not surface until 48 to 72 hours after the injury.
3. Recovery is different from person to person who sustains a concussion, thus recovery time cannot and should not be pre-determined until after medical evaluation and post-concussion evaluation by a licensed healthcare professional in the state of Wisconsin.

### Concussion Myths

1. You have to have loss of consciousness to have sustained a concussion.
  - Studies show that less than 10% of concussions result in loss of consciousness
2. Concussions are only a result of a direct blow to the head.
  - A concussion can be sustained by a sudden, violent movement of the head caused by an un-expected external force to the body.
3. You need to wake someone every 20 minutes.
  - It is recommended that the individual get as much sleep as possible.
4. Mouthguards and headgear will prevent concussions.
  - Although properly fitted mouthguards and headgear may prevent dental and facial injuries, it does not prevent concussions.

### Management of a Concussion

When a concussion is suspected, it should be brought to the attention of an athletic trainer and/or a physician for further evaluation. If present, daily monitoring is needed. If conditions worsen, refer to a medical doctor.

### What to avoid and do when a concussion is suspected

- Avoid any loud noises (Music, TV, Band practices, or listening to an IPOD)
- Avoid texting, reading, video games, typing, or internet use. All of these activities cause an increase in cognitive function which puts a strain on the brain
- Avoid any over-the-counter aspirin (Advil, Motrin, Ibuprofen, Aleve) which may mask any symptoms
- If studying is needed to be done for a quiz or test the next day or that week, the school nurse, athletic director, administrator and/or guidance counselor should be contacted and made aware that a concussion is suspected and postponement of any quizzes or exams may be needed.
- Staying home from school may be recommended if concussed individual experiences increased symptoms in classroom.

### Return to Participation

It is mandatory that your child be checked by a physician prior to their return to sport participation. Your child will have to complete the return to play protocol and pass the neurocognitive test and balance test.

# Concussion Return to Play Criteria

Once the athlete has been cleared to return to activity by the physician, the below return to play steps from the WIAA will begin. Some physicians will include the return to play steps in their note. In that case, the steps will be followed as laid out by the physician. Please note; the athlete must complete the return to play protocol before returning to competition.

## WIAA Return to Play Protocol

Current recommendations are for a stepwise return to play program. In order to resume activity, the athlete must be symptom free and off any pain control or headache medications. The athlete should be carrying a full academic load without any significant accommodations. Finally, the athlete must have clearance from an appropriate health care provider.

The program described below is a guideline for returning concussed athletes when they are symptom free. Athletes with multiple concussions and athletes with prolonged symptoms often require a very different return to activity program and should be managed by a physician that has experience in treating concussion.

The following program allows for one step per 24 hours. The program allows for a gradual increase in heart rate/physical exertion, coordination, and then allows contact. If symptoms return, the athlete should stop activity and notify their healthcare provider before progressing to the next level.

**STEP ONE: About 15 minutes of light exercise: stationary biking or jogging**

**STEP TWO: More strenuous running and sprinting in the gym or field without equipment**

**STEP THREE: Begin non-contact drills in full uniform. May also resume weight lifting**

**STEP FOUR: Full practice with contact**

**STEP FIVE: Full game clearance**

<http://www.wiaawi.org/Health/Concussions.aspx>