

STUDENT-ATHLETES AND CONCUSSION: A Concussion Information Sheet for Parents/Guardians

_____ (student-athlete name) has sustained a concussion on _____ (date), evaluated by _____, Certified Athletic Trainer (ATC). The following members of the school will be notified of the injury: Athletic Director, Head Coach, Academic Counselor, and School Nurse. This will ensure effective communication with academics and athletics about return-to-play status, modifications, and continuing treatment if needed.

Providence Concussion Management Protocol

Initial management of a concussion starts with physical and cognitive rest for at least 48-72 hours post-injury. The student-athlete may continue academic participation, though it is recommended that TV, video games, cell phone use, reading, etc. be limited. If needed, allow the student-athlete to rest in a dark, low-stimulation environment, and monitor signs and symptoms. If symptoms persist with academic participation, the student-athlete should inform his/her school nurse or academic counselor. The ATC will be in contact with school personnel regarding P.E. and weight-lifting class modifications.

The student-athlete may not resume participation in his/her sport(s) until he/she has completed a graded return-to-participation progression with the Certified Athletic Trainer, no longer exhibits signs, symptoms or behaviors consistent with a concussion, and has written clearance from an approved Health Care Provider*, per Max's Law (OAR 581-022-0421). The athlete should check-in with the ATC daily after school to progress through a step-wise Return-to-Sport progression. Once the athlete is ready to progress to non-contact team training, the student-athlete will need to see an approved Health Care Provider. This process will be communicated by the ATC. The Providence complete Return-to-Sport progression takes at minimum 7-10 days. *Note: ATC may remove athlete from play if they deem the athlete unsafe to participate at any time, even after clearance for participation has been given by Health Care Provider*.*

Return-to-Activity Progression

Must be supervised by a Certified Athletic Trainer (ATC)

| Stage | Objective | OSAA Guidelines |
|---|--|---|
| Stage 1: No Activity | Complete physical and cognitive rest for at least 48-72 hours (school OK) | |
| Stage 2: Light aerobic exercise | Increase heart rate (steady state) | 15-20 mins of light cardio: Walking or stationary bike |
| | Gentle stretching | P.E., weight-training, weight-lifting or resistance training not recommended |
| Stage 3: Moderate aerobic (Interval) and resistance activity | Moderate aerobic conditioning with increase in HR, attention and coordination | 20-30 mins of moderate cardio: running, biking, swimming or other cardio activity. If asymptomatic after this step, athlete may return to supervised team weights |
| Athlete takes post-injury IMPACT test prior to advancing activity | | |
| Stage 4: Sport-specific exercise (No team practice) | Light to moderate aerobic conditioning, adding movement with increased attention and coordination | Sprinting, dribbling, basketball or soccer (outside of team); no helmet or equipment, no head impact activities |
| Medical Clearance required for remaining stages (OSAA Form) | | |
| Stage 5: Non-contact team practice | Moderately aggressive aerobic exercise, progressing to training with higher cognition and coordination | More complex drills in full equipment but no contact |
| | All forms of strength-training, agility and plyometrics | Weight-training or resistance activities may begin |
| Stage 6: Full Contact team practice | Restore athlete's confidence and allows assessment of functional skills by coaching staff | Full, unrestricted contact practice at game-level intensity. Soccer: must complete separate 1-day header progression prior to beginning |
| Stage 7: Return to competitive play with no restrictions, normal game play | | |

**Health Care Providers qualified to clear an athlete for return to sport participation: Physician (MD), Doctor of Osteopathic (DO), Physician Assistant (PA), or Nurse Practitioner. To the Health Care Provider visit, the athlete will need to take the OSAA Concussion Medical Release Form, which can be obtained from the school ATC.*

DID YOU KNOW?

A concussion is a type of traumatic brain injury that alters brain function. This injury is the result of rapid translational or rotational movement of the brain within the skull. Signs and symptoms of a concussion usually appear immediately after injury, but in some cases may take hours or days post-injury to develop. The majority of concussions resolve in a short period (7-10 days), though some concussions may take longer.

Common Signs/Symptoms:

Following a concussion, the student-athlete may experience one or more of the following symptoms:

| Physical | Thinking | Emotional | Sleep |
|--|---|---|--|
| <ul style="list-style-type: none"> - Headache - "Pressure in the head" - Neck Pain - Nausea or vomiting - Dizziness - Visual problems - Balance problems - Fatigue or low energy - Sensitivity to noise | <ul style="list-style-type: none"> - Trouble thinking clearly - Not feeling right - Feeling slowed down - Difficulty concentrating - Difficulty remembering - Confusion | <ul style="list-style-type: none"> - More emotional - Irritability - Sadness - Nervousness or anxiety | <ul style="list-style-type: none"> - Drowsiness - Trouble falling asleep - Sleeping more than usual - Sleeping less than usual |



Red Flags for Emergency Department (ED) referral:



You do not need to take the student-athlete to the ED unless instructed by the ATC, the athlete requests to be taken, or any of the following occurs:

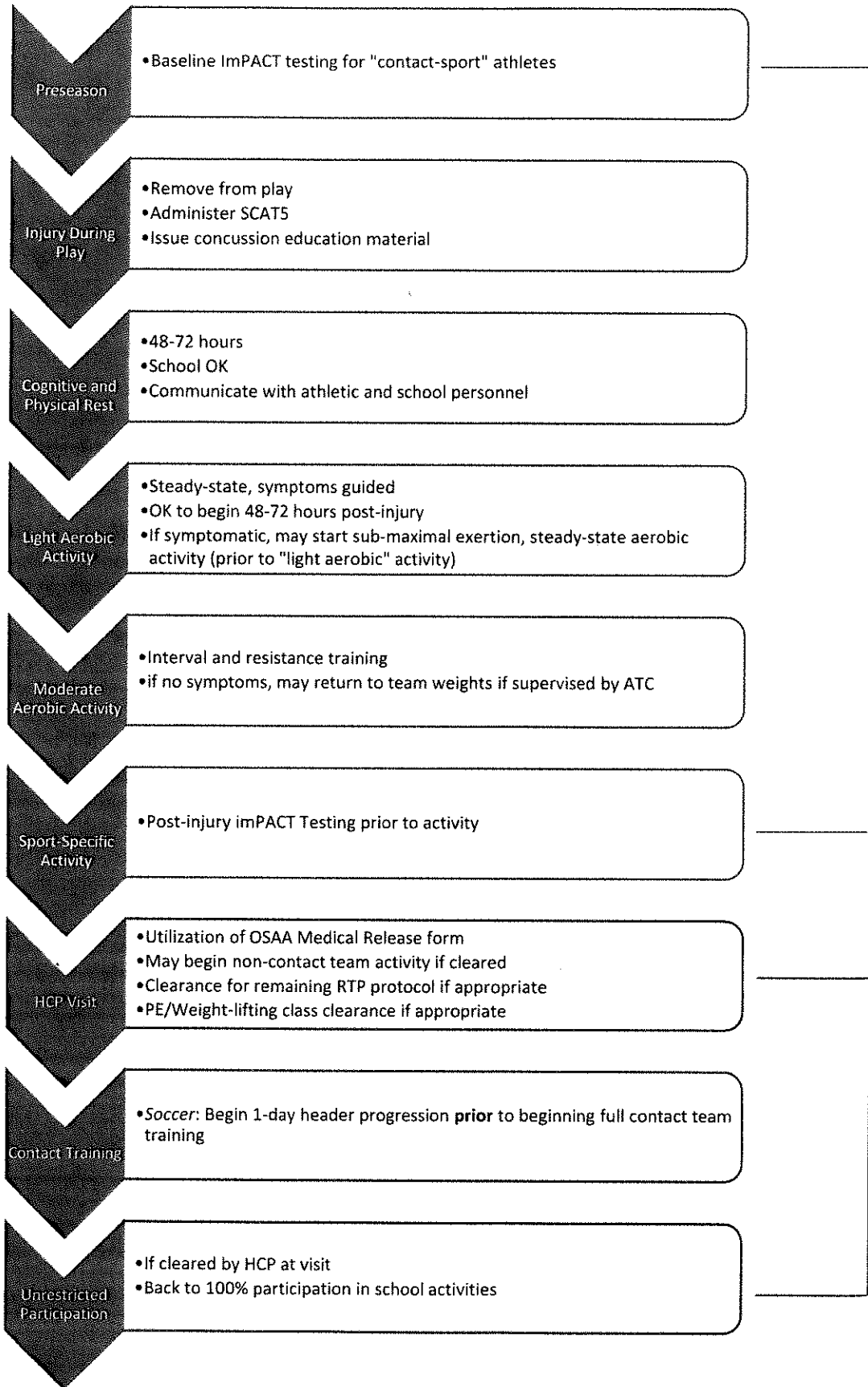
- Loss of consciousness (even a brief loss of consciousness should be taken seriously)
- One pupil (black part in the middle of the eye) larger than the other
- Drowsiness or cannot be awakened
- A headache that gets worse and does not go away
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Difficulty recognizing people or places
- Increasing confusion, restlessness, or agitation
- Unusual behavior

Providence Emergency Departments:

*Providence St. Vincent Medical Center
9205 SW Barnes Rd, Portland, OR 97225*

*Providence Portland Medical Center
4805 NE Glisan St, Portland, OR 97213*

*Providence Milwaukie Hospital
10150 SE 32nd Ave, Milwaukie, OR 97222*



ATC Management

Health Care Professional Management