



Concussion Letter to Parents

What is a concussion?

A concussion is caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. Concussions can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly. You can't see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of a concussion yourself, seek medical attention right away.

Signs and Symptoms of Concussions

<ul style="list-style-type: none">• Headache or pressure in head• Dizziness• Nausea or vomiting• Blurred/double vision• Sensitivity to light• Difficulty concentrating• Drowsiness	<ul style="list-style-type: none">• Difficulty remembering/loss of memory• Spots before eyes• Confusion or Amnesia• Ringing in the ears• Feeling foggy or "just don't feel right"• Balance problems• Nervousness, Anxiety, or Irritability
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Coach or Parent May Observe

<ul style="list-style-type: none">• Loss of consciousness• Sleepiness, grogginess• Balance problems• Slowness in responding• Confusion or poor recall of events• Seizures or convulsions	<ul style="list-style-type: none">• Slurred speech• Answers questions slowly• "Out of it" behavior• Appears dazed• Any change from typical behavior or personality• Clumsy or appears uncoordinated
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Recognition and Management

If an athlete exhibits any signs, symptoms, or behaviors that make the coach suspicious that he or she may have had a concussion, that athlete must be removed from all physical activity. The coach will contact the parent/guardian of any athlete who exhibits signs consistent with a concussion. Athletes must know that they should never try to “tough out” a suspected concussion. Teammates, parents and coaches should never encourage an athlete to “play through” the symptoms of a concussion. If an athlete returns to activity before being fully healed from an initial concussion, the athlete is at greater risk for a repeat concussion. A repeat concussion that occurs before the brain has a chance to recover from the first can slow recovery or increase the chance for long-term problems. In rare cases, a repeat concussion can result in severe swelling and bleeding in the brain that can be fatal.

- No athlete should return to play (RTP) or practice on the same day of a concussion.
- Any athlete suspected of having a concussion should be evaluated by an appropriate health-care professional that day
- Any athlete with a concussion should be medically cleared by an appropriate health-care professional prior to resuming participation in any practice or competition.
- After medical clearance, RTP should follow a stepwise protocol with provisions for delayed RTP based upon return of any signs or symptoms.

IHSA Policy requires athletes to provide their school with written clearance from a physician prior to returning to play or practice following a concussion, or after being removed from an interscholastic contest due to a possible head injury or concussion and not cleared to return to that same contest.

Return to Play

After suffering a concussion, no athlete should return to play or practice on that same day. In the past, athletes were allowed to return to play if their symptoms resolved within 15 minutes of the injury. Studies have shown us that the young brain does not recover quickly enough for an athlete to return to activity in such a short time. Once

an athlete no longer has signs, symptoms, or behaviors of a concussion and is cleared to return to activity by an appropriate health care professional, he or she should proceed in a stepwise fashion to allow the brain to re-adjust to exercise. In most cases, the athlete will progress one step each day. The return to activity program schedule may proceed as below, following medical clearance:

Progressive Physical Activity Program

Step 1: Light aerobic exercise- 5 to 10 minutes on an exercise bike or light jog; no weight lifting, resistance training, or any other exercises.

Step 2: Moderate aerobic exercise- 15 to 20 minutes of running at moderate intensity in the gym or on the field without a helmet or other equipment.

Step 3: Non-contact training drills in full uniform. May begin weight lifting, resistance training and other exercises.

Step 4: Full contact practice or training.

Step 5: Full game play.

Additional Resources for Parents and students

If you would like to review additional educational materials related to concussions, please check out these websites:

<http://www.ihsa.org/>

<http://www.cdc.gov/ConcussioninYouthSports>



Acknowledgement and Consent

Student/Parent Acknowledgement and Consent

By signing this form, we acknowledge we have been provided information regarding concussions, agree to participate in sports, and will abide by the decisions made by the coaching staff and medical professional.

Student

Student Name (Print): _____ Grade _____

Student Signature: _____ Date _____

Parent or Legal Guardian

Name (Print): _____

Signature: _____ Date _____

Relationship to student: _____

West Harvey Dixmoor School District concussion protocol has been written and implemented to promote compliance with: IHSA Return to Play Policy, IHSA Protocol for Implementation of NFHS Sports Playing Rule for Concussions, and Illinois HB 0200.

Please return this form to the coach prior to playing sporting activities.

Concussion Parental Notification Form

Dear Parent/Guardian,

Date: ____/____/____

Today, your child, _____, received a possible head injury during practice, competition, or play. The purpose of this letter is to alert you to the possibility that such an injury occurred, of symptoms/signs observed by the Athletic Trainer or other staff, and of the signs and symptoms of such an injury that may arise and that may require further evaluation and/or treatment. Often, the signs and symptoms of a head injury may not appear immediately after the injury but may arise several hours after. If you are unclear or have questions about any of the symptoms described herein, please contact a medical doctor for a medical opinion.

Symptoms/Signs observed

The signs and symptoms indicated below when the Athletic Trainer evaluated your child:

- | | | |
|---|---|---|
| <input type="checkbox"/> Headache | <input type="checkbox"/> Blurred vision | <input type="checkbox"/> Difficulty concentrating |
| <input type="checkbox"/> Ringing in the ears | <input type="checkbox"/> Fatigue | <input type="checkbox"/> Temporary loss of memory |
| <input type="checkbox"/> Nausea and/or vomiting | <input type="checkbox"/> Spots before eyes | <input type="checkbox"/> Any abnormal behavior |
| <input type="checkbox"/> Sensitivity to light | <input type="checkbox"/> Slurred speech | <input type="checkbox"/> Balance problems/dizziness |
| <input type="checkbox"/> Double vision | <input type="checkbox"/> Sleepiness and/or grogginess | <input type="checkbox"/> Loss of consciousness |
| <input type="checkbox"/> Feeling in a "FOG" | | |

Symptoms/Signs that may arise

If your child exhibits the following symptoms/signs, or you notice other behavior or conduct of your student that is out of the ordinary, you should seek immediate medical attention. Please note that this list is not all-inclusive. You must use your judgment to determine if medical attention is necessary:

- | | | |
|------------------------------|---------------------------------------|------------------------------|
| • Memory difficulties | • Headaches that worsen | • Seizures |
| • Neck pain | • Odd behavior | • Irritability |
| • Irregular sleep | • Repeats the same answer or question | • Fatigued |
| • Slow reactions | • Vomiting | • Focus issues |
| • Slurred speech | • Weakness/numbness in arms/legs | • Less responsive than usual |
| • Delicate to light or noise | | |

Further precautions to consider

Please take all necessary precautions and seek a professional medical opinion before allowing your child to engage in physical activities. Until a professional medical opinion is obtained, consider the following guidelines. These are only guidelines and suggestions and are not a replacement for a medical opinion:

It is OK to:	There is NO need to:	Do NOT:
<ul style="list-style-type: none"> • Use ice pack on head/neck as needed for comfort • Eat a light diet • Return to school • Go to sleep • REST (no activity or sports) 	<ul style="list-style-type: none"> • Check eyes with flashlight • Wake up every hour • Test reflexes • Stay in bed 	<ul style="list-style-type: none"> • Drink alcohol • Engage in exercise • Consume medications unless told to do so by a physician

Return to Play/Return to Learn

Your child will not be allowed to return to play (practice, competition, or play) in any interscholastic or intramural athletics or sports or participate in the physical activity portion of any physical education course in which the student is enrolled until the student has completed all requirements of Board policy and the District's return-to-play and return-to-learn protocols. This includes evaluation by a physician or athletic trainer of your choice, who must sign off on your student's ability to return to play and return to learn. **You should provide a copy of this letter and any other documentation you receive from the District regarding the incident to the physician or athletic trainer conducting the evaluation for return-to-play/return-to-learn.** Copies of the Board policy, return-to-play protocol, and return-to-learn protocol are included with this letter.

If you have any questions, please contact me. Sincerely,

_____, ATC

Phone Number: _____