



## ***Ontario Rep Hockey League***

### ***Concussion Recognition, Management, and Awareness***

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#### **What is a Concussion?**

A concussion is a type of traumatic brain injury, or TBI, that is often described as a "mild" brain injury because concussions are not usually life-threatening. Their effects, however, can be serious, especially if the brain is not given adequate time to heal before returning to sports or activities. Preventing concussion, recognizing symptoms, seeking medical evaluation and following concussion guidelines are all vital for full recovery and the prevention of more serious effects.

Concussions are caused by a fall or blow to the body that causes the head and brain to move rapidly back and forth, causing impact on the brain. Athletes experiencing any of the signs and symptoms below after a blow to the head or body should be kept out of play the day of the injury and until a health care professional skilled in evaluating concussion says they are symptom-free and able to return to play.

#### **Signs and Symptoms:**

##### Observed Signs:

- Appears dazed or stunned
- Confused about assignment or position
- Forgets an instruction
- Is unsure of game, score or appointment
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Exhibits mood, behavior or personality changes
- Can't recall events prior to 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
- Just does not "feel right"



Rest is essential after a concussion to allow the brain adequate time to heal. If a repeat concussion occurs before the brain has recovered, there is an increased risk for a more serious brain injury with long-term effects. It is essential that coaches, parents and athletes are all educated on the importance of following strict concussion guidelines.

### **How to Lower the Risk of a Concussion:**

To lower your risk for head injuries and concussion, apply the same ThinkFirst message in all you do: Use your mind to protect your body! Make safe choices to prevent concussion and traumatic brain injury by:

- Practicing safe techniques and actions on and off the field
- Conditioning well to prepare for athletic activities
- Follow the rules of the game and coach recommendations
- Practice good sportsmanship and don't use unnecessary force
- Always use the recommended protective gear, such as properly fitted helmets, pads, and eye and mouth guards
- Protecting from traumatic brain injury and concussion goes beyond sports and recreation; Think First when it comes to vehicle safety, preventing falls and avoiding violence - all leading causes of brain injury



Designed with the assistance of ThinkFirst. For more information visit <http://www.thinkfirst.org/concussion>

### **What Should I Do When a Concussion is Suspected?**

No matter whether the athlete is a key member of the team or the game is about to end, an athlete with a suspected concussion should be immediately removed from play. To help you know how to respond, follow the Heads Up four-step action plan:

**1. Remove the Athlete from Play:** Look for signs and symptoms of a concussion if your athlete has experienced a bump or blow to the head or body. When in doubt, sit them out!

**2. Ensure that the Athlete is Evaluated 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 or body 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:** Let them know about the possible concussion and give them the heads-up fact sheet for parents. This fact sheet can help parents monitor the athlete for signs or symptoms that appear or get worse once the athlete is at home or returns to school.

**4. Keep the Athlete Out of Play:** An athlete should be removed from play the day of the injury and until an appropriate health care professional says they are symptom-free and it's OK to return to play. After you remove an athlete with a suspected concussion from practice or play, the decision about return to practice or play is a medical decision.



Assistance from the Amateur Athletics Union. For more information visit <http://image.aausports.org/dnn/hockey/2015/AAU-Hockey-Policies.pdf>

### **Guide Lines to Return to Play: 6 Steps**

The return to play is step by step process, it begins once a doctor has given the player clearance to return to physical activity. If symptoms return while the player is rehabbing they must be re-evaluated by a medical physician. The player must not return to play if any symptoms or signs endure. You have to remember, symptoms have the potential to return later that day or into the next day, it may not always occur during exercising.

**STEP 1:** No physical/sporting activity. Complete the Return to Learn protocol before beginning the Return to Play process. Refrain from participating in any sporting and physical activities. Only indulge in activities that do not worsen symptoms. Once symptoms are gone, a physician, preferably one with experience managing concussions, should be consulted before beginning a step wise return to play process.

**STEP 2:** Light aerobic exercise. Activities such as walking or stationary cycling. The player should be supervised by someone who can help monitor for symptoms and signs. No resistance training or weight lifting. The duration and intensity of the aerobic exercise can be gradually increased over time if no symptoms or signs return during the exercise or the next day. Symptoms? Return to rest until symptoms have resolved. If symptoms persist, consult a physician. No symptoms? Proceed to Step 3 the next day.

**STEP 3:** Sport specific activities. Activities such as skating or throwing can begin at step 3. There should be no body contact or other jarring motions such as high-speed stops. Symptoms? Return to rest until symptoms have resolved. If symptoms persist, consult a physician. No symptoms? Proceed to Step 4 the next day.

**STEP 4:** Begin Drills without body contact. Symptoms? Return to rest until symptoms have resolved. If symptoms persist, consult a physician. No symptoms? The time needed to progress from non-contact exercise will vary with the severity of the concussion and with the player. Proceed to Step 5 only after medical clearance.



**STEP 5:** “On Field” practice with body contact, once cleared by a doctor. Symptoms? Return to rest until symptoms have resolved. If symptoms persist, consult a physician. No symptoms? Proceed to Step 6 the next day.

**STEP 6:** Game play.

**Reminder:** Players who have been diagnosed with a concussion should proceed through the return to play steps only when they become symptom and signs free and have been cleared by a physician. Each step must be a minimum of one day. If the players symptoms and signs are to return, the player should return back to step 1, as well they are to be re-evaluated by a physician.



Designed with the assistance of Parachute. For further information visit <http://www.parachutecanada.org/>

For Educational Tips on Concussions Visit:

<http://www.thinkfirst.org/concussion>

<http://image.aausports.org/dnn/hockey/2015/AAU-Hockey-Policies.pdf>

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