

## Concussion Information for Parents/Family

**Please make an appointment to see a physician trained in the management of concussions within 72 hours and have the attached form filled out.**

### What Happens Next

Please remind your student-athlete to report to the Athletic Training Room the next available school day if you suspect he/she has a concussion. Your student-athlete will follow the necessary steps:

1. Student will be referred to a Medical Doctor (MD/DO) who is trained in the management of concussions after the concussion occurs. **Please have the Medical Doctor (MD/DO) fill out the form below and submit it to the Athletic Trainer/School Nurse and Mrs. Stephanie Huber.** The MD/DO note should explain the process for academic accommodations and physical activity.
2. Student will follow up **daily** with the Athletic Trainers to fill out a symptom sheet.
3. Student will take the post-concussion ImPACT test after sustaining a concussion.
4. Student will be cleared for a full return to play once ImPACT scores are within normal limits, return to play progression has been completed, any and all academic accommodations have been lifted (including PE), are asymptomatic, and clearance from MD has been received.

*(Note: Assistant Dean of Students, Stephanie Huber, will be notified of MD diagnosis and will handle any and all academic accommodations per MD instructions.)*

**RED FLAGS: Go to the Emergency Room immediately if the student appears to be getting worse than when evaluated or experiences any of the following:**

- |                                                         |                                                                  |                                                            |
|---------------------------------------------------------|------------------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Headaches significantly worsen | <input type="checkbox"/> Increased Confusion                     | <input type="checkbox"/> Cannot recognize people/places    |
| <input type="checkbox"/> Repeated vomiting              | <input type="checkbox"/> Seizures/Convulsions                    | <input type="checkbox"/> Unusual behavior                  |
| <input type="checkbox"/> Cannot be awakened             | <input type="checkbox"/> Slurred Speech                          | <input type="checkbox"/> Weakness/numbness                 |
| <input type="checkbox"/> Loss of Consciousness          | <input type="checkbox"/> Trouble using arms/legs or unsteadiness | <input type="checkbox"/> Blood or clear discharge from ear |



## What is a Concussion?

A concussion is an injury to the brain. It is caused by a bump, blow, or jolt to either the head or the body that causes the brain to move rapidly within the skull. The resulting injury to the brain changes how the brain functions in a normal manner. The signs and symptoms of a concussion can show up immediately after the injury or may not appear for hours or days after the injury. Concussions can have serious long-term health effects; even a seemingly mild injury can be serious. A major concern with any concussion is returning to play too soon. Having a second concussion before healing can take place from the initial or previous concussion can lead to serious and potentially fatal health conditions. Therefore, it is especially prudent to monitor concussed athletes for deteriorating conditions.

Each concussion is unique and may cause multiple symptoms. Some symptoms will appear immediately, while others may develop over the following days or weeks. Symptoms may be subtle and are often difficult to recognize fully. The list below is COMMON signs and symptoms that may arise:

- Headache
- Dizziness
- Fatigue
- Balance problems
- Nausea
- Pressure in head
- Sensitive to light and noise
- Mental confusion
- Memory loss
- Ringing in the ears
- Blurry or double vision

The best guideline is to **note symptoms that worsen** and behaviors that seem to represent a change in your son/daughter. If you have any questions or concerns about the symptoms you are observing, contact your family physician for instructions, or seek medical attention at the closest urgent care or emergency department. Otherwise, you can follow the instructions outlined below:

<b><u>It is OK to:</u></b>	<b><u>There is NO need to:</u></b>	<b><u>AVOID:</u></b>
<ul style="list-style-type: none"><li>-Use acetaminophen (Tylenol) for headaches</li><li>- Use ice pack on head &amp; neck for comfort</li><li>- Go to sleep</li><li>- Rest (no strenuous activity or sports)</li><li>- Return to school unless otherwise stated by Medical Doctor (MD)</li></ul>	<ul style="list-style-type: none"><li>- Check eyes with a flashlight</li><li>- Wake up every hour</li><li>- Test reflexes</li><li>- Stay in bed</li></ul>	<ul style="list-style-type: none"><li>- Driving while symptomatic</li><li>- Exercising or lifting weights</li><li>- Using computer or text messaging</li><li>- Watching TV, listening to loud music, or reading for long periods of time</li><li>- Bright lights</li><li>- Taking ibuprofen (Advil), aspirin, naproxen (Aleve), or other NSAIDs for the first 24 hours.</li></ul>



# THE KING'S ACADEMY

## Return to Play Progression

Athletes will not be able to begin the Return to Play Progression (RTP) until directed by a Physician who is trained in the management of concussions. RTP will be monitored by the Athletic Trainer.

<b>Stage 1</b>	No physical activity
<b>Stage 2</b>	Low Levels of physical activity. This includes walking and light stationary biking.
<b>Stage 3</b>	Moderate levels of physical activity with body/head movement. This includes moderate jogging, brief running, moderate-intensity stationary biking, moderate-intensity weightlifting (reduced time and/or reduced weight from typical routine)
<b>Stage 4</b>	Heavy non-contact physical activity. This includes sprinting/running, high-intensity stationary biking, regular weightlifting routine, non-contact sport-specific drills (in 3 planes of movement)
<b>Stage 5</b>	Full contact in controlled practice (Athlete must be at Academic Baseline before return to full play)
<b>Stage 6</b>	Full contact in game play

### NOTE:

**IF AN ATHLETE HAS SYMPTOMS AT ANY TIME DURING RTP PROGRESSION, THE ATHLETE WILL STOP ACTIVITY AND NOT RESUME UNTIL SYMPTOM-FREE. ONCE SYMPTOM-FREE, RTP PROGRESSION WILL START OVER FROM STAGE 2.**

*AB 2112, a California State law effective 1/1/15, states that return to play (i.e., full competition) must be no sooner than 7 days after the concussion diagnosis has been made by a physician trained in the management of concussions and only after completing a graduated return to play protocol.*



# THE KING'S ACADEMY

## Concussion Physician Note to School

Student Name: \_\_\_\_\_ Sport: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**Date of Evaluation:** \_\_\_\_\_

**Date of Injury:** \_\_\_\_\_

### INJURY STATUS

\_\_\_\_ Student has been diagnosed by a MD/DO with a concussion and is currently under our care. Medical follow-up evaluation is scheduled for (date): \_\_\_\_\_

\_\_\_\_ Student was evaluated and did not have a concussion injury. There are no limitations on school and physical activity.

### ACADEMIC ACTIVITY STATUS *(Please mark all that apply)*

\_\_\_\_ This student is not to return to school until further evaluation.

\_\_\_\_ This student may begin to return to school with the following academic accommodations until (date): \_\_\_\_\_.

**Tests** *(Students with a concussion have increased memory and attention problems. Testing can raise symptoms making recovery more difficult)*

- No tests until the date of \_\_\_\_\_
- More time on tests
- Open book/note sheet for tests
- Retake tests, if needed
- Allow testing across multiple sessions
- Other: \_\_\_\_\_

#### **Homework/Assignments**

- Decrease homework/assignment workload by:  50%  75%
- Extra time to complete homework/assignments
- Passive work (e.g., listen with no active involvement)
- Allow student to obtain class notes ahead of time
- Other: \_\_\_\_\_

#### **Attendance**

- Full days as tolerated
- Half days as tolerated
- No school until \_\_\_\_\_, then attempt half days as tolerated and then full days as tolerated.
- Take Breaks in class or in the athletic training room
- Other: \_\_\_\_\_

\_\_\_\_ This student is no longer experiencing any signs or symptoms of concussion and is **cleared** for full academic participation.

**\*\*NOTE\*\* (Per TKA Policy, student is not cleared to play until academic accommodations are lifted)**

### PHYSICAL ACTIVITY STATUS *(Please mark all that apply)*

\_\_\_\_ This student is not to participate in sports-related activity (PE and athletics)

\_\_\_\_ This student is allowed to do light aerobic activity if symptoms do not increase.

\_\_\_\_ This student may begin a graduated return-to-play progression once symptom-free. (see **Reverse Side** as per **The King's Academy RTP Protocol**). Re-evaluation is required after completion of **The King's Academy RTP Protocol**.

\_\_\_\_ This student is **cleared** pending completion of **The King's Academy RTP Protocol**. No further evaluation is necessary after the successful completion of **The King's Academy RTP Protocol**.

\_\_\_\_ This student has medical **clearance** for unrestricted athletic participation (Has completed **The King's Academy RTP Protocol**).

Comments:

**Physician (MD/DO) Signature:** \_\_\_\_\_ **Exam Date:** \_\_\_\_\_

**Physician Stamp and Contact Info:**

**Parent Acknowledgement Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_