



ST. DOMINIC MIDDLE/HIGH SCHOOL PARENTAL CONCUSSION INFORMATION SHEET ON F.A.Q'S

1. If a Student/Athlete does suffer a potential concussion, what are the warning signs parents should be on the lookout for post-game?

Warning Signs of a concussion that warrant a visit to your child's pediatrician	Warning Signs of a Concussion that warrant trip to the Emergency Department
Headache	Disorientation or confusion, or an inability to respond appropriately to questions
"Don't Feel right"	Blank or Vacant look
Drowsiness	Balance Problems, gait difficulties, motor incoordination, stumbling, slow labored movements
Nervous or Anxious	Severe or Increasing headache or "Pressure in the Head"
Trouble Falling Asleep (if applicable)	Difficulty concentrating or remembering
Sleeping more or less than normal	Vomiting /Nausea
Fatigue or low energy	Difficulty seeing (Light Sensitivity, blurred vision, double vision)

Behaving more emotional or irritable	Seizures
Sadness	Slurred speech
“Feeling in a fog”	Unable to recognize people or places
Neck Pain	Weakness or numbing in arms or legs, facial drooping
“Feeling slowed Down”	Dilated or pinpoint pupils, or change in pupil size of one eye
	Suspicion of skull fracture: blood draining from ear, or clear fluid from nose
	Noise Sensitivity

- **References:**

- <http://www.p12.nysed.gov/sss/documents/ConcussionManageGuidelines.pdf>
- <https://bjsm.bmj.com/content/bjsports/early/2017/04/26/bjsports-2017-097506SCAT5.full.pdf>
- <https://bjsm.bmj.com/content/bjsports/early/2017/04/26/bjsports-2017-097699.full.pdf>

2. At what point should parents seek medical care for their student/athlete and what is the general rule of thumb for resuming activity?

- If a child is not “acting right” compared to how they normally act, they should be medically seen. Any changes in behavior, physical appearance, neurocognitive responses should warrant a parent to have their child seen medically.
- If a child complains of any of the following: Headache, “pressure in head”, Neck pain, Nausea or Vomiting, Dizziness, Blurred vision, Balance problems, Sensitivity to light

OR noise, Feeling slowed down, Feeling like “in a fog”, “Don’t Feel Right”, Ringing in the ears (tinnitus), Difficulty concentrating OR remembering, Fatigue / Low energy, Confusion, Drowsiness, More emotional, Irritability, Sadness, Nervous /Anxious, Trouble falling asleep are **ANY OR ALL** signs and symptoms that can occur.

- Return to Activity

- Steps to Returning to Activity

- Student/Athlete **MUST** be seen by a Medical Doctor, Physician Assistant, or Nurse Practitioner.

- IF Diagnosed with a Concussion:**

- MD, PA, or NP **MUST** give a written note to student/athlete’s parent to bring to school nursing staff stating that the student/athlete sustained a concussion.
 - Academic Accommodations

Stage	Aim	Activity	Goal of each step
1	Daily activities at home that do not give the child symptoms	Typical activities of the child during the day as long as they do not increase symptoms (e.g., reading, texting, screen time). Start with 5–15 min at a time and gradually build up	Gradual return to typical activities
2	School activities	Homework, reading or other cognitive activities outside of the classroom	Increase tolerance to cognitive work
3	Return to school part-time	Gradual introduction of schoolwork. May need to start with a partial school day or with increased breaks during the day	Increase academic activities
4	Return to school full-time	Gradually progress school activities until a full day can be tolerated	Return to full academic and catch up on missed work

- Once the Student /Athlete is asymptomatic for 24 hours, an appointment should be made with the child’s MD, PA, or NP of **whom diagnosed** the child with a concussion.
- MD, PA, or NP of **whom diagnosed** the child with a concussion may clear the Student/ Athlete and **MUST** give a written note to Student/ Athlete’s parent to bring to school nursing staff stating that the student athlete is cleared from his/her concussion.
 - If the child has academic accommodations they should be resolved **PRIOR** to beginning the Return to Play Protocol (RTP).

2. IF NOT Diagnosed with a Concussion

- MD, PA, or NP **MUST** give a written note to student/ athlete’s parent to bring to school nursing staff stating the child **did not** sustain a concussion **or** is cleared from a concussion.
 - The decision to put a student /athlete through a Return to Play Protocol is made by the Chief Medical Officer of the school, after consultation with the Concussion Management Team.

2. Once diagnosed with a concussion and the written document is obtained by the school district, the student/ athlete **MUST** then complete a Return-To-Play protocol (RTP).

A. The RTP is a multi-stage/day protocol, which takes time. Each stage requires increasing stress on the brain and body in a controlled environment. ***Each stage must be completed 24 hours apart.***

1. Stage 1: Being Asymptomatic for 24 hours and cleared by student athletes private physician
2. Stage 2: Light Aerobic Activity
3. Stage 3: Sport Specific Exercise
4. Stage 4: Non-Contact Practice
5. Stage 5: Full Contact Practice (School Chief Medical Officer signs off prior to Student Athlete returning competition)
6. Stage 6: Competition

Table 3- Graduated return to sport strategy ⁵

Stage	Aim	Activity	Goal of each step
1	Symptom-limited activity	Daily activities that do not provoke symptoms	Gradual reintroduction of work/school activities
2	Light aerobic exercise	Walking or stationary cycling at slow to medium pace. No resistance training	Increase heart rate
3	Sport-specific exercise	Running or skating drills. No head impact activities	Add movement
4	Non-contact training drills	Harder training drills, e.g., passing drills. May start progressive resistance training	Exercise, coordination and increased thinking
5	Full contact practice	Following medical clearance, participate in normal training activities	Restore confidence and assess functional skills by coaching staff
6		Return to sport	Normal game play

- References:

1. <http://www.p12.nysed.gov/sss/documents/ConcussionManageGuidelines.pdf>
2. https://www.nata.org/sites/default/files/Concussion_Management_Position_Statement.pdf
3. <https://bjsm.bmi.com/content/bjsports/early/2017/04/26/bjsports-2017-097699.full.pdf>



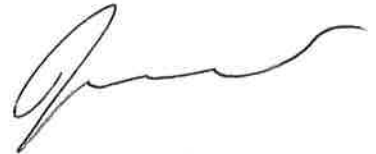
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