

CONCUSSION MANAGEMENT

CONCUSSION FACTS

The **biggest** risk is going back to play before the brain heals and getting another concussion!

RETURN TO ACTIVITY GUIDELINES FOR CHILDREN AND YOUTH

**A concussion is a
brain injury and
must be taken
seriously!**



Higher risk of
prolonged recovery with:

- Multiple concussions
- History of learning or behaviour problems
- History of migraines
- Symptoms of amnesia, fogginess, or dizziness

Percentage of children who are
symptom free in:

15 days = 25%
26 days = 50%
45 days = 75%
92 days = 90%

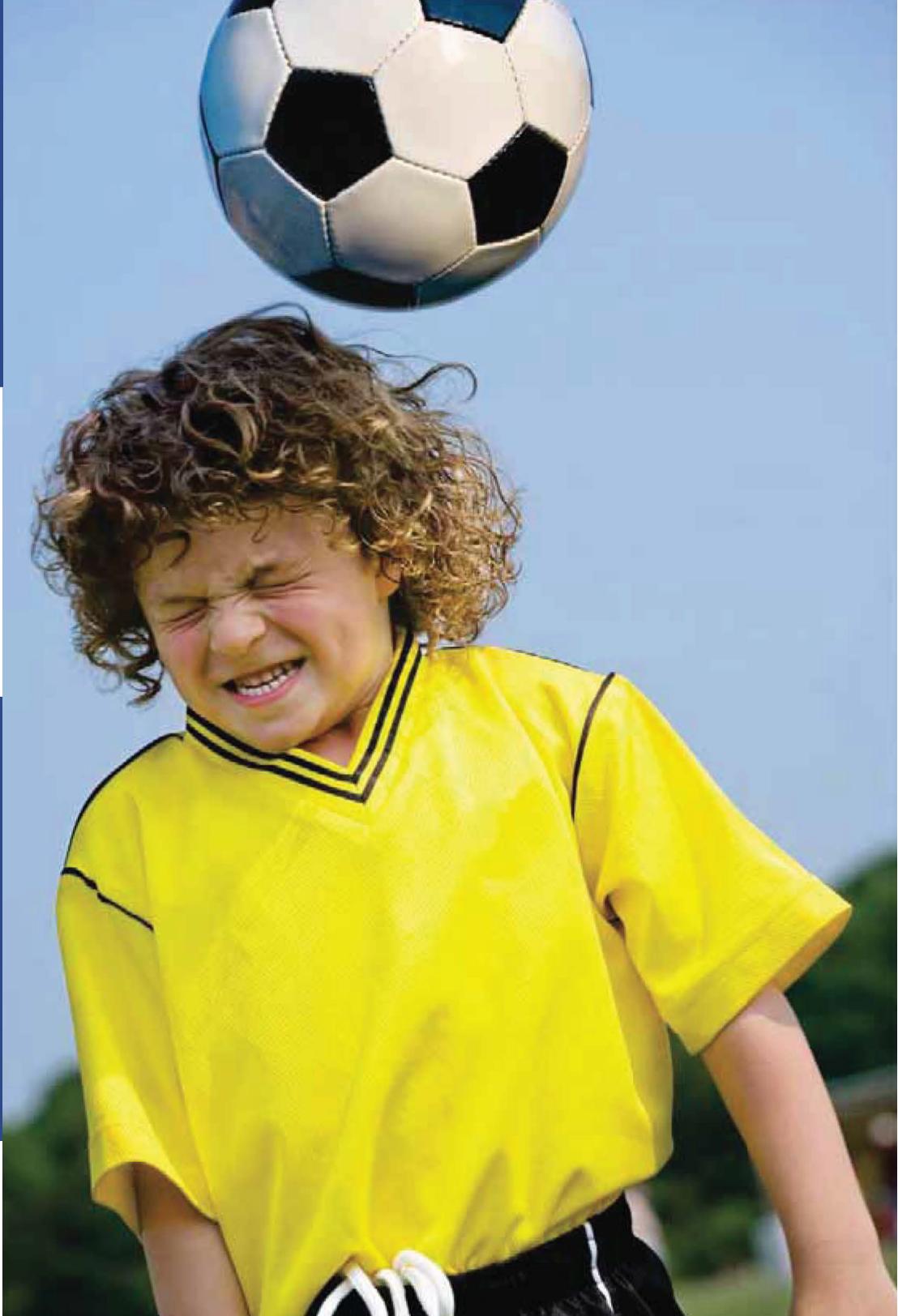
WHEN IN DOUBT SIT THEM OUT



WHEN THEY'RE OKAY RETURN TO PLAY



For more information, please visit
www.canchild.ca



RETURN TO ACTIVITY GUIDELINES

STEPS 1-4 of the "Return to Activity" and "Return to School" guidelines should progress together, however youth should return to full-time school activities before returning to STEP 5 and STEP 6 of the RTA Guidelines.

STEP 1: PHYSICAL AND COGNITIVE REST

- **NO** excessive physical activity that increases symptoms
- complete daily routines as tolerated, without increase of symptoms
- Which symptom group are you in? **BLUE**, **PURPLE**, or **GREEN**?

STEP 2: LIGHT EXERCISE

- **NO** resistance training or weight lifting
- **10-15 minutes** light exercise as tolerated, maximum twice a day
e.g. / walking, stationary cycling, light jogging, freestyle swimming

**Get clearance from a physician or brain injury clinician before beginning STEP 3*

STEP 3: INDIVIDUAL SPORT-SPECIFIC ACTIVITY

- **NO** body/head contact, spins, dives, jumps, high speed stops, hitting a baseball with a bat, or other jarring motions
- **20-30 minutes** general conditioning as tolerated, maximum twice a day
e.g. / skating, running, throwing

STEP 4: SPORT-SPECIFIC PRACTICE WITH TEAM, NO CONTACT

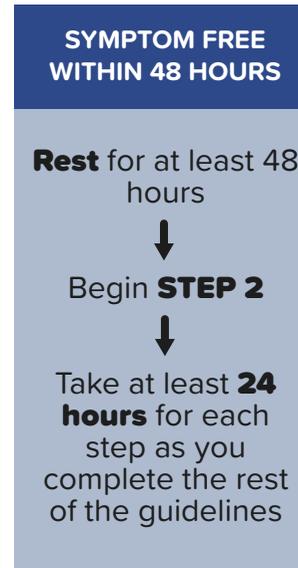
- **NO** checking, heading the ball, tackling, live scrimmages
- Begin activities as tolerated with one other teammate and then by the end of this step progress to full team practice, with **NO** contact.
e.g. / ball drills shooting/passing drills, or other non-contact activities
- Begin resistance training and 'beginner level' sport-specific skills. Increase skill level over time.

**Get clearance from a physician or brain injury clinician before beginning STEPS 5 and 6*

STEP 5: SPORT-SPECIFIC PRACTICE WITH TEAM AND CONTACT

- Participate in normal training activities as tolerated. If symptom free, you are ready to return to competition!

STEP 6: RETURN TO ACTIVITY, SPORT OR GAME PLAY



If symptoms increase or return at any STEP, reduce activity by returning to the previous STEP until symptom free for 24 hours.

RECOMMENDATIONS FOR RETURN TO CONTACT SPORT AFTER MULTIPLE CONCUSSIONS

- If possible neuroimaging findings --> Take at least 3 months off from contact sport
- If 2 concussions in 3 months --> Take 6 months off from the time of most recent injury
- If 3 or more concussions in 1 year --> Take 1 year off from the time of the most recent injury
- Discuss retirement from sport after 3 or more concussions, especially if symptoms are prolonged and affecting performance

But continue to exercise!

ALSO SEE MCMASTER RETURN TO SCHOOL GUIDELINES

CONCUSSION

A concussion, also known as a mild traumatic brain injury (mTBI), changes the way the brain functions. An mTBI can be caused by a direct or indirect hit, blow, or force to the head or body.

SYMPTOMS OF CONCUSSION

- Sleep disturbances or drowsiness
- Headache
- Nausea and vomiting
- Poor balance or coordination
- Dizziness
- Visual problems
- Sensitivity to light or noise
- Mentally foggy
- Difficulty concentrating/ remembering
- Irritability
- Sadness
- Nervousness

Symptoms should be evaluated daily to show healing and recovery

RED FLAG SYMPTOMS

If any of the following symptoms develop, go to the emergency department/ seek further investigation immediately:

- Increased drowsiness or cannot be awakened
- Headaches worsen or neck pain
- Persistent vomiting
- Pupils are unequal in size
- Seizures
- Confusion or short-term memory loss
- Blurred/double vision, slurred speech, or loss of motor function
- Change in behaviour (irritability, agitation, or aggression)