SUPPORTING A CHILD/ADOLESCENT WITH CONCUSSION:
Your role as a coach

Helping children and adolescents with their concussion care and returning to play, school, sport and daily life activities requires the support of many. As a coach, you have an important role to play! If you are a coach who has never had a child/adolescent with a concussion, use this information to build your knowledge. For coaches who have had child/adolescent with a concussion, use this information to advocate for the care and support they may need.

About this resource: The information shared in this resource is based on the Living Guideline for Pediatric Concussion Care. Coaches representing different sports reviewed and selected recommendations from this Guideline that they thought coaches should be aware of.

EDUCATION: Know about concussion

- A concussion is a brain injury caused by sudden shaking of the head. Any hit to the head, face, neck or body can cause a concussion. Concussions can happen from a fall, during a motor vehicle collision or sports, or during play at school, camp or in the neighbourhood.
- If the child/adolescent has a significant impact to the head, face, neck, or body and reports any symptoms or shows any of the visual signs of a concussion, you should suspect a concussion.
- ‘Red flag symptoms’ including severe or worsening headache, neck pain or tenderness, double vision, seizures or convulsions, loss of consciousness, increase in confusion, restlessness, agitation, or aggressive behaviours, repeated vomiting, or slurred speech may indicate a more serious injury—call an ambulance as soon as possible. Symptoms may appear right away or up to a couple of days after the injury.

Concussion symptoms: Symptoms describe how someone feels after they are injured. Some symptoms may not appear until the next day. Common concussion symptoms the child/adolescent may experience are:

- Headaches or head pressure
- Blurred or fuzzy vision
- Dizziness
- Sensitivity to light or sound
- Nausea and vomiting
- Balance problems
- Easily upset or angered
- Feeling more emotional
- Nervous or anxious
- Sadness
- Sleeping more or less
- Having a hard time falling asleep
- Feeling slow, tired or having no energy
- Difficulty working on a computer
- Not thinking clearly
- Difficulty reading or remembering

Take action: Know your sport organization’s role in concussion!
Enquire if your sport organization has a concussion policy/protocol and refer to it. Determine if:

- concussion education is provided
- staff are oriented to the policies/protocols
- policies/protocols are reviewed and updated regularly

If your sport organization does not have a concussion policy/protocol, talk to your administration about putting one in place.

Take action: Returning a child/adolescent to sport too soon after a concussion can lead to another injury. This may affect how they recover. If you think the child/adolescent has a concussion:

- sit them out
- contact the parents immediately
- recommend that the child/adolescent be seen by a medical doctor or nurse practitioner as soon as possible
- If there are any red flag symptoms call an ambulance for an emergency medical assessment
CONCUSSION RECOVERY: Understand the steps involved

- Rest for the first 1-2 days after a concussion (but not more) is key!
- After this short rest, even if the child/adolescent is still experiencing concussion symptoms, they should gradually start activities (physical and thinking) that do not:
  - make symptoms worse
  - bring on new symptoms
  - increase the risk of a fall or hit to the head or body that could cause another concussion
  - increase the risk for another concussion (e.g., contact sport, full game play)
- As a coach, you can play an active role in supporting all children/adolescents with a concussion to make a graduated and individualized (step-by-step) return-to-sport. Use the steps below to guide this process.

Return-to-Activity/Sport/Play Steps:

<table>
<thead>
<tr>
<th>Steps*</th>
<th>Activity</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Complete rest (maximum of 1-2 days)</td>
<td>Physical and cognitive activities that do not make the person feel worse. Limit activities that may increase the heart rate.</td>
</tr>
<tr>
<td>2</td>
<td>Light physical activity</td>
<td>Jogging or stationary cycling at slow to medium speed. No weight training. Goal: Increase heart rate.</td>
</tr>
<tr>
<td>3</td>
<td>Sport-specific exercise</td>
<td>Running or skating drills. No drills with risk of head injury</td>
</tr>
<tr>
<td>4</td>
<td>Non-contact activities</td>
<td>Practice without body contact. Gym class activities without risk of head injury</td>
</tr>
<tr>
<td>5</td>
<td>Full-contact activities (Medical clearance from a Doctor is required)</td>
<td>Full activities/sports practices after doing full-time school and getting a medical doctor’s note that states the child/adolescent is cleared to return to full-contact sport or high-risk activity</td>
</tr>
<tr>
<td>6</td>
<td>Return to all activities and sports (Medical clearance from a Doctor is required)</td>
<td>Normal full-contact game play</td>
</tr>
</tbody>
</table>

* The child/adolescent can start these steps 1-2 days after a concussion, even with symptoms. Each step should take about one day. If symptoms get worse, the child/adolescent should go back to the last step. Try it again until the child/adolescent can do it without bringing on new symptoms or making symptoms worse. It is important to receive a note from the medical doctor or nurse practitioner that states the child/adolescent is cleared to return to full-contact sport or high-risk activity. Children and adolescents do not need a medical clearance note from their Doctor to return to school.
**STAY CONNECTED: Communicate with the child/adolescent, family and teachers**

- If the athlete tells you that they have had a concussion, ask if they have been to see a doctor or nurse practitioner for a medical examination.
- Have ongoing conversations about concussion symptoms, medical management and recovery so that you can best support the child/adolescent through the concussion recovery process.
- Ask if the athlete has returned to school.
- If you notice that the child/adolescent is developing new concussion-like symptoms or sustains a new suspected concussion, recommend that the child/adolescent be seen by a medical doctor or nurse practitioner.
- Concussion recovery takes time, so it is important to have patience with the child/adolescent and the family during this process.

**Looking for resources?**

Here are examples of resources that might be helpful and that you can share with your coaching colleagues, athletes, and sport organization:

- [Concussion Recognition Tool 5: To help identify concussion in children, adolescents, and adults](#)
- [Parachute Concussion Guidelines for Parents & Caregivers](#)
- [Concussion Ed – Parachute Concussion Education](#)
- [CATT: Concussion Resources for Parents or Caregivers](#)
- [CATT: Coaching Concussion Resources](#)
- [CATT: Return to Activity Strategy](#)
- [CATT: Return to School Strategy](#)
- [CATT: Return to Sport Strategy](#)

[www.pedsconcussion.com](http://www.pedsconcussion.com)