A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly. In other words, even a "ding" or a bump on the head can be serious. You can't see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your student-athlete reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

Symptoms may include one or more of the following:

- Headaches
- "Don't feel right"
- Pressure in head"
- Fatigue or low energy
- Nausea or vomiting
- Sadness
- Neck pain
- Nervousness or anxiety
- Balance problems or dizziness
- Irritability
- Blurred, double, or fussy vision
- More emotional
- Sensitivity to light or noise
- Confusion
- Feeling sluggish or slowed down
- Concentration or memory problems
- Feeling foggy or groggy (forgetting game plays)
- Drowsiness
- Repeating the same question/comment
- Change in sleep patterns
- Amnesia

Signs observed by teammates, parents or coaches include:

- Appears dazed
- Shows behavior or personality changes
- Vacant facial expression
- Can't recall events prior to hit
- Confused about assignment
- Can't recall events after hit
- Forgets plays
- Seizures or convulsions
- Is unsure of game, score, or opponent
- Any change in typical behavior or personality
- Moves clumsily or displays incoordination
- Loses consciousness
- Answers questions slowly
- Slurred speech
What can happen if my child keeps on playing with a concussion or returns to soon?

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athletes will often under report symptoms of injuries, and concussions are no different. As a result, education of administrators, coaches, parents and students is the key for student athlete’s safety.

If you suspect your child has suffered a concussion

Any athlete even suspected of suffering a concussion will be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. RSU 78 requires the consistent and uniform implementation of well-established return to play concussion guidelines that have been recommended for several years and reflected in

Board policy:

Any student suspected of having sustained a concussion or other head injury during a school-sponsored athletic activity including but not limited to competition, practice or scrimmage, must be removed from the activity immediately.

No student will be permitted to return to the activity or to participate in any other school-sponsored athletic activity on the day of the suspected concussion.

Any student who is suspected of having sustained a concussion or other head injury shall be prohibited from further participation in school-sponsored athletic activities until he/she has been evaluated and received written medical clearance to do so from a licensed health care provider, completed the Graduated Return to Play Protocol, and been given final clearance by the Athletic Director.
Graduated Return to Play Protocol:

When a student athlete is completely symptom free at rest and has the approval of a medical professional, she/he may begin a graduated return to play protocol. There is a minimum of 24 hours between each step.

Step 1: Rest and recovery. Return to school activities

Step 2: Light aerobic exercise: Intensity below 70%; no resistance training.

Step 3: Sport-specific exercise: Running, skating drills, no head impact drills.

Step 4: Non-contact training drills: Progression to more complex training drills, may start resistance training.

Step 5: Full-contact practice: Following physician clearance, participate in normal training

Step 6: Return to play: Normal game play

If at any time post-concussion symptoms occur during the graduated return, there will be at minimum a 24 hour rest period. Once asymptomatic following the rest period, the athlete will drop back to the previous level and the progression will continue.

You should also inform your child's coach if you think that your child may have a concussion. Remember it's better to miss one game than miss the whole season. And when in doubt, the athlete sits out.

For current and up-to-date information on concussions you can go to: http://www.cdc.gov/Concussion

My student athlete and I have read and understand the above CONCUSSION INFORMATION SHEET

Parent Signature: ____________________________ Date: __________

Student Signature: ____________________________ Date: __________