

CONCUSSION INFORMATION **For Parents and Coaches**

The University Hospitals Concussion **Management Program** is a multidisciplinary collaborative effort comprising the UH Neurological Institute, UH Primary Care Institute, UH Rainbow Babies & Children's Hospital, UH Rehabilitation Services and UH Drusinsky Sports Medicine Institute, as well as other adult and pediatric specialty providers.

To schedule an appointment with one of our concussion management experts at a location near you, please call 216-983-PLAY (7529).





UHSports.org

Patricios, Schneider, Dvorak, et al. (2023). Consensus statement on concussion in sport: the 6th International Conference on Concussion in Sport-Amsterdam, October 2022. British Journal of Sports Medicine, 57(11), 695–711. https://doi.org/10.1136/bjsports-2023-106898

Echemendia, Ahmed, Bailey, et al. (2023). Introducing the Concussion Recognition Tool 6 (CRT6). British Journal of Sports Medicine, 57(11), 689–691. https://doi.org/10.1136/bjsports-2023-106851

Understand a Concussion

Parents, coaches and referees should all understand what a concussion is, how to identify it, and what to do if you suspect a concussion.

What is a concussion?

It is a traumatic brain injury where a blow to the head, neck or body results in forces on the brain. This leads to a range of clinical symptoms (headache, dizziness, confusion, etc.) and signs. A concussion may result in a loss of consciousness but often it does not. MRI and CT scans often cannot detect the small changes that occur in the brain as a result of concussions, especially mild ones.

For more information on concussion:

cdc.gov/headsup | odh.ohio.gov/youthconcussions | UHhospitals.org/Concussion

Athletes engaging in contact sports, with a history of concussion or with other complicating factors: Obtain baseline testing prior to sports season.

This could include brief screening measures (SCAT testing), a computerized concussion test (ImPACT or Sway), or a combination of computerized and tradition neurocognitive testing (hybrid battery of testing). These tests may be available through your school or athletic organization.

These can also be scheduled by calling 216-844-3422.

AT THE TIME OF INJURY

What are signs and symptoms of concussion?

- Falling unprotected
 Seizure
- Lying motionless
- Loss of consciousness
- Unsteady and dizzy
- Nausea & vomiting • Change in vision

and convulsion

- Headache
- Disorientation and confusion
- Light and noise sensitivity
- Dazed, blank, vacant look

Ohio Youth Concussion Law:

Any person removed from practice or play because of a suspected concussion may not return that day and needs written clearance by a medical provider before return to play.

If a concussion is suspected, **URGENT TRANSPORT TO** does the athlete have any HOSPITAL FOR EVALUATION of the following? YES • Breathing problems **Emergency Department should** not make return-to-play decision. • Unconscious one minute or longer • Neck pain, numbness or tingling Seizure

- Follow these steps:
- Remove from play
 - Encourage rest and restrict physical/ cognitive activity initially
 - Limit exposure to loud noises/bright lights
 - Monitor for change in symptoms
 - Establish plan for physician evaluation

Make an appointment with doctor immediately.

Symptoms can worsen in the initial days after a concussion

Rapid physician referral or transport to ED

Symptoms include: Severe or worsening headache, vomiting two or more times, increasing confusion/irritability, seizure or weakness/numbness.

RECOVERY AND RETURN TO PLAY

During the initial days following injury:

- 1. Encourage brain rest, avoid additional injury, and encourage progressive return to normal activity once tolerated by:
 - No activities that could cause other concussions (sports, bike riding, etc.) until cleared by a doctor
 - Light activity, such as walking, is encouraged, with increased exercise after 48 hours
- 2. Avoid loud noises, bright lights, and overly stimulating activity by:

Symptoms usually resolve in the initial weeks after injury. Light symptom

exacerbation is not concerning, but if symptoms significantly worsen during or after

• Limit screen time, including TV, cell phones, video games and computers

an activity, stop and wait 24 hours before trying again.

- No loud music, including concerts and dances
- No sporting event attendance

• Do not engage in strict rest or bed rest in a dark room – this worsens recovery

• Worsening headache

• Worsening confusion

• Numbness or tingling

>1 episode of vomiting

• Deformity of the skull

in arms or legs

- Get a good night's sleep; no late nights
- You do not need to wake the athlete every hour

to 20 – 30 minute blocks.

such as homework or reading

Some athletes may require changes to school.

- Possible changes include:
- A break from school and homework
- A progressive return to school (half days, regular breaks in a quiet space during the school day, etc.)
- Avoiding classes with loud noises (choir/band), bright lights (computers) or physical activity (PE)
- Temporary changes in schoolwork may be needed (no or reduced tests/homework, extra time on work, etc.)

NOTE: OHIO LAW REQUIRES WRITTEN CLEARANCE YES **BEFORE RETURN TO PLAY**

During recovery, seek a referral

if any of the following apply:

Symptoms persist for

• If you've had two

or more concussions

History of ADHD/learning

disorder, neurological disorder,

depression/anxiety or other

medical problem that can

interfere with recovery

three weeks or more

Symptoms are worsening

or interfering with school

should be met:

NO

• Limit any activity that requires extended periods of concentration

• Stop any activity if symptoms worsen

NO

• Within 72 hours, follow up with physician (e.g., pediatrician, primary care or sports medicine) for reassessment, recovery plan, possible school restriction and/or additional medical referrals

IF ATHLETE HAS WORSENING CONDITIONS AT ANY TIME FOLLOWING CONCUSSION

