



Distal NO 6  
DATE 2/1/13  
SBI 12

# Brain Injury Alliance

M O N T A N A

*Associate Member of the United States Brain Injury Alliance*

**Building on Our Past, Preparing for the Future**  
**Established 1987**

1280 S. 3rd Street West, Suite 4, Missoula, MT 59801

Phone: (406) 541-6442 Fax: (406) 541-4360

Toll-free: (800) 241-6442

Website: [www.biamt.org](http://www.biamt.org)

## Brain Injury Help Line



- Individualized
- Accessible
- Holistic
- Participant Driven
- Effective and Valued
- Creative and Flexible



**Brain Injury  
Alliance**

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1280 South 3rd Street West, #4  
Missoula, Montana 59801  
800-241-6442 or 406-541-6442  
[www.biamt.org](http://www.biamt.org)

## What is the Brain Injury Help Line Service?

The Brain Injury Help Line (BIHL) is a FREE 24 month telephone-based follow-up system of care provided by the Brain Injury Alliance of Montana.

## Who can participate in this free Service:

All Montanans living with brain injury and their families.

## How can you participate:

- Sign the *Authorization to Participate Form* through your hospital Emergency Room, Rehabilitation or Discharge Nurse. BIAMT will contact you.

OR



- Contact BIAMT directly at

**(1-800-241-6442)**

[www.biamt.org](http://www.biamt.org)

## What does Help Line provide?

**Assessment** – identifying the current needs and resources of the individual and his/her family.

**Planning** – goals and information, service and support needs.

**Identification** – of necessary information, services and supports.

**Negotiation** – facilitate access to services, supports and resources.

**Monitoring** – proactively assess the quality and appropriateness of the services, supports and resources used.

**Reassessment** – continual review and revision of each component of the process.

**Outreach** – identify new resources and supports on a continual basis.

**Education and Training** – increase brain injury awareness.

**Emotional Support** – proactively listening to the needs of participants.

**Advocacy** – help participants articulate to others how barriers impact their lives and to assert their rights on their own.

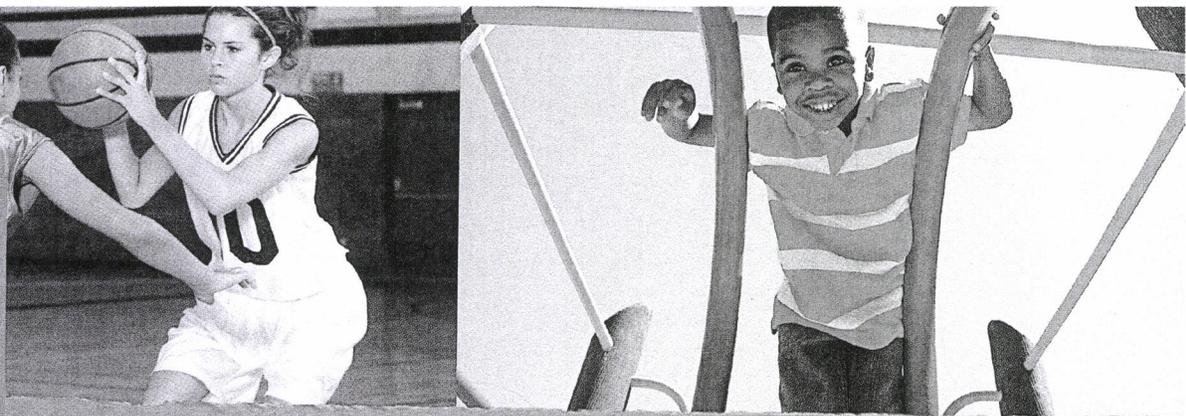
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# Heads Up to Schools: KNOW YOUR CONCUSSION ABCs

**A**ssess  
the  
situation

**B**e alert for  
signs and  
symptoms

**C**ontact a  
health care  
professional



## A Fact Sheet for Parents

### What is a concussion?

A concussion is a type of brain injury that changes the way the brain normally works. A concussion is caused by a bump, blow, or jolt to the head. Concussions can also occur from a blow to the body that causes the head and brain to move rapidly back and forth. Even what seems to be a mild bump to the head can be serious.

Concussions can have a more serious effect on a young, developing brain and need to be addressed correctly.

### What are the signs and symptoms of a concussion?

You can't see a concussion. Signs and symptoms of concussion can show up right after an injury or may not appear or be noticed until hours or days after the injury. It is important to watch for changes in how your child or teen is acting or feeling, if symptoms are getting worse, or if s/he just "doesn't feel right." Most concussions occur without loss of consciousness.

If your child or teen reports *one or more* of the symptoms of concussion listed below, or if you notice the symptoms yourself, seek medical attention right away. Children and teens are among those at greatest risk for concussion.

## SIGNS AND SYMPTOMS OF A CONCUSSION

### SIGNS OBSERVED BY PARENTS OR GUARDIANS

- Appears dazed or stunned
- Is confused about events
- Answers questions slowly
- Repeats questions
- Can't recall events *prior* to the hit, bump, or fall
- Can't recall events *after* the hit, bump, or fall
- Loses consciousness (even briefly)
- Shows behavior or personality changes
- Forgets class schedule or assignments

### SYMPTOMS REPORTED BY YOUR CHILD OR TEEN

#### Thinking/Remembering:

- Difficulty thinking clearly
- Difficulty concentrating or remembering
- Feeling more slowed down
- Feeling sluggish, hazy, foggy, or groggy

#### Physical:

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Fatigue or feeling tired
- Blurry or double vision
- Sensitivity to light or noise
- Numbness or tingling
- Does not "feel right"

#### Emotional:

- Irritable
- Sad
- More emotional than usual
- Nervous

#### Sleep\*:

- Drowsy
- Sleeps *less* than usual
- Sleeps *more* than usual
- Has trouble falling asleep

*\*Only ask about sleep symptoms if the injury occurred on a prior day.*

To download this fact sheet in Spanish, please visit: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion). Para obtener una copia electrónica de esta hoja de información en español, por favor visite: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR DISEASE CONTROL AND PREVENTION



# DANGER SIGNS

Be alert for symptoms that worsen over time. Your child or teen should be seen in an emergency department right away if s/he has:

- One pupil (the black part in the middle of the eye) larger than the other
- Drowsiness or cannot be awakened
- A headache that gets worse and does not go away
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Difficulty recognizing people or places
- Increasing confusion, restlessness, or agitation
- Unusual behavior
- Loss of consciousness (even a brief loss of consciousness should be taken seriously)

Children and teens with a concussion should **NEVER** return to sports or recreation activities on the same day the injury occurred. They should delay returning to their activities until a health care professional experienced in evaluating for concussion says they are symptom-free and it's OK to return to play. This means, until permitted, not returning to:

- Physical Education (PE) class,
- Sports practices or games, or
- Physical activity at recess.

## What should I do if my child or teen has a concussion?

1. **Seek medical attention right away.** A health care professional experienced in evaluating for concussion can determine how serious the concussion is and when it is safe for your child or teen to return to normal activities, including physical activity and school (concentration and learning activities).
2. **Help them take time to get better.** If your child or teen has a concussion, her or his brain needs time to heal. Your child or teen may need to limit activities while s/he is recovering from a concussion. Exercising or activities that involve a lot of concentration, such as studying, working on the computer, or playing video games may cause concussion symptoms (such as headache or tiredness) to reappear or get worse. After a concussion, physical and cognitive activities—such as concentration and learning—should be carefully managed and monitored by a health care professional.
3. **Together with your child or teen, learn more about concussions.** Talk about the potential long-term effects of concussion and the dangers of returning too soon to normal activities (especially physical activity and learning/concentration). For more information about concussion and free resources, visit: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).

## How can I help my child return to school safely after a concussion?

Help your child or teen get needed support when returning to school after a concussion. Talk with your child's teachers, school nurse, coach, speech-language pathologist, or counselor about your child's concussion and symptoms. Your child may feel frustrated, sad, and even angry because s/he cannot return to recreation and sports right away, or cannot keep up with schoolwork. Your child may also feel isolated from peers and social networks. Talk often with your child about these issues and offer your support and encouragement. As your child's symptoms decrease, the extra help or support can be removed gradually. Children and teens who return to school after a concussion may need to:

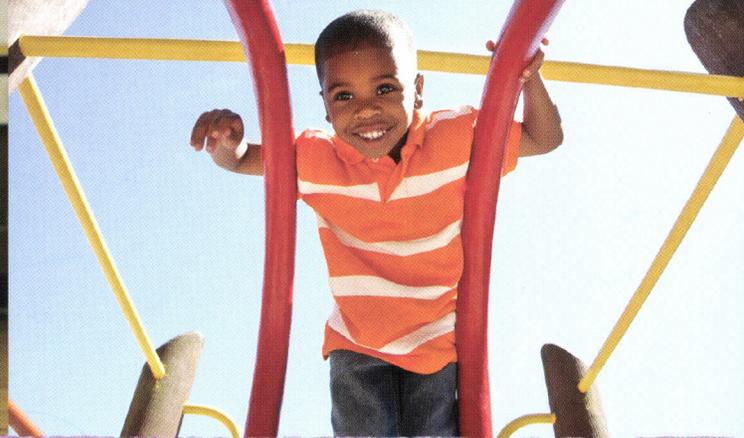
- Take rest breaks as needed,
- Spend fewer hours at school,
- Be given more time to take tests or complete assignments,
- Receive help with schoolwork, and/or
- Reduce time spent reading, writing, or on the computer.

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# Heads Up to Schools: KNOW YOUR CONCUSSION ABCs

Assess the situation | Be alert for signs and symptoms | Contact a health care professional



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- Difficulty concentrating or remembering
- Feeling more slowed down
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- Balance problems or dizziness
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- Irritable
- Sad
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##### Sleep\*:

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- Increasing confusion, restlessness, or agitation
- Unusual behavior
- Loss of consciousness (even a brief loss of consciousness should be taken seriously)



Children and teens with a concussion should **NEVER** return to sports or recreation activities on the same day the injury occurred. They should delay returning to their activities until a health care professional experienced in evaluating for concussion says they are symptom-free and it's OK to return to play. This means, until permitted, not returning to:

- Physical Education (PE) class,
- Sports practices or games, or
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## What should I do if my child or teen has a concussion?

1. **Seek medical attention right away.** A health care professional experienced in evaluating for concussion can determine how serious the concussion is and when it is safe for your child or teen to return to normal activities, including physical activity and school (concentration and learning activities).
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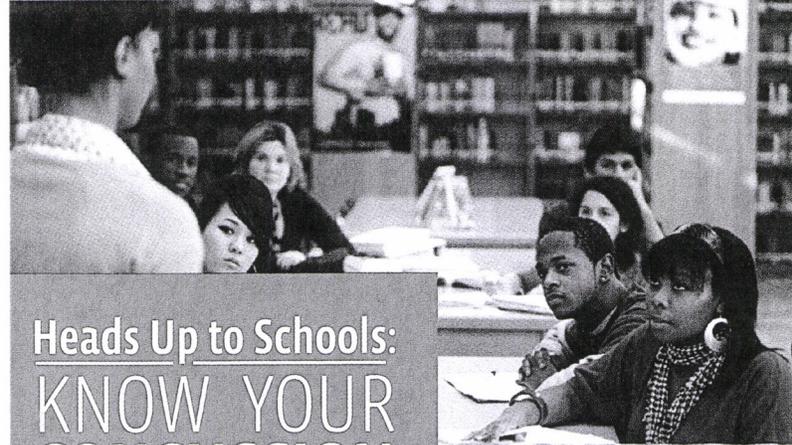
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- Take rest breaks as needed,
- Spend fewer hours at school,
- Be given more time to take tests or complete assignments,
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**Heads Up to Schools:**  
**KNOW YOUR**  
**CONCUSSION**  
**ABCs**

<b>A</b> ssess the situation	<b>B</b> e alert for signs and symptoms	<b>C</b> ontact a health care professional
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## A Fact Sheet for Teachers, Counselors, and School Professionals

### What is a concussion?

A concussion is a type of brain injury that changes the way the brain normally works. A concussion is caused by a bump, blow, or jolt to the head. Concussions can also occur from a fall or blow to the body that causes the head and brain to move rapidly back and forth. Even what seems to be a mild bump to the head can be serious.

Children and adolescents are among those at greatest risk for concussion. The potential for a concussion is greatest during activities where collisions can occur, such as during physical education (PE) class, playground time, or school-based sports activities. However, concussions can happen any time a student's head comes into contact with a hard object, such as a floor, desk, or another student's head or body. Proper recognition and response to concussion can prevent further injury and help with recovery.

### THE FACTS:

- \* All concussions are serious.
- \* Most concussions occur without loss of consciousness.
- \* Recognition and proper response to concussions when they first occur can help aid recovery and prevent further injury, or even death.

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CENTERS FOR DISEASE CONTROL AND PREVENTION



# What are the signs and symptoms of concussion?

The signs and symptoms of concussion can show up right after an injury or may not appear or be noticed until hours or days after the injury. Be alert for any of the following signs or symptoms. Also, watch for changes in how the student is acting or feeling, if symptoms are getting worse, or if the student just “doesn’t feel right.”



## SIGNS OBSERVED BY TEACHERS AND SCHOOL PROFESSIONALS

- Appears dazed or stunned
- Is confused about events
- Answers questions slowly
- Repeats questions
- Can’t recall events *prior* to the hit, bump, or fall
- Can’t recall events *after* the hit, bump, or fall
- Loses consciousness (even briefly)
- Shows behavior or personality changes
- Forgets class schedule or assignments

## SYMPTOMS REPORTED BY THE STUDENT

### Thinking/Remembering:

- Difficulty thinking clearly
- Difficulty concentrating or remembering
- Feeling more slowed down
- Feeling sluggish, hazy, foggy, or groggy

### Physical:

- Headache or “pressure” in head
- Nausea or vomiting
- Balance problems or dizziness
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- Blurry or double vision
- Sensitivity to light or noise
- Numbness or tingling
- Does not “feel right”

### Emotional:

- Irritable
- Sad
- More emotional than usual
- Nervous

### Sleep\*:

- Drowsy
- Sleeps *less* than usual
- Sleeps *more* than usual
- Has trouble falling asleep

*\*Only ask about sleep symptoms if the injury occurred on a prior day.*

## What are concussion danger signs?

Be alert for symptoms that worsen over time. The student should be seen in an emergency department right away if s/he has:

- One pupil (the black part in the middle of the eye) larger than the other
- Drowsiness or cannot be awakened
- A headache that gets worse and does not go away
- Weakness, numbness, or decreased coordination
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- Slurred speech
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- Difficulty recognizing people or places
- Increasing confusion, restlessness, or agitation
- Unusual behavior
- Loss of consciousness (even a brief loss of consciousness should be taken seriously)



Children and teens with a concussion should NEVER return to sports or recreation activities on the same day the injury occurred. They should delay returning to their activities until a health care professional experienced in evaluating for concussion says they are symptom-free and it's OK to return to play. This means, until permitted, not returning to:

- Physical Education (PE) class,
- Sports practices or games, or
- Physical activity at recess.

For more information and tool kits for youth sports coaches and high school coaches, visit [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).

## How can I recognize a concussion?

Teachers and school counselors may be the first to notice changes in their students. The signs and symptoms can take time to appear and can become evident during concentration and learning activities in the classroom.

**Send a student to the school nurse, or another professional designated to address health issues, if you notice or suspect that a student has:**

1. Any kind of forceful blow to the head or to the body that results in rapid movement of the head,  
**-and-**
2. Any change in the student's behavior, thinking, or physical functioning. (See the signs and symptoms of concussion.)

## What do I need to know about my students returning to school after a concussion?

Supporting a student recovering from a concussion requires a collaborative approach among school professionals, health care providers, and parents, as s/he may need accommodations during recovery. If symptoms persist, a 504 meeting may be called. Section 504 Plans are implemented when students have a disability (temporary or permanent) that affects their performance in any manner.



## What to look for after a concussion

When students return to school after a concussion, school professionals should watch for:

- Increased problems paying attention or concentrating
- Increased problems remembering or learning new information
- Longer time needed to complete tasks or assignments
- Difficulty organizing tasks
- Inappropriate or impulsive behavior during class
- Greater irritability
- Less ability to cope with stress or more emotional

Services and accommodations for students may include speech-language therapy, environmental adaptations, curriculum modifications, and behavioral strategies.

Students may need to limit activities while they are recovering from a concussion. Exercising or activities that involve a lot of concentration, such as studying, working on the computer, or playing video games, may cause concussion symptoms (such as headache or tiredness) to reappear or get worse.



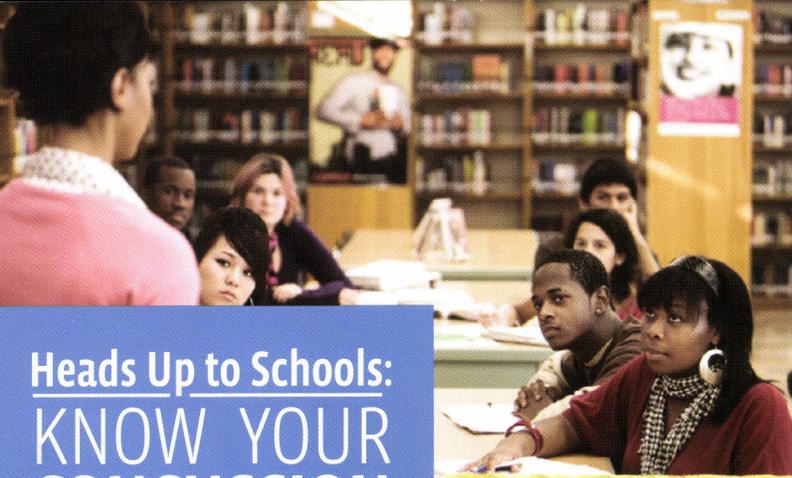
Students who return to school after a concussion may need to:

- Take rest breaks as needed,
- Spend fewer hours at school,
- Be given more time to take tests or complete assignments,
- Receive help with schoolwork, and/or
- Reduce time spent on the computer, reading, or writing.

It is normal for students to feel frustrated, sad, and even angry because they cannot return to recreation or sports right away, or cannot keep up with their schoolwork. A student may also feel isolated from peers and social networks. Talk with the student about these issues and offer support and encouragement. As the student's symptoms decrease, the extra help or support can be removed gradually.



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**Heads Up to Schools:**  
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**A Fact Sheet for Teachers, Counselors,  
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**THE FACTS:**

- \* All concussions are serious.
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 CENTERS FOR DISEASE CONTROL AND PREVENTION





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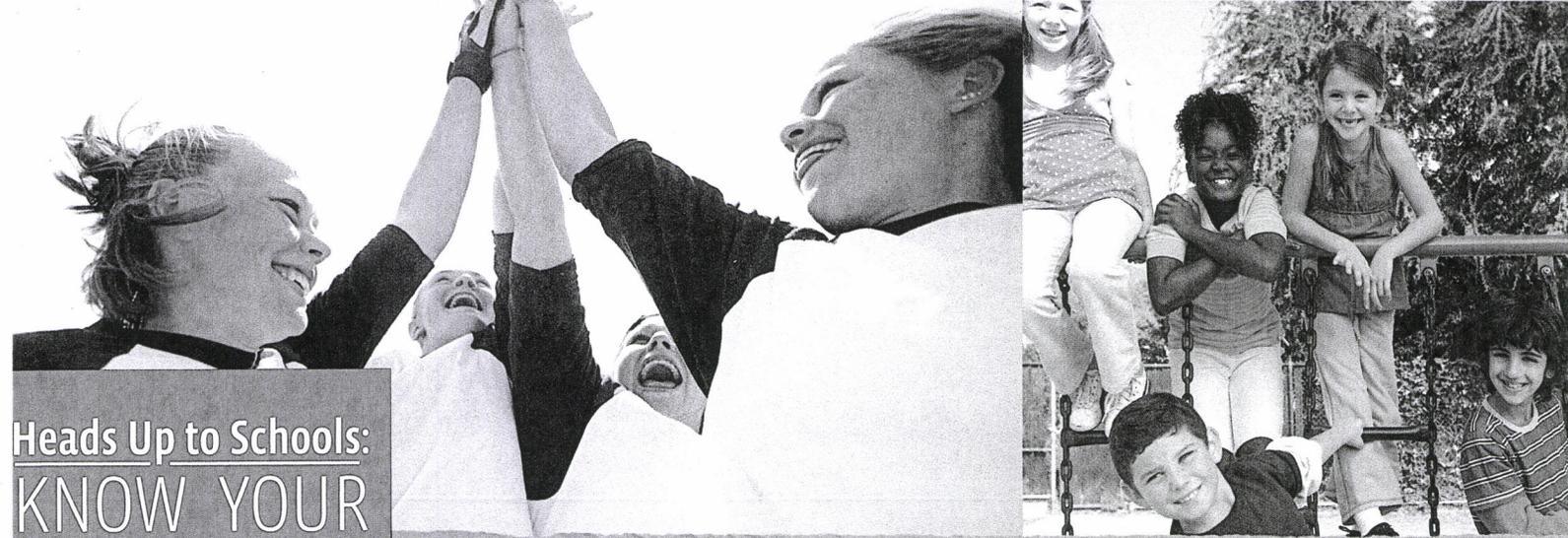
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# Heads Up to Schools: KNOW YOUR CONCUSSION ABCs

Assess the situation	Be alert for signs and symptoms	Contact a health care professional
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## A Fact Sheet for School Nurses

### What is a concussion?

A concussion is a type of brain injury that changes the way the brain normally works. A concussion is caused by a bump, blow, or jolt to the head.

Concussions can also occur from a fall or blow to the body that causes the head and brain to move rapidly back and forth. Even what seems to be a mild bump to the head can be serious.

### How can I recognize a concussion?

To help you recognize a concussion, ask the injured student or witnesses of the incident about:

1. Any kind of forceful blow to the head or to the body that resulted in rapid movement of the head.

-and-

2. Any change in the student's behavior, thinking, or physical functioning. (See the signs and symptoms of concussion.)



### THE FACTS:

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- \* Most concussions occur without loss of consciousness.
- \* Recognition and proper response to concussions when they first occur can help aid recovery and prevent further injury, or even death.

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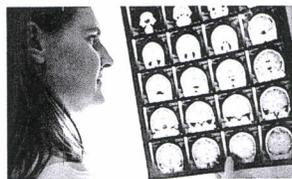
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CENTERS FOR DISEASE CONTROL AND PREVENTION



can result in edema (brain swelling), permanent brain damage, and even death. Keep students with a known or suspected concussion out of physical activity, sports, or playground activity on the day of the injury and until a health care professional with experience in evaluating for concussion says they are symptom-free and it is OK for the student to return to play.

### **Create safe school environments.**

The best way to protect students from concussions is to prevent concussions from happening. Make sure your school has policies and procedures to ensure that the environment is a safe, healthy place for students. Talk to all school staff and administrators and encourage them to keep the physical space safe, keep stairs and hallways clear of clutter, secure rugs to the floor, and check the surfaces of all areas where students are physically active, such as playing fields and playgrounds. Playground surfaces should be made of shock-absorbing material, such as hardwood mulch or sand, and maintained to an appropriate depth. Proper supervision of students is also important.



For more detailed information about concussion diagnosis and management, please download *Heads Up: Facts for Physicians about Mild Traumatic Brain Injury* from CDC at: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).

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**Monitor the health of your student athletes.** Make sure to ask whether an athlete has ever had a concussion and insist that your athletes are medically

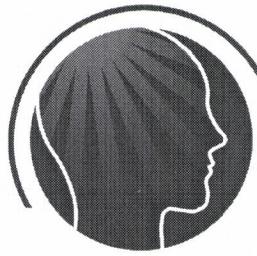
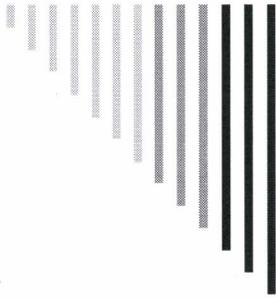
evaluated and are in good condition to participate in sports. Keep track of athletes who sustain concussions during the school year. This will help in monitoring injured athletes who participate in multiple sports throughout the school year.

Some schools conduct preseason baseline testing (also known as neurocognitive tests) to assess brain function—learning and memory skills, ability to pay attention or concentrate, and how quickly someone can think and solve problems. If an athlete has a concussion, these tests can be used again during the season to help identify the effects of the injury. Before the first practice, determine whether your school would consider baseline testing.

*Again, remember your  
concussion ABCs:*

- A—Assess the situation
- B—Be alert for signs and symptoms
- C—Contact a health care professional

\* For more information on concussion and to order additional materials for school professionals **FREE- OF-CHARGE**, visit: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).



# Brain Injury Alliance

M O N T A N A

*Associate Member of the United States Brain Injury Alliance*

**The Mission of the Brain Injury Alliance of Montana is to create a better future through brain injury prevention, research, education and advocacy.**

Services provided by BIAMT:

- ◆ Toll-free number
- ◆ Information and Referral services
- ◆ Brain Injury Help Line (please see additional information on back of flyer)
- ◆ Advocacy
- ◆ Brain Injury Support Groups
- ◆ Website: [www.biamt.org](http://www.biamt.org)
- ◆ Annual Brain Injury Conference
- ◆ Educational trainings

## Contact Information

Mailing Address:

1280 South 3rd Street West, Ste. 4  
Missoula, Montana 59801

Phone:

1-800-241-6442 (in-state only)

406-541-6442

406-541-4360 (fax)

## VISION

A world where all preventable brain injuries are prevented,  
all unpreventable brain injuries are minimized,  
and all individuals who have experienced brain injury maximize their quality of life.

## Brief History

In 1985, three known support groups were meeting around the state on an irregular basis. A core group of eight individuals dedicated themselves to forming a state organization for the benefit of brain injury survivors and their families throughout Montana. The state organization was founded in 1987.

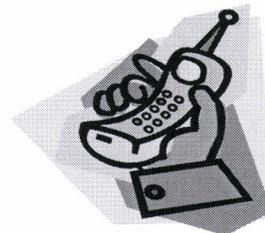
The first Brain Injury Conference in Montana was held in the fall of 1988; 133 people attended. In 1991 the Association opened an office at Eastern Montana College staffed by volunteers and a graduate assistant. It soon became clear that more help was needed and an office manager was hired and the toll-free number was established.

In 1994, the office relocated to the University of Montana campus in Missoula. The Association has remained in Missoula where it provides hands on learning opportunities for graduate students, recipients of a Federal Work Study award, and volunteers of the Americorp program.

In 2005, the Association participated in an implementation grant of the Resource Facilitation Service; currently known as Brain Injury Help Line. The free service is a collaborative process that respects and encourages the involvement and choices of individuals with brain injury and their families in setting goals, identifying and accessing information, services and supports that are desired. The brain injury help line assisted 1,165 individuals between January 2006 and December 2011.

# BRAIN INJURY HELP LINE

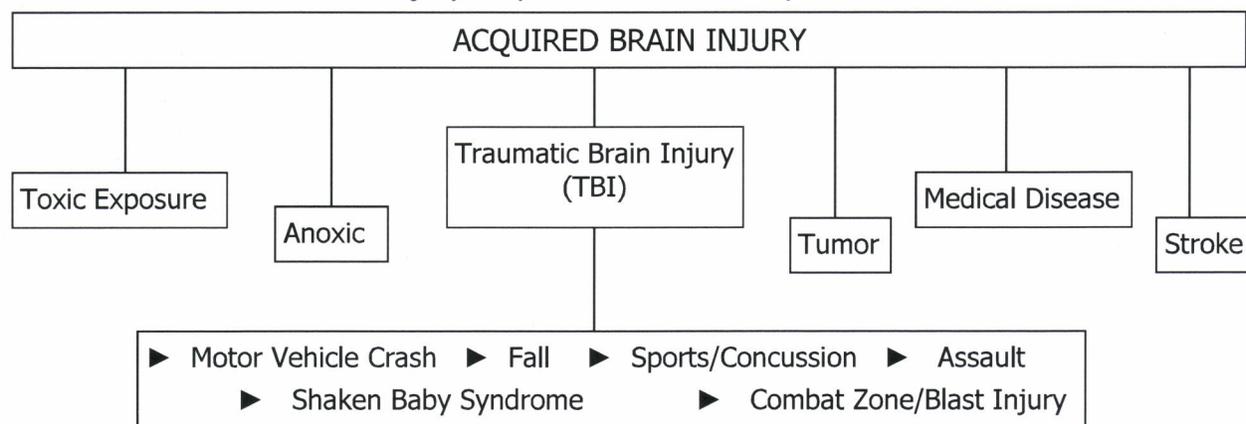
The Brain Injury Help Line (BIHL) is a FREE 24 month telephone-based follow-up system of care provided by the Brain Injury Alliance of Montana. BIHL links individuals with brain injury and their families to local information, resources, service providers and natural supports. It is a collaborative process that respects and encourages the involvement and choices of individuals with a brain injury and their family members.



The Brain Injury Help Line is:

- ◆ INDIVIDUALIZED
- ◆ ACCESSIBLE
- ◆ HOLISTIC
- ◆ PARTICIPANT DRIVEN
- ◆ EFFECTIVE AND VALUED
- ◆ CREATIVE AND FLEXIBLE

Montanans of all ages living with acquired brain injury and their families can participate in the Brain Injury Help Line. Some examples include:



## HOW CAN YOU PARTICIPATE IN THE BRAIN INJURY HELP LINE?

If you or someone you know is living with a brain injury you may contact a resource facilitator at 1-800-241-6442.

A resource facilitator will explain the services and ask you to complete a one page authorization form. No medical records are required to participate.

By signing the authorization form you give permission for a resource facilitator to initiate the 24 month follow up service.

If you are a community agency wishing to connect your clients to this free state-wide service please contact our office at 406-541-6442.

## HOW DOES A RESOURCE FACILITATOR ASSIST YOU?

Within six weeks of enrollment you will be contacted by a resource facilitator and receive an individualized packet of information.

Scheduled follow up calls take place at 6, 12, 18, and 24 months. You may request additional calls from your resource facilitator as needed.

Your resource facilitator will assist you and your family by providing printed materials, resources, and advocacy. The resource facilitator will also assist with planning and problem solving.

Participants receive emotional support and education while they recover, adjust, and resume their daily activities.



# Heads Up to Schools: KNOW YOUR CONCUSSION ABCs

Assess  
the  
situation

Be alert for  
signs and  
symptoms

Contact a  
health care  
professional

## A Fact Sheet for School Nurses



### THE FACTS:

- \* All concussions are serious.
- \* Most concussions occur without loss of consciousness.
- \* Recognition and proper response to concussions when they first occur can help aid recovery and prevent further injury, or even death.

### What is a concussion?

A concussion is a type of brain injury that changes the way the brain normally works. A concussion is caused by a bump, blow, or jolt to the head. Concussions can also occur from a fall or blow to the body that causes the head and brain to move rapidly back and forth. Even what seems to be a mild bump to the head can be serious.

### How can I recognize a concussion?

To help you recognize a concussion, ask the injured student or witnesses of the incident about:

1. Any kind of forceful blow to the head or to the body that resulted in rapid movement of the head.
- and-
2. Any change in the student's behavior, thinking, or physical functioning. (See the signs and symptoms of concussion.)

To download this fact sheet in Spanish, please visit: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).  
Para obtener una copia electrónica de esta hoja de información en español, por favor visite: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).

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CENTERS FOR DISEASE CONTROL AND PREVENTION



## How can concussions happen in schools?

Children and adolescents are among those at greatest risk for concussion. Concussions can result from a fall, or any time a student's head comes into contact with a hard object, such as the floor, a desk, or another student's head or body. The potential for a concussion is greatest during activities where collisions can occur, such as during physical education (PE) class, playground time, or school-based sports activities.

Students may also get a concussion when doing activities outside of school, but then come to school when symptoms of the concussion are presenting. For example, adolescent drivers are at increased risk for concussion from motor vehicle crashes.

Concussions can have a more serious effect on a young, developing brain and need to be addressed correctly. Proper recognition and response to concussion symptoms in the school environment can prevent further injury and can help with recovery.



# What are the signs and symptoms of concussion?

Students who experience **one or more** of the signs and symptoms listed below after a bump, blow, or jolt to the head or body should be referred to a health care professional experienced in evaluating for concussion.

There is no one single indicator for concussion. Rather, recognizing a concussion requires a symptom assessment. The signs and symptoms of concussion can take time to appear and can become more noticeable during concentration and learning activities in the classroom. For this reason, it is important to watch for changes in how the student is acting or feeling, if symptoms become worse, or if the student just “doesn’t feel right.”

## SIGNS OBSERVED BY SCHOOL NURSES

- Appears dazed or stunned
- Is confused about events
- Answers questions slowly
- Repeats questions
- Can’t recall events *prior* to the hit, bump, or fall
- Can’t recall events *after* the hit, bump, or fall
- Loses consciousness (even briefly)
- Shows behavior or personality changes

## SYMPTOMS REPORTED BY THE STUDENT

### Thinking/Remembering:

- Difficulty thinking clearly
- Difficulty concentrating or remembering
- Feeling more slowed down
- Feeling sluggish, hazy, foggy, or groggy

### Emotional:

- Irritable
- Sad
- More emotional than usual
- Nervous

### Physical:

- Headache or “pressure” in head
- Nausea or vomiting
- Balance problems or dizziness
- Fatigue or feeling tired
- Blurry or double vision
- Sensitivity to light or noise
- Numbness or tingling
- Does not “feel right”

### Sleep\*:

- Drowsy
- Sleeps *less* than usual
- Sleeps *more* than usual
- Has trouble falling asleep

*\*Only ask about sleep symptoms if the injury occurred on a prior day.*



Remember, you can’t see a concussion and some students may not experience or report symptoms until hours or days after the injury. Most young people with a concussion will recover quickly and fully. But for some, concussion signs and symptoms can last for days, weeks, or longer.



## What are concussion danger signs?

In rare cases, a dangerous blood clot may form on the brain in a person with a concussion and crowd the brain against the skull. The student should be taken to an emergency department right away if s/he exhibits any of the following danger signs after a bump, blow, or jolt to the head or body:

- One pupil larger than the other
- Is drowsy or cannot be awakened
- A headache that gets worse and does not go away
- Weakness, numbness, or decreased coordination

- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Cannot recognize people or places
- Becomes increasingly confused, restless, or agitated
- Has unusual behavior
- Loses consciousness (even a brief loss of consciousness should be taken seriously)

For more information and tool kits for youth sports coaches and high school coaches, visit [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).

## What can school nurses and school professionals do?

Below are steps for you to take when a student comes to your office after a bump, blow, or jolt to the head or body.

1. **Observe student for signs and symptoms of concussion for a minimum of 30 minutes.**
2. **Complete the *Concussion Signs and Symptoms Checklist* and monitor students consistently during the observation period.** The form includes an easy-to-use checklist of signs and symptoms that you can look for when the student first arrives at your office, fifteen minutes later, and at the end of 30 minutes, to determine whether any concussion symptoms appear or change.
3. **Notify the student's parent(s) or guardian(s) that their child had an injury to the head.**
  - > **If signs or symptoms are present:** refer the student right away to a health care professional with experience in evaluating for concussion. Send a copy of the *Concussion Signs and Symptoms Checklist* with the student for the health care professional to review. Students should follow their health care professional's guidance about when they can return to school and to physical activity.

- > **If signs or symptoms are not present:** the student may return to class, but should not return to sports or recreation activities on the day of the injury. Send a copy of the *Concussion Signs and Symptoms Checklist* with the student for their parent(s) or guardian(s) to review and ask them to continue to observe the student at home for any changes. Explain that signs and symptoms of concussion can take time to appear. Note that if signs or symptoms appear, the student should be seen right away by a health care professional with experience in evaluating for concussion.



Children and teens with a concussion should NEVER return to sports or recreation activities on the same day the injury occurred. They should delay returning to their activities until a health care professional experienced in evaluating for concussion says they are symptom-free and it's OK to return to play. This means, until permitted, not returning to:

- Physical Education (PE) class,
- Sports practices or games, or
- Physical activity at recess.



## What do I need to know about students returning to school after a concussion?

Supporting a student recovering from a concussion requires a collaborative approach among school professionals, health care professionals, parents, and students. All school staff, such as teachers, school nurses, counselors, administrators, speech-language pathologists, coaches, and others should be informed about a returning student's injury and symptoms, as they can assist with the transition process and making accommodations for a student. If symptoms persist, a 504 meeting may be called. Section 504 Plans are implemented when students have a disability (temporary or permanent) that affects their performance in any manner. Services and accommodations for students may include speech-language therapy, environmental



### School Policies:

#### *Students Returning to School after a Concussion*

Check with your school administrators to see if your district or school has a policy in place to help students recovering from a concussion succeed when they return to school. If not, consider working with your school administration to develop such a policy. Policy statements can include the district's or school's commitment to safety, a brief description of concussion, a plan to help students ease back into school life (learning, social activity, etc.), and information on when students can safely return to physical activity following a concussion.

adaptations, curriculum modifications, and behavioral strategies.

Encourage teachers and coaches to monitor students who return to school after a concussion. Students may need to limit activities while they are recovering from a concussion. Exercising or activities that involve a lot of concentration, such as studying, working on the computer, or playing video games, may cause concussion symptoms (such as headache or tiredness) to reappear or get worse. After a concussion, physical and cognitive activities—such as concentration and learning—should be carefully monitored and managed by health and school professionals.

If a student already had a medical condition at the time of the concussion (such as chronic headaches), it may take longer to

recover from the concussion. Anxiety and depression may also make it harder to adjust to the symptoms of a concussion.

School professionals should watch for students who show increased problems paying attention, problems remembering or learning new information, inappropriate or impulsive behavior during class, greater irritability, less ability to cope with stress, or difficulty organizing tasks. Students who return to school after a concussion may need to:

- Take rest breaks as needed,
- Spend fewer hours at school,
- Be given more time to take tests or complete assignments,
- Receive help with schoolwork, and/or
- Reduce time spent on the computer, reading, or writing.

It is normal for a student to feel frustrated, sad, and even angry because s/he cannot return to recreation or sports right away, or cannot keep up with schoolwork. A student may also feel isolated from peers and social networks. Talk with the student about these issues and offer support and encouragement. As the student's symptoms decrease, the extra help or support can be gradually removed.

## What can I do to prevent and prepare for a concussion?

Here are some steps you can take to prevent concussions in school and ensure the best outcome for your students:

**Prepare a concussion action plan.** To ensure that concussions are identified early and managed correctly, have an action plan in place before the start of the school year. This plan can be included in your school or district's concussion policy. You can use the online action plan for sports and recreation activities at: [www.cdc.gov/concussion/response/html](http://www.cdc.gov/concussion/response/html). Be sure that other appropriate school and athletic staff know about the plan and have been trained to use it.

**Educate parents, teachers, coaches, and students about concussion.** Parents, teachers, and coaches know their students well and may be the first to notice when a student is not acting normally. Encourage teachers, coaches, and students to:

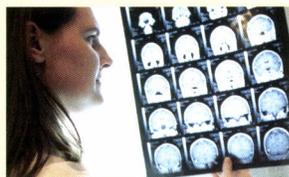
- Learn about the potential long-term effects of concussion and the dangers of returning to activity too soon.
- Look out for the signs and symptoms of concussion and send students to see you if they observe any or even suspect that a concussion has occurred.
- View videos about concussion online at: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).

**Prevent long-term problems.** A repeat concussion that occurs before the brain recovers from the previous concussion—usually within a short period of time (hours, days, or weeks)—can slow recovery or increase the likelihood of having long-term problems. In rare cases, repeat concussions

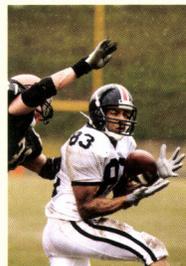
can result in edema (brain swelling), permanent brain damage, and even death. Keep students with a known or suspected concussion out of physical activity, sports, or playground activity on the day of the injury and until a health care professional with experience in evaluating for concussion says they are symptom-free and it is OK for the student to return to play.

### **Create safe school environments.**

The best way to protect students from concussions is to prevent concussions from happening. Make sure your school has policies and procedures to ensure that the environment is a safe, healthy place for students. Talk to all school staff and administrators and encourage them to keep the physical space safe, keep stairs and hallways clear of clutter, secure rugs to the floor, and check the surfaces of all areas where students are physically active, such as playing fields and playgrounds. Playground surfaces should be made of shock-absorbing material, such as hardwood mulch or sand, and maintained to an appropriate depth. Proper supervision of students is also important.



For more detailed information about concussion diagnosis and management, please download *Heads Up: Facts for Physicians about Mild Traumatic Brain Injury* from CDC at: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).



**Monitor the health of your student athletes.** Make sure to ask whether an athlete has ever had a concussion and insist that your athletes are medically

evaluated and are in good condition to participate in sports. Keep track of athletes who sustain concussions during the school year. This will help in monitoring injured athletes who participate in multiple sports throughout the school year.

Some schools conduct preseason baseline testing (also known as neurocognitive tests) to assess brain function—learning and memory skills, ability to pay attention or concentrate, and how quickly someone can think and solve problems. If an athlete has a concussion, these tests can be used again during the season to help identify the effects of the injury. Before the first practice, determine whether your school would consider baseline testing.

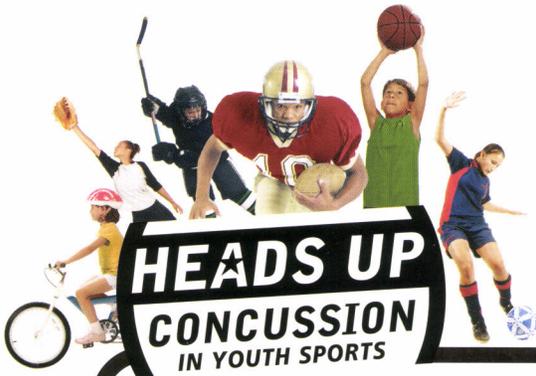
*Again, remember your concussion ABCs:*

- A—Assess the situation
- B—Be alert for signs and symptoms
- C—Contact a health care professional

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\* For more information on concussion and to order additional materials for school professionals **FREE-OF-CHARGE**, visit: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).



## HEADS UP CONCUSSION IN YOUTH SPORTS

## A Fact Sheet for COACHES

To download the coaches fact sheet in Spanish, please visit [www.cdc.gov/ConcussionInYouthSports](http://www.cdc.gov/ConcussionInYouthSports)  
Para descargar la hoja informativa para los entrenadores en español, por favor visite:  
[www.cdc.gov/ConcussionInYouthSports](http://www.cdc.gov/ConcussionInYouthSports)

### THE FACTS

- A concussion is a **brain injury**.
- All concussions are **serious**.
- Concussions can occur **without** loss of consciousness.
- Concussions can occur **in any sport**.
- Recognition and proper management of concussions when they **first occur** can help prevent further injury or even death.

### WHAT IS A CONCUSSION?

A concussion is an injury that changes how the cells in the brain normally work.

A concussion is caused by a blow to the head or body that causes the brain to move rapidly inside the skull. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious. Concussions can also result from a fall or from players colliding with each other or with obstacles, such as a goalpost.

The potential for concussions is greatest in athletic environments where collisions are common.<sup>1</sup> Concussions can occur, however,

in **any** organized or unorganized sport or recreational activity.

### RECOGNIZING A POSSIBLE CONCUSSION

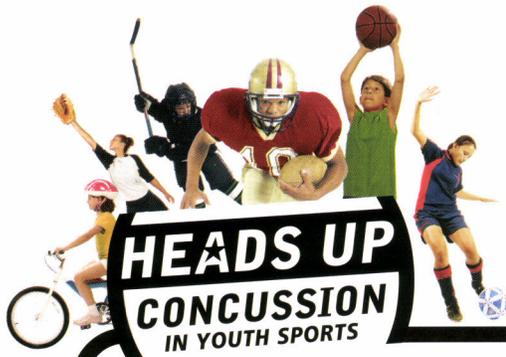
To help recognize a concussion, you should watch for the following two things among your athletes:

1. A forceful blow to the head or body that results in rapid movement of the head.

**-and-**

2. Any change in the athlete’s behavior, thinking, or physical functioning. (See the signs and symptoms of concussion listed on the next page.)

***It's better to miss one game than the whole season.***



## SIGNS AND SYMPTOMS<sup>2</sup>

### SIGNS OBSERVED BY COACHING STAFF

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets sports plays
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows behavior or personality changes
- Can't recall events prior to hit or fall
- Can't recall events after hit or fall

### SYMPTOMS REPORTED BY ATHLETE

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Does not "feel right"

*Adapted from Lovell et al. 2004*

Athletes who experience any of these signs or symptoms after a bump or blow to the head should be kept from play until given permission to return to play by a health care professional with experience in evaluating for concussion. Signs and symptoms of concussion can last from several minutes to days, weeks, months, or even longer in some cases.

Remember, you can't see a concussion and some athletes may not experience and/or report symptoms until hours or days after the injury. If you have any suspicion that your athlete has a concussion, you should keep the athlete out of the game or practice.

### PREVENTION AND PREPARATION

As a coach, you can play a key role in preventing concussions and responding to them properly when they occur. Here are some steps you can take to ensure the best outcome for your athletes and the team:

- **Educate athletes and parents about concussion.** Talk with athletes and their parents about the dangers and potential long-term consequences of concussion. For more information on long-term effects of concussion, take the free online training for coaches and parents: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).

Explain your concerns about concussion and your expectations of safe play to athletes, parents, and assistant coaches. Pass out the concussion fact sheets for athletes and for parents at the beginning of the season and again if a concussion occurs.

- **Insist that safety comes first.**

- > Teach athletes safe playing techniques and encourage them to follow the rules of play.
- > Encourage athletes to practice good sportsmanship at all times.
- > Make sure athletes wear the right protective equipment for their activity (such as helmets, padding, shin guards, and eye and mouth guards). Protective equipment should fit properly, be well maintained, and be worn consistently and correctly.
- > Review the athlete fact sheet with your team to help them recognize the signs and symptoms of a concussion.

Check with your youth sports league or administrator about concussion policies. Concussion policy statements can be developed to include the league's commitment to safety, a brief description of concussion, and information on when athletes can safely return to play following a concussion (i.e., an athlete with known or suspected concussion

should be kept from play until evaluated and given permission to return by a health care professional). Parents and athletes should sign the concussion policy statement at the beginning of the sports season.

- **Teach athletes and parents that it's not smart to play with a concussion.**

Sometimes players and parents wrongly believe that it shows strength and courage to play injured. Discourage others from pressuring injured athletes to play. Don't let athletes persuade you that they're "just fine" after they have sustained any bump or blow to the head. Ask if players have ever had a concussion.

- **Prevent long-term problems.** A repeat concussion that occurs before the brain recovers from the first—usually within a short period of time (hours, days, or weeks)—can slow recovery or increase the likelihood of having long-term problems. In rare cases, repeat concussions can result in brain swelling, permanent brain damage, and even death.<sup>3,4</sup> Keep athletes with known or suspected concussion from play until they have been evaluated and given permission to return to play by a health care professional with experience in evaluating for concussion. Remind your athletes: "It's better to miss one game than the whole season."

## ACTION PLAN

### WHAT SHOULD A COACH DO WHEN A CONCUSSION IS SUSPECTED?

- 1. Remove the athlete from play.** Look for the signs and symptoms of a concussion if your athlete has experienced a bump or blow to the head. Athletes who experience signs or symptoms of concussion should not be allowed to return to play. When in doubt, keep the athlete out of play.
- 2. Ensure that the athlete is evaluated right away by an appropriate health care professional.** Do not try to judge the severity of the injury yourself. Health care professionals have a number of methods that they can use to assess the severity of concussions. As a coach, recording the following information can help health care professionals in assessing the athlete after the injury:
  - Cause of the injury and force of the hit or blow to the head
  - Any loss of consciousness (passed out/ knocked out) and if so, for how long
  - Any memory loss immediately following the injury
  - Any seizures immediately following the injury
  - Number of previous concussions (if any)

- 3. Inform the athlete's parents or guardians about the possible concussion and give them the fact sheet on concussion.**

Make sure they know that the athlete should be seen by a health care professional experienced in evaluating for concussion.

- 4. Allow the athlete to return to play only with permission from a health care professional with experience in evaluating for concussion.** A repeat concussion that occurs before the brain recovers from the first can slow recovery or increase the likelihood of having long-term problems. Prevent long-term problems by delaying the athlete's return to the activity until the player receives appropriate medical evaluation and approval for return to play.

### REFERENCES

1. Powell JW. Cerebral concussion: causes, effects, and risks in sports. *Journal of Athletic Training* 2001; 36(3):307-311.
2. Lovell MR, Collins MW, Iverson GL, Johnston KM, Bradley JP. Grade 1 or "ding" concussions in high school athletes. *The American Journal of Sports Medicine* 2004; 32(1):47-54.
3. Institute of Medicine (US). Is soccer bad for children's heads? Summary of the IOM Workshop on Neuropsychological Consequences of Head Impact in Youth Soccer. Washington (DC): National Academy Press; 2002.
4. Centers for Disease Control and Prevention (CDC). Sports-related recurrent brain injuries-United States. *Morbidity and Mortality Weekly Report* 1997; 46(10):224-227. Available at: [www.cdc.gov/mmwr/preview/mmwrhtml/00046702.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/00046702.htm).

***If you think your athlete has sustained a concussion... take him/her out of play, and seek the advice of a health care professional experienced in evaluating for concussion.***

## Student-Athlete & Parent/Legal Custodian Concussion Statement

*\*If there is anything on this sheet that you do not understand, please ask an adult to explain or read it to you.*

Student-Athlete Name: \_\_\_\_\_

*This form must be completed for each student-athlete, even if there are multiple student-athletes in each household.*

Parent/Legal Custodian Name(s): \_\_\_\_\_

- We have read the *Student-Athlete & Parent/Legal Custodian Concussion Information Sheet*.  
If true, please check box.

After reading the information sheet, I am aware of the following information:

Student-Athlete Initials		Parent/Legal Custodian Initials
	A concussion is a brain injury, which should be reported to my parents, my coach(es), or a medical professional if one is available.	
	A concussion can affect the ability to perform everyday activities such as the ability to think, balance, and classroom performance.	
	A concussion cannot be "seen." Some symptoms might be present right away. Other symptoms can show up hours or days after an injury.	
	I will tell my parents, my coach, and/or a medical professional about my injuries and illnesses.	N/A
	If I think a teammate has a concussion, I should tell my coach(es), parents, or medical professional about the concussion.	N/A
	I will not return to play in a game or practice if a hit to my head or body causes any concussion-related symptoms.	N/A
	I will/my child will need written permission from a medical professional trained in concussion management to return to play or practice after a concussion.	
	Based on the latest data, most concussions take days or weeks to get better. A concussion may not go away right away. I realize that resolution from this injury is a process and may require more than one medical evaluation.	
	I realize that ER/Urgent Care physicians will not provide clearance if seen right away after the injury.	
	After a concussion, the brain needs time to heal. I understand that I am/my child is much more likely to have another concussion or more serious brain injury if return to play or practice occurs before concussion symptoms go away.	
	Sometimes, repeat concussions can cause serious and long-lasting problems.	
	I have read the concussion symptoms on the Concussion Information Sheet.	

\_\_\_\_\_  
Signature of Student-Athlete

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Legal Custodian

\_\_\_\_\_  
Date

# CONCUSSION

## INFORMATION FOR *STUDENT-ATHLETES & PARENTS/LEGAL CUSTODIANS*

**What is a concussion?** A concussion is an injury to the brain caused by a direct or indirect blow to the head. It results in your brain not working as it should. It may or may not cause you to black out or pass out. It can happen to you from a fall, a hit to the head, or a hit to the body that causes your head and your brain to move quickly back and forth.

**How do I know if I have a concussion?** There are many signs and symptoms that you may have following a concussion. A concussion can affect your thinking, the way your body feels, your mood, or your sleep. Here is what to look for:

Thinking/Remembering	Physical	Emotional/Mood	Sleep
Difficulty thinking clearly	Headache	Irritability-things bother you more easily	Sleeping more than usual
Taking longer to figure things out	Fuzzy or blurry vision	Sadness	Sleeping less than usual
Difficulty concentrating	Feeling sick to your stomach/queasy	Being more moody	Trouble falling asleep
Difficulty remembering new information	Vomiting/throwing up	Feeling nervous or worried	Feeling tired
	Dizziness	Crying more	
	Balance problems		
	Sensitivity to noise or light		

*Table is adapted from the Centers for Disease Control and Prevention (<http://www.cdc.gov/concussion/>)*

**What should I do if I think I have a concussion?** If you are having any of the signs or symptoms listed above, you should tell your parents, coach, athletic trainer or school nurse so they can get you the help you need. If a parent notices these symptoms, they should inform the school nurse or athletic trainer.

**When should I be particularly concerned?** If you have a headache that gets worse over time, you are unable to control your body, you throw up repeatedly or feel more and more sick to your stomach, or your words are coming out funny/slurred, you should let an adult like your parent or coach or teacher know right away, so they can get you the help you need before things get any worse.

**What are some of the problems that may affect me after a concussion?** You may have trouble in some of your classes at school or even with activities at home. If you continue to play or return to play too early with a concussion, you may have long term trouble remembering things or paying attention, headaches may last a long time, or personality changes can occur. Once you have a concussion, you are more likely to have another concussion.

**How do I know when it's ok to return to physical activity and my sport after a concussion?** After telling your coach, your parents, and any medical personnel around that you think you have a concussion, you will probably be seen by a doctor trained in helping people with concussions. Your school and your parents can help you decide who is best to treat you and help to make the decision on when you should return to activity/play or practice. Your school will have a policy in place for how to treat concussions. You should not return to play or practice on the same day as your suspected concussion.

***You should not have any symptoms at rest or during/after activity when you return to play, as this is a sign your brain has not recovered from the injury.***

*This information is provided to you by the UNC Matthew Gfeller Sport-Related TBI Research Center, North Carolina Medical Society, North Carolina Athletic Trainers' Association, Brain Injury Association of North Carolina, North Carolina Neuropsychological Society, and North Carolina High School Athletic Association.*

# CONCUSSION

## INFORMATION FOR *STUDENT-ATHLETES & PARENTS/LEGAL CUSTODIANS*

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## Student-Athlete & Parent/Legal Custodian Concussion Statement

*\*If there is anything on this sheet that you do not understand, please ask an adult to explain or read it to you.*

Student-Athlete Name: \_\_\_\_\_

*This form must be completed for each student-athlete, even if there are multiple student-athletes in each household.*

Parent/Legal Custodian Name(s): \_\_\_\_\_

- We have read the *Student-Athlete & Parent/Legal Custodian Concussion Information Sheet*.  
If true, please check box.

After reading the information sheet, I am aware of the following information:

Student-Athlete Initials		Parent/Legal Custodian Initials
	A concussion is a brain injury, which should be reported to my parents, my coach(es), or a medical professional if one is available.	
	A concussion can affect the ability to perform everyday activities such as the ability to think, balance, and classroom performance.	
	A concussion cannot be "seen." Some symptoms might be present right away. Other symptoms can show up hours or days after an injury.	
	I will tell my parents, my coach, and/or a medical professional about my injuries and illnesses.	N/A
	If I think a teammate has a concussion, I should tell my coach(es), parents, or medical professional about the concussion.	N/A
	I will not return to play in a game or practice if a hit to my head or body causes any concussion-related symptoms.	N/A
	I will/my child will need written permission from a medical professional trained in concussion management to return to play or practice after a concussion.	
	Based on the latest data, most concussions take days or weeks to get better. A concussion may not go away right away. I realize that resolution from this injury is a process and may require more than one medical evaluation.	
	I realize that ER/Urgent Care physicians will not provide clearance if seen right away after the injury.	
	After a concussion, the brain needs time to heal. I understand that I am/my child is much more likely to have another concussion or more serious brain injury if return to play or practice occurs before concussion symptoms go away.	
	Sometimes, repeat concussions can cause serious and long-lasting problems.	
	I have read the concussion symptoms on the Concussion Information Sheet.	

\_\_\_\_\_  
Signature of Student-Athlete

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Legal Custodian

\_\_\_\_\_  
Date

# CONCUSSION

## INFORMATION FOR COACHES/SCHOOL NURSES/SCHOOL VOLUNTEERS

**What is a concussion?** A concussion is a traumatic brain injury caused by a direct or indirect impact to the head that results in disruption of normal brain function, which may or may not result in loss of consciousness. It can occur from a fall, a blow to the head, or a blow to the body that causes the head and the brain to move quickly back and forth.

**How do I recognize a concussion?** There are many signs and symptoms a person may experience following concussion that can affect their thinking, emotions or mood, physical abilities, or sleep.

Thinking/Remembering	Physical	Emotional/Mood	Sleep
Difficulty thinking clearly	Headache	Irritability	Sleeping more than usual
Feeling slowed down	Fuzzy or blurry vision	Sadness	Sleeping less than usual
Difficulty concentrating	Nausea/Vomiting	More emotional than normal	Trouble falling asleep
Difficulty remembering new information	Dizziness	Feeling nervous or anxious	
	Balance problems	Crying more	
	Sensitivity to noise or light		

*Table from the Centers for Disease Control and Prevention (<http://www.cdc.gov/concussion/>)*

**What should I do if I think a student-athlete has sustained a concussion?** If you suspect a student-athlete is experiencing any of the signs and symptoms listed above, you immediately remove them from participation, let their parents know, and/or refer them to the appropriate medical personnel.

**What are the warning signs that a more significant head injury may have occurred?** If they have a headache that gets worse over time, experience loss of coordination or abnormal body movements, have repeated nausea, vomiting, slurred speech, or you witness what you believe to be a severe head impact, you should refer them to appropriate medical personnel immediately.

**What are some of the long-term or cumulative issues that may result from a concussion?** Individuals may have trouble in some of their classes at school or even with activities at home. Down the road, especially if their injury is not managed properly, or if they return to play too early, they may experience issues such as being depressed, not feeling well, or have trouble remembering things for a long time. Once an individual has a concussion, they are also more likely to sustain another concussion.

**How do I know when it's ok for a student-athlete to return to participation after a suspected concussion?** Any student-athlete experiencing signs and symptoms consistent with a concussion should be immediately removed from play or practice and referred to appropriate medical personnel. They should not be returned to play or practice on the same day. To return to play or practice, they will need written clearance from a medical professional trained in concussion management.

**No athlete should be returned to play or practice while experiencing any concussion-related signs or symptoms following rest or activity.**

*This information is provided to you by the UNC Matthew Gfeller Sport-Related TBI Research Center, North Carolina Medical Society, North Carolina Athletic Trainers' Association, Brain Injury Association of North Carolina, North Carolina Neuropsychological Society, and North Carolina High School Athletic Association.*

## Coach/School Nurse/Volunteer Concussion Statement

I have read the *Concussion Information Sheet*. If true, please check box.

I should not allow any student-athlete exhibiting signs and symptoms consistent with concussion to return to play or practice on the same day. If you agree, please check box.

After reading the information sheet, I am aware of the following information:

\_\_\_\_\_ A concussion is a brain injury.  
Initial

\_\_\_\_\_ A concussion can affect a student-athlete's ability to perform everyday activities, their ability to think, their balance, and their classroom performance.  
Initial

\_\_\_\_\_ I realize I cannot see a concussion, but I might notice some of the signs in a student-athlete right away. other signs/symptoms can show-up hours or days after the injury.  
Initial

\_\_\_\_\_ If I suspect a student-athlete has a concussion, I am responsible for removing them from activity and referring them to a medical professional trained in concussion management.  
Initial

\_\_\_\_\_ Student-athletes need written clearance from a medical professional trained in concussion management to return to play or practice after a concussion.  
Initial

\_\_\_\_\_ I will not allow any student-athlete to return to play or practice if I suspect that he/she has received a blow to the head or body that resulted in signs or symptoms consistent with concussion.  
Initial

\_\_\_\_\_ Following concussion the brain needs time to heal. I understand that student-athletes are much more likely to sustain another concussion or more serious brain injury if they return to play or practice before symptoms resolve.  
Initial

\_\_\_\_\_ In rare cases, repeat concussions can cause serious and long-lasting problems.  
Initial

\_\_\_\_\_ I have read the signs/symptoms listed on the Concussion Information Sheet.  
Initial

\_\_\_\_\_  
Signature of Coach/School Nurse/Volunteer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of Coach/School Nurse/Volunteer

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