

PART B - CONCUSSIONS FACT SHEET FOR ATHLETES AND PARENTS

WHAT IS A CONCUSSION?

Concussions are brain injuries caused by excessive, rapid movement of the brain inside the skull. This movement causes damage that changes how brain cells function, leading to symptoms that can be physical (headaches, dizziness), cognitive (problems remembering or concentrating), or emotional (feeling depressed). A concussion can result from a blow to the head or body in any number of activities including receiving a check in hockey, being in a motor vehicle collision or slipping on an icy sidewalk. It is important for the safety of the individual who is experiencing any signs / symptoms of concussion to be removed from all activity, seek medical attention and inform the school / coach of their condition.

SIGNS AND SYMPTOMS OF A CONCUSSION YOUR CHILD MAY EXPERIENCE

Observed by the Athlete

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Bothered by light
- Bothered by noise
- Feeling sluggish, hazy, foggy, or groggy
- Difficulty paying attention
- Memory problems
- Confusion
- Does not "feel right"

Observed by the Parent / Guardian, Coach or Teammate

- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows behaviour or personality changes
- Can't recall events after hit or fall
- Appears dazed or stunned

WHAT TO DO IF SIGNS / SYMPTOMS OF A CONCUSSION ARE PRESENT

Athlete

- TELL YOUR COACH IMMEDIATELY
- Inform parents
- Seek medical attention
- Give your self time to recover

Parent / Guardian

- Seek medical attention
- Keep your child out of play
- Follow return to play guidelines
- Address academic needs

WHERE CAN I FIND MORE INFORMATION?

- ThinkFirst Canada website: www.thinkfirst.ca
- Ontario Physical and Health Education Association Safety Guidelines: <http://safety.ophea.net>

RETURN TO PLAY

- Do not attempt to return to play until receiving medical clearance
- Request a "Return to Play Form" from school
- Follow the return to play protocol and carefully monitor the health of the athlete

ACKNOWLEDGEMENT

By signing below, I acknowledge that I have reviewed this Concussion Fact Sheet for Athletes and Parents. I also acknowledge and understand the risk of brain injuries associated with participation in school athletics activities. I understand it is essential for the safety of the student that any injury incurred in school or community activities that results in the student experiencing signs or symptoms of a concussion must be reported to the school or coach as soon as possible.

Athlete Signature

Print Name

Date

Parent / Guardian Signature

Print Name

Date