

Concussion Education Sheet

WHAT IS A CONCUSSION?

A concussion is a brain injury that can't be seen on X-rays, CT or MRI scans. It affects the way a person thinks and can cause a variety of symptoms.

WHAT CAUSES A CONCUSSION?

Any blow to the head, face or neck, or somewhere else on the body that causes a sudden jarring of the head may cause a concussion. Examples include getting body-checked in hockey or falling and hitting your head on the floor.

WHEN SHOULD I SUSPECT A CONCUSSION?

A concussion should be suspected in anyone who sustains a significant impact to the head, face, neck, or body and reports *ANY* symptoms or demonstrates *ANY* visual signs of a concussion. A concussion should also be suspected if a person reports *ANY* concussion symptoms to one of their peers, teacher, parent, coach, or other responsible adult, or if anyone witnesses a person exhibiting *ANY* of the visual signs of concussion. Some people will develop symptoms immediately while others will develop delayed symptoms (beginning 24-48 hours after the injury).

WHAT ARE THE SYMPTOMS OF A CONCUSSION?

A person does not need to be knocked out (lose consciousness) to have had a concussion. Common symptoms include:

- ▶ Headaches or head pressure
- ▶ Dizziness
- ▶ Nausea and vomiting
- ▶ Blurred or fuzzy vision
- ▶ Sensitivity to light or sound
- ▶ Balance problems
- ▶ Feeling tired or having no energy
- ▶ Not thinking clearly
- ▶ Feeling slowed down
- ▶ Easily upset or angered
- ▶ Sadness
- ▶ Nervousness or anxiety
- ▶ Feeling more emotional
- ▶ Sleeping more or sleeping less
- ▶ Having a hard time falling asleep
- ▶ Difficulty working on a computer
- ▶ Difficulty reading
- ▶ Difficulty learning new information

WHAT ARE THE VISUAL SIGNS OF A CONCUSSION?

Visual signs of a concussion may include:

- ▶ Lying motionless on the floor
- ▶ Slow to get up after a direct or indirect hit to the head
- ▶ Disorientation or confusion or inability to respond appropriately to questions
- ▶ Blank or vacant stare
- ▶ Balance, gait difficulties, motor incoordination, stumbling, slow labored movements
- ▶ Facial injury after head trauma
- ▶ Clutching head

WHAT SHOULD I DO IF I SUSPECT A CONCUSSION?

If a student is suspected of sustaining a concussion, they should be immediately removed from activity. Any student who is suspected of having sustained a concussion during sport or physical activities must not be allowed to return to the same game or practice.

It is important that ALL students with a suspected concussion undergo medical assessment by a medical doctor or nurse practitioner, as soon as possible. ALL students with a diagnosed concussion should receive written medical clearance from a medical doctor or nurse practitioner before returning to sport activities.

WHEN CAN THE STUDENT RETURN TO SCHOOL AND SPORTS?

It is important that students diagnosed with a concussion follow a step-wise return to school and sports-related activities that includes the following Return-to-School and Return-to-Sport Strategies. It is important that students return to full-time school activities before progressing to stage 5 and 6 of the Return-to-Sport Strategy.

Return-to-School Strategy¹

Stage	Aim	Activity	Goal of each step
1	Daily activities at home that do not give the student-athlete symptoms	Typical activities during the day as long as they do not increase symptoms (i.e. reading, texting, screen time). Start at 5-15 minutes at a time and gradually build up.	Gradual return to typical activities.
2	School activities	Homework, reading or other cognitive activities outside of the classroom.	Increase tolerance to cognitive work.
3	Return to school part-time	Gradual introduction of schoolwork. May need to start with a partial school day or with increased breaks during the day.	Increase academic activities.
4	Return to school full-time	Gradually progress.	Return to full academic activities and catch up on missed school work.

Return-to-Sport Strategy¹

Stage	Aim	Activity	Goal of each step
1	Symptom-limiting activity	Daily activities that do not provoke symptoms.	Gradual re-introduction of work/school activities.
2	Light aerobic activity	Walking or stationary cycling at slow to medium pace. No resistance training.	Increase heart rate.
3	Sport-specific exercise	Running or skating drills. No head impact activities.	Add movement.
4	Non-contact training drills	Harder training drills, e.g. passing drills. May start progressive resistance training.	Exercise, coordination and increased thinking.
5	Full contact practice	Following medical clearance and complete return to school.	Restore confidence and assess functional skills by coaching staff.
6	Return to sport	Normal game play.	

¹Source: McCrory et al. (2017).

HOW CAN I HELP PREVENT CONCUSSIONS AND THEIR CONSEQUENCES?

Concussion prevention, recognition and management require everyone to follow the rules and regulations when participating in sport, respect others, avoid head contact, and report suspected concussions.

TO LEARN MORE ABOUT CONCUSSIONS PLEASE VISIT:

Parachute: www.parachutecanada.org/concussion

SIGNATURES (OPTIONAL): The following signatures certify that the student's parent or legal guardian has reviewed the above information related to concussion.

Printed name of student

Printed name of parent/guardian

Signature of parent/guardian

Date