Pre-Season Concussion Education Sheet

What is a concussion?

A concussion is a brain injury that can't be seen on x-rays, CT or MRI scans. It affects the way an athlete thinks and can cause a variety of symptoms.

What causes a concussion?

Any blow to the head, face or neck, or somewhere else on the body that causes a sudden jarring of the head may cause a concussion. Examples include getting body-checked in hockey or hitting one's head on the floor in gym class.

When should I suspect a concussion?

A concussion should be suspected if an athlete sustains an impact to the head, face, neck or body and:

- demonstrates one or more observable signs of a suspected concussion, OR
- reports one or more symptoms of suspected concussion.

Some athletes will develop symptoms immediately while others will develop delayed symptoms (up to 48 hours after the injury).

What are the observable signs of a suspected concussion?

Signs of a concussion may include:

- Lying motionless on the playing surface
 Unresponsive
- Slow to get up after a direct or indirect hit to the head
- Disorientation or confusion, or inability to respond appropriately to questions
- Unsteady on feet, balance problems, poor co-ordination, wobbly
- Blank or vacant stare
- Facial injury

What are the symptoms of a suspected concussion?

A person does not need to be knocked out (lose consciousness) to have had a concussion. Common symptoms include:

- Headaches or head pressure
- Dizziness
- Nausea or vomiting
- Blurred or fuzzy vision
- Sensitivity to light or sound
- Balance problems
- Feeling tired or having no energy
- Not thinking clearly
- "Don't feel right"

- Feeling more emotional, easily upset or angered
- Sadness
- Nervousness or anxiety
- Difficulty concentrating
- Difficulty remembering
- Feeling like "in a fog"
- Feeling slowed down
- Sleeping more or sleeping less
- Having a hard time falling asleep

What should I do if I suspect a concussion?

In all cases of suspected concussion, the athlete should be removed from the activity immediately and undergo medical assessment as soon as possible. It is important that all athletes with a concussion receive written medical clearance from a medical doctor or nurse practitioner before returning to sport activities with a risk of contact or falls.

When can the athlete return to school and sport?

It is important that all athletes diagnosed with a concussion follow a step-wise return to school (if applicable) and sports-related activities that includes the following Return-to-School and Return-to-Sport Strategies. Note that these strategies begin at the same time, can happen concurrently and the first step of both is the same. It is important that athletes return to full-time school activities, if applicable, and provide a medical clearance letter before progressing to step 4 of return to sport.

Ste p	Activity	Description	Goal of each step
1	Activities of daily living and	Typical activities at home (e.g. preparing meals,	Gradual
	relative rest (first 24-48	social interactions, light walking). Minimize screen	reintroduction of
	hours)	time.	typical activities
2	School activities with	Homework, reading or other light cognitive	Increase tolerance to
	encouragement to return	activities at school or home. Take breaks and	cognitive work and
	to school	adapt activities as needed. Gradually resume	connect socially with
	(as tolerated)	screen time, as tolerated.	peers
3	Part-time or full days at	Gradually reintroduce schoolwork. Part-time	Increase academic
	school with	school days with access to breaks and other	activities
	accommodations	accommodations may be required. Gradually	
		reduce accommodations related to the concussion	
		and increase workload.	
4	Return to school full-time	Return to full days at school and academic	Return to full
		activities, without accommodations related to the	academic activities
		concussion.	

Return-to-School Strategy

Return-to-Sport Strategy

Step	Activity	Description	Goal of each step
1	Activities of daily living	Typical activities at home (e.g. preparing	Gradual reintroduction of
	and relative rest (first 24-	meals, social interactions, light walking).	typical activities.
	48 hours)	Minimize screen time.	
2	2A: Light effort aerobic	Walking or stationary cycling at slow to	Increase heart rate.
	exercise	medium pace. May begin light resistance	
	2B: Moderate effort	training. Gradually increase intensity of	
	aerobic exercise	aerobic activities, such as stationary	
		cycling and walking at a brisk pace.	
3	Individual sport-specific	Add sport-specific activities (e.g., running,	Increase the intensity of
	activities, without risk of	changing direction, individual drills).	aerobic activities and
	inadvertent head impact	Perform activities individually and under	introduce low-risk sport-

		training and practices).	
5	Return to all non-	Progress to higher-risk activities including	Return to activities that have a
	competitive activities, full-	typical training activities, full-contact sport	risk of falling or body contact,
	contact practice and	practices and physical education class	restore confidence and assess
	physical education	activities. Do not participate in competitive	functional skills by coaching
	activities	gameplay.	staff.
6	Return to sport	Unrestricted sport and physical activity	
How		es adapted from: Patricios, Schneider et al., hlete to recover?	
Most Appr	long will it take for the atl athletes who sustain a co	hlete to recover? oncussion will make a complete recovery ents will experience persisting symptoms	
Most Appr addit	long will it take for the at athletes who sustain a co oximately 15-30% of patie ional medical assessment	hlete to recover? oncussion will make a complete recovery ents will experience persisting symptoms	

Medical clearance

activities (e.g., passing drills, multi-athlete

Exercises with no body contact at high

intensity. More challenging drills and

specific movements.

Resume usual intensity of

exercise, co-ordination and

activity-related cognitive skills.

To learn more about concussions visit: www.parachute.ca/concussion

supervision.

Non-contact training drills

and activities

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concussions.

Signatures (Optional): The following signatures certify that the athlete and their parent or legal guardian has reviewed the above information related to concussion.

Printed name of athlete	Signature of athlete		Date
Printed name of parent/guardian	Signature of parent/guardian	 Date	