

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

The University Hospitals Concussion Management Program is a certified ImPACT™ Concussion Testing provider. We offer concussion testing for athletes, schools and other sports organizations. For more information regarding testing, please call **216-983-PLAY** (7529).

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 Sports Medicine, as well as other adult and pediatric specialty providers.

BE PREPARED

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

What is a concussion? It is a complex process where a blow to the head or body results in forces on the brain that move it inside the skull. This leads to physical symptoms (e.g., headache or dizziness), cognitive symptoms (e.g., memory loss or confusion) or emotional symptoms (e.g., being unusually tearful).

CONCUSSIONS USUALLY DO NOT SHOW UP ON CT/MRI.

See the following for more information on concussion.

- cdc.gov/concussion/headsup
- healthy.ohio.gov/vipp/concussion
- aan.com/practice/sports-concussion-toolkit

If 12 or older, obtain a baseline concussion test **before the sports season**. This can be obtained through:

- School athletic trainer/physician
- Sports med/concussion specialist

AT THE TIME OF INJURY

Which symptoms after a blow to the head or body are suspicious for concussion?

- Headache
- Dizziness
- Nausea
- Change in vision
- Light or noise sensitivity
- Change in behavior
- Confusion about basic information (day of the week, opponent, plays, recent events, etc.)

If a concussion is suspected, does the child have any of the following?

- Breathing problems
- Unconscious one minute or longer
- Neck pain or numbness/tingling
- Seizure
- Worsening headache
- Worsening confusion
- Persistent balance or walking abnormality
- >1 episode of vomiting

YES

URGENT TRANSPORT TO HOSPITAL FOR EVALUATION

NO

- Remove from play
- Encourage rest and restrict physical/cognitive activity
- Limit exposure to loud noises/bright lights
- Monitor for change in symptoms
- Team coach and parents establish plan for physician evaluation

IF ATHLETE WAS TRANSPORTED TO EMERGENCY DEPARTMENT

- ED should not make return-to-play decision.

MAKE AN APPOINTMENT WITH DOCTOR IMMEDIATELY!

- **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
- Symptoms can worsen in the initial days after a concussion

If athlete has severe/worsening headache, vomiting two or more times, increasing confusion/irritability, seizure or weakness/numbness at any time following concussion, **rapid physician referral or transport to emergency department**

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 an appropriate medical provider before return to play.

RECOVERY AND RETURN TO PLAY

Encourage brain rest and avoid additional injury:

- No activities that could cause other concussions (e.g., sports, bike riding, etc.)
- No exercise unless cleared by a doctor
- If symptoms worsen during or after an activity, stop and wait 48 hours before trying again
- Get a good night's sleep; no late nights or sleepovers
- **You do not need to wake the athlete every hour**

Avoid loud noises, bright lights and overly stimulating activity:

- Limit TV time, cell phone use/texting, video games, computer time, etc.
- No loud music, including concerts and dances
- No sporting event attendance
- Limit homework/reading or any activity that requires extended periods of concentration to 20 – 30 minute blocks
- Stop activity if symptoms worsen

For some athletes, changes in school may be needed. 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.)

WHEN TO SEEK A REFERRAL FOR A SPECIALIST:

- If symptoms persist for three to four weeks or more
- If symptoms are worsening or interfering with school
- If two or more concussions
- If history of ADHD/learning disorder, neurological disorder, depression/anxiety or other medical problem that can interfere with recovery

YES

Refer to physician/neuropsychologist who specializes in concussion

NO

11 OR YOUNGER: Symptom-free at rest and physician recommends return to play

12 OR OLDER: Symptom-free at rest, computerized concussion testing (if available) is read as normal by a specialist, and return to play is recommended

NO

YES

Complete progressive return to sport under the supervision of a physician, athletic trainer or other appropriate medical provider

OHIO LAW REQUIRES WRITTEN CLEARANCE BEFORE RETURN TO PLAY

ONE SIZE FITS ALL DOES NOT APPLY TO CONCUSSIONS.

A concussion treatment plan should be targeted to a specific athlete and his/her specific symptoms. Not all of these recommendations may apply for a given athlete. Also, additional recommendations may be needed. **Consult your doctor for the best recovery plan.**

Symptoms usually recover in the initial weeks after injury.