



CONCUSSION MANAGEMENT

DEFINITION OF CONCUSSION

Temporary change in mental state as a result of trauma (may be blow to head, face or jaw; may result from whiplash effect to neck)
NOT NECESSARILY WITH LOSS OF CONSCIOUSNESS

C-SPINE PRECAUTIONS
AIRWAY, BREATHING, CIRCULATION
ASSESS LEVEL OF CONSCIOUSNESS



MANAGEMENT OF ATHLETE WITH CONCUSSION

When an athlete shows any signs or symptoms of concussion:

1. No return to current game or practice the day of injury
2. Medical evaluation necessary including full SCAT3 assessment on the sidelines or medical facility
3. No aspirin or anti-inflammatory for pain; acetaminophen ok
4. No alcohol or sleeping pills\
5. Do not leave alone - regular monitoring for deterioration is essential in first few hours.
6. To Emergency Department if worsening symptoms or if new symptoms develop
7. Return-to-play must follow a medically supervised, stepwise process (No training until medically cleared)

RETURN-TO-PLAY

Proceed to next step only when asymptomatic for 24 hours; if symptoms recur, return to step 1 and seek re-evaluation by physician

Step 1: No activity; complete physical and mental rest (no videogames; no texting)

Step 2: Light exercise (walking; stationary bike)

Step 3: Sport-specific activity (e.g. skating)

Step 4: "On-field" practice without body contact / light resistance training

Step 5: "On-field" practice with body contact (once cleared by medical doctor)

Step 6: Game play

"When in doubt, sit them out!"



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CONCUSSION SCREENING

1. SIGNS AND SYMPTOMS OF CONCUSSION:

Headache / pressure in head	Poor balance
Dizziness	Poor concentration / easily distracted
Neck pain	
Feeling dazed / "in a fog"	Slow or slurred speech
Feeling "dinged" or stunned / "bell rung"	Slow responses to questions Slow to follow instructions
Feeling "slowed down"	Vacant stare / glassy eyed
Sleepiness	Decreased playing ability
Seeing stars	Unusual / inappropriate emotions
Double or blurred vision	Personality changes / irritability
Sensitivity to light or noise	Inappropriate behaviour (skate/run wrong direction)
Ring in ears	
Nausea / vomiting	Loss of consciousness
Confusion	Memory deficits / amnesia
Disorientation (unaware of time / date / place)	Seizure / convulsion

*Presence of any of the above symptoms may suggest concussion

2. MENTAL STATUS TESTING:

- What venue are we at today? (which gym / stadium / rink is this?)
- Which half (quarter / period / round) is this?
- Who scored last in this match (game / fight)?
- What team did you play last week / game (Who was your opponent in the last match)?
- Did you / your team win the last match / game?

Failure to answer all questions correctly may suggest concussion

3. BALANCE TESTING:

- Tandem Stance: (Requires stop-watch)
- Stand heel-to-toe with non-dominant foot in back (weight evenly distributed)
- Then balance for 20 seconds with hands on hips / eyes closed

More than 5 errors => may suggest concussion:

- E.g.
- Lift hands off hips
 - Open eyes
 - Lift forefoot or heel
 - Step / stumble / fall
 - Remain out of start position more than 5 seconds

IF CONCUSSION SUSPECTED, REMOVE FROM PLAY AND ASSESS FULLY WITH SCAT 3 CONCUSSION ASSESSMENT TOOL
<http://bjsm.bmj.com/content/47/5/259.full.pdf>

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January 2014



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