



CONCUSSION CHECKLIST

- ❖ All players who suffer a concussion should be evaluated by a physician as soon as possible. Concussions are serious.
- ❖ You don't have to be knocked out to have a concussion. In fact, more than 85% of concussions do not involve loss of consciousness.
- ❖ Concussions can result from blows to the head, face, and jaw or transmitted from hits elsewhere on the body, such as the chest, that cause whiplash type movements of the head and neck.

Signs and Symptoms

SIGNS	SYMPTOMS
✓ Vacant facial expression	✓ Nausea
✓ Player forgets plays	✓ Visual changes
✓ Inappropriate emotions	✓ Sensitivity to noise
✓ Lack of coordination or clumsiness	✓ Feeling mentally "foggy"
✓ Behaviour or personality change	✓ Memory problem
✓ Player appears dazed	✓ Headache
✓ Confusion about assignments	✓ Balance problems
✓ Disorientation	✓ Sensitivity to light
✓ Slow in answering questions	✓ Feeling slowed down
✓ Loss of consciousness (even brief)	✓ Concentration problems

- ❖ Signs and symptoms may have delayed onset so that the athlete should be monitored even after the immediate signs and symptoms have resolved.

CONCUSSION

- ❖ Remove the player from the practice or the game
- ❖ Do not allow the player to return to that practice or game
- ❖ Do not give any medication
- ❖ Do not leave alone – monitor for signs and symptoms
- ❖ Inform parents, guardian, billet and coach about the injury
- ❖ Have the player evaluated by a medical doctor before returning to play

IMPORTANT!

- ❖ Call an ambulance if there is any loss of consciousness; assume possible neck injury and do not attempt to move.



RETURN TO PLAY

Return to play is a graduated process and begins after the athlete is symptom-free and cleared by a medical doctor. If any symptoms occur during this process, the athlete should stop the activity and contact their physician before resuming exercise. Never play or practice while having symptoms.

IT'S BETTER TO MISS A SINGLE GAME THAN TO MISS THE WHOLE SEASON

Each step is generally completed on a different day. If symptoms return, the athlete should discontinue the activity, contact their physician and resume their last successful step once cleared to resume activity.

Step 1: No physically stressful activity.

Step 2: Light aerobic activities, such as walking or stationary cycling. No weight lifting.

Step 3: Sport-specific training (running in soccer, skating in hockey).

Step 4: Non-contact drills; resistance training.

Step 5: Full contact practice.

Step 6: Competitive game-play.

WHEN IN DOUBT, SIT THEM OUT!

CONCUSSION REDUCTION-PREVENTION

Players	Coaches and Referees
<ul style="list-style-type: none">❖ Wear a properly fitted helmet with chin strap fastened securely❖ Respect other players❖ No hits from behind❖ No hits to the head	<ul style="list-style-type: none">❖ Put an end to hits to the head❖ Put an end to hits from behind❖ Reinforce mutual respect and sportsmanship❖ Recognize the signs and symptoms of concussions❖ Educate parents and athletes about the risks of concussions

This information is not intended to be exhaustive or to replace the need for appropriate medical evaluation, care and supervision. It is based on numerous published documents that have the support of various high schools, college, national and international organizations. If you need more information or have specific questions, consider websites such as www.sportconcussions.com & www.thinkfirst.ca, or contact your primary care physician.