



## Pre-Season Concussion Education Sheet

### **WHAT IS A CONCUSSION?**

A concussion is a brain injury that can't be seen on x-rays, CT or MRI scans. It affects the way an athlete thinks and can cause a variety of symptoms.

### **WHAT CAUSES A CONCUSSION?**

Any blow to the head, face or neck, or somewhere else on the body that causes a sudden jarring of the head may cause a concussion. Examples include getting body-checked in hockey or hitting one's head on the floor in gym class.

### **WHEN SHOULD I SUSPECT A CONCUSSION?**

A concussion should be suspected in any athlete who sustains a significant impact to the head, face, neck, or body and reports *ANY* symptoms or demonstrates *ANY* visual signs of a concussion. A concussion should also be suspected if an athlete reports *ANY* concussion symptoms to one of their peers, parents, teachers, or coaches or if anyone witnesses an athlete exhibiting *ANY* of the visual signs of concussion. Some athletes will develop symptoms immediately while others will develop delayed symptoms (beginning 24-48 hours after the injury).

### **WHAT ARE THE SYMPTOMS OF A CONCUSSION?**

A person does not need to be knocked out (lose consciousness) to have had a concussion. Common symptoms include:

- ▶ Headaches or head pressure
- ▶ Dizziness
- ▶ Nausea and vomiting
- ▶ Blurred or fuzzy vision
- ▶ Sensitivity to light or sound
- ▶ Balance problems
- ▶ Feeling tired or having no energy
- ▶ Not thinking clearly
- ▶ Feeling slowed down
- ▶ Easily upset or angered
- ▶ Sadness
- ▶ Nervousness or anxiety
- ▶ Feeling more emotional
- ▶ Sleeping more or sleeping less
- ▶ Having a hard time falling asleep
- ▶ Difficulty working on a computer
- ▶ Difficulty reading
- ▶ Difficulty learning new information

### **WHAT ARE THE VISUAL SIGNS OF A CONCUSSION?**

Visual signs of a concussion may include:

- ▶ Lying motionless on the playing surface
- ▶ Slow to get up after a direct or indirect hit to the head
- ▶ Disorientation or confusion or inability to respond appropriately to questions
- ▶ Blank or vacant stare
- ▶ Balance, gait difficulties, motor incoordination, stumbling, slow labored movements
- ▶ Facial injury after head trauma
- ▶ Clutching head

### **WHAT SHOULD I DO IF I SUSPECT A CONCUSSION?**

If any athlete is suspected of sustaining a concussion during sports they should be immediately removed from play. Any athlete who is suspected of having sustained a concussion during sports must not be allowed to return to the same game or practice.



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**It is important that ALL athletes with a suspected concussion undergo medical assessment by a medical doctor or nurse practitioner, as soon as possible. It is also important that ALL athletes with a suspected concussion receive written medical clearance from a medical doctor or nurse practitioner before returning to sport activities. Athletes, parents and club sensei need to work collaboratively to ensure a safe Return-To-Sport for the affected athlete.**

### **WHEN CAN THE ATHLETE RETURN TO SCHOOL AND SPORTS?**

It is important that all athletes diagnosed with a concussion follow a stepwise return to school and sports related activities that includes the following Return-to-School and Return-to-Sport Strategies. It is important that youth and adult student-athletes return to full-time school activities before progressing to stage 5 and 6 of the Return-to-Sport Strategy.

#### **Return-to-School Strategy<sup>1</sup>**

Stage	Aim	Activity	Goal of each step
1.	Daily activities at home that do not give the student-athlete symptoms	Typical activities during the day as long as they do not increase symptoms (i.e. reading, texting, screen time). Start at 5-15 minutes 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.	Return to full academic activities and catch up on missed schoolwork.

#### **Sport-Specific Return-to-Sport Strategy<sup>1</sup>**

Stage	Aim	Activity	Goal of each step
1.	Symptom-limiting activity	Daily activities that do not provoke symptoms.	Gradual re-introduction of work/school activities.
2.	Light aerobic activity	Light jog or stationary cycling at slow to medium pace. No resistance training. <ul style="list-style-type: none"> <li>• <i>Light intensity jogging or stationary cycling for 15-20 minutes at sub-symptom threshold intensity</i></li> </ul>	Increase heart rate.

<sup>1</sup> Source: McCrory et al. (2017). Consensus statement on concussion in sport – the 5<sup>th</sup> international conference on concussion in sport held in Berlin, October 2016. *British Journal of Sports Medicine*, 51(11), 838-847.



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Stage	Aim	Activity	Goal of each step
3.	Sport--specific exercise	<p><i>Low intensity sport-specific exercises. No head impact activities.</i></p> <ul style="list-style-type: none"> <li>• <i>Moderate intensity jogging for 30-60 minutes at sub-symptom threshold intensity</i></li> <li>• <i>Low to moderate Uchi-Komi, technical Ne-waza, and agility drills</i></li> <li>• <i>NO lifting, throwing or Sankaku/other chokes as Uke</i></li> </ul>	Add movement.
4.	Non-contact training drills	<p>Higher intensity sport-specific exercises with no contact Harder training drills with moderate resistance May start progressive resistance training</p> <ul style="list-style-type: none"> <li>• <i>Participation in high intensity running and drills</i></li> <li>• <i>Increase difficulty of technical training, adding lifting, throwing (as Tori ONLY), and Kumikata sequences</i></li> <li>• <i>Participation in resistance training workouts without maximum efforts, jumping or Valsalva maneuver</i></li> </ul>	Exercise, coordination and increased thinking.
5.	Full contact practice	<p>Following medical clearance Part A)</p> <ul style="list-style-type: none"> <li>• <i>Training with controlled contact</i></li> <li>• <i>Eliminating situations of hard impact</i></li> <li>• <i>Progressive intensity Ne-waza and Tachi-waza randori</i></li> </ul> <p>Part B)</p> <ul style="list-style-type: none"> <li>• <i>Participation in full practice without activity restriction</i></li> </ul>	Restore confidence and assess functional skills by coaching staff.
6.	Return to sport	Normal training & return to competition	

### **HOW LONG WILL IT TAKE FOR THE ATHLETE TO RECOVER?**

Most athletes who sustain a concussion will make a complete recovery within 1-2 weeks while most youth athletes will recover within 1-4 weeks. Approximately 15-30% of patients will experience persistent symptoms (>2 weeks for adults; >4 weeks for youth) that may require additional medical assessment and management.

### **HOW CAN I HELP PREVENT CONCUSSIONS AND THEIR CONSEQUENCES?**

Concussion prevention, recognition and management require athletes to follow the rules and regulations of their sport, respect their opponents, avoid head contact, and report suspected concussions.

### **TO LEARN MORE ABOUT CONCUSSIONS PLEASE VISIT:**

Parachute Canada: [www.parachutecanada.org/concussion](http://www.parachutecanada.org/concussion)



## Pre-Season Concussion Education Sheet

**SIGNATURES:** The following signatures certify that the athlete and his/her parent or legal guardian have reviewed the above information related to concussion.

\_\_\_\_\_  
Printed name of athlete

\_\_\_\_\_  
Signature of athlete

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of parent

\_\_\_\_\_  
Signature of parent

\_\_\_\_\_  
Date