

# HEADS x UP

## CONCUSSION IN HIGH SCHOOL SPORTS

A FACT SHEET FOR **PARENTS**

### What is a concussion?

A concussion is a brain injury. Concussions are caused by a bump, blow, or jolt to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even a “ding” or a bump on the head can be serious.

### What are the signs and symptoms?

You can’t see a concussion. Signs and symptoms of concussion can show up right after the injury or can take days or weeks to appear. If your teen reports any symptoms of concussion, or if you notice the symptoms yourself, seek medical attention right away.

| Signs Observed<br>by Parents or Guardians   | Symptoms Reported<br>by Athlete  |
|---|--|
| <ul style="list-style-type: none"> <li>• Appears dazed or stunned</li> <li>• Is confused about assignment</li> <li>• Forgets plays</li> <li>• Is unsure of game, score, or opponent</li> <li>• Moves clumsily</li> <li>• Answers questions slowly</li> <li>• Loses consciousness</li> <li>• Shows behavior or personality changes</li> <li>• Can’t recall events prior to hit</li> <li>• Can’t recall events after hit</li> </ul> | <ul style="list-style-type: none"> <li>• Headache</li> <li>• Nausea</li> <li>• Balance problems or dizziness</li> <li>• Double or fuzzy vision</li> <li>• Sensitivity to light or noise</li> <li>• Feeling sluggish</li> <li>• Feeling foggy or groggy</li> <li>• Concentration or memory problems</li> <li>• Confusion</li> </ul> |

### What should you do if you think your teenage athlete has a concussion?

- 1. Seek medical attention right away.** A health care professional will be able to decide how serious the concussion is and when it is safe for your teen to return to sports.
- 2. Keep your teen out of play.** Concussions take time to heal. Don’t let your teen return to play until a health care professional says it’s OK. Athletes who return to play too soon—while the brain is still healing—risk a greater chance of having a second concussion. Second or later concussions can be very serious. They can cause permanent brain damage, affecting your teen for a lifetime.
- 3. Tell all of your teen’s coaches about any recent concussion.** Coaches should know if your teen had a recent concussion in ANY sport. Your teen’s coaches may not know about a concussion your teen received in another sport or activity unless you tell them. Knowing about the concussion will allow the coach to keep your teen from activities that could result in another concussion.
- 4. Remind your teen:** It’s better to miss one game than the whole season.

**It’s better to miss one game than the whole season.**

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR DISEASE CONTROL AND PREVENTION



## **Concussion Procedure and Protocol For Georgia Soccer Events**

**Concussion:** a traumatic brain injury that interferes with normal brain function. Medically, a concussion is a complex, pathophysiological event to the brain that is induced by trauma which may or may not involve a loss of consciousness (LOC). Concussion results in a constellation of physical, cognitive, emotional, and sleep-related symptoms. Signs or symptoms may last from several minutes to days, weeks, months or even longer in some cases.

### **CONCUSSION SIGNS, SYMPTOMS, AND MANAGEMENT AT TRAINING AND COMPETITIONS**

#### **Step 1:**

Did a concussion occur?

Evaluate the player and note if any of the following signs and/or symptoms are present:

- (1) Dazed look or confusion about what happened.
- (2) Memory difficulties.
- (3) Neck pain, headaches, nausea, vomiting, double vision, blurriness, ringing noise or sensitive to sounds.
- (4) Short attention span. Can't keep focused.
- (5) Slow reaction time, slurred speech, bodily movements are lagging, fatigue, and slowly answers questions or has difficulty answering questions.
- (6) Abnormal physical and/or mental behavior.
- (7) Coordination skills are behind, ex: balancing, dizziness, clumsiness, reaction time.

#### **Step 2:**

Is immediate emergency treatment needed?

This would include the following scenarios:

- (1) Spine or neck injury or pain.
- (2) Behavior patterns change, unable to recognize people/places, less responsive than usual.
- (3) Loss of consciousness.
- (4) Headaches that worsen
- (5) Seizures
- (6) Very drowsy, can't be awakened
- (7) Repeated vomiting
- (8) Increasing confusion or irritability
- (9) Weakness, numbness in arms and legs

#### **Step 3:**

If a possible concussion occurred, but no immediate emergency treatment is needed, what should be done now?

Focus on these areas every 5-10 min for the next 1 - 2 hours, without returning to any activities:

- (1) Balance, movement.
- (2) Speech.
- (3) Memory, instructions, and responses.
- (4) Attention on topics, details, confusion, ability to concentrate.
- (5) State of consciousness
- (6) Mood, behavior, and personality
- (7) Headache or "pressure" in head
- (8) Nausea or vomiting
- (9) Sensitivity to light and noise

Players shall not re-enter competition, training, or partake in any activities for at least 24 hours. Even if there are no signs or symptoms after 15-20 min, activity should not be taken by the player.

**Step 4:**

If there is a possibility of a concussion, do the following:

(1) The **CONCUSSION NOTIFICATION FORM** is to be filled out in duplicate and signed by a team official of the player's team.

(2) Have the parent/legal guardian sign and date the Form, and give the parent/legal guardian one of the copies of the completed Form. If the parent/legal guardian is not present, then the team official is responsible for notifying the parent/legal guardian ASAP by phone or email and then submitting the Form to the parent/legal guardian by email or mail. When the parent/legal guardian is not present, the team official must make a record of how and when the parent/legal guardian was notified. The notification will include a request for the parent/legal guardian to provide confirmation and completion of the Concussion Notification Form whether in writing or electronically.

**Step 5:**

A player diagnosed with a possible concussion may return to Georgia Soccer play only after their parent or legal guardian provides a signed authorization to the local affiliate.

References for additional information (not endorsed by Georgia Soccer):

Kissick MD, James and Karen M. Johnston MD, PhD. "Return to Play After Concussion." Collegiate Sports Medical Foundation. Volume 15, Number 6, November 2005. [http://www.csmfoundation.org/Kissick\\_-\\_return\\_to\\_play\\_after\\_concussion\\_-\\_CJSM\\_2005.pdf](http://www.csmfoundation.org/Kissick_-_return_to_play_after_concussion_-_CJSM_2005.pdf). April 22, 2011.

National Federation of State High School Associations. "Suggested Guidelines for Management of Concussion in Sports". 2008 NFHS Sports Medicine Handbook (Third Edition). 2008 77-82. <http://www.nfhs.org>. April 21, 2011.

## Notification of Possible Concussion For Georgia Soccer Events

(Affiliate will complete this form in duplicate, keeping one signed copy)

Today, \_\_\_\_\_ [month & day], 2\_\_\_\_\_ [year], during practice / game [circle which] held at

\_\_\_\_\_ [insert field/venue],

\_\_\_\_\_ [insert player's name] received a possible concussion.

We want to formally advise you of this possibility, and also remind you of the signs and symptoms that may arise from such an injury which might require further evaluation and/or treatment by a medical professional.

It is common for a concussed player to have one or many concussion symptoms. There are four types of symptoms: physical, cognitive, emotional, and sleep.

If your daughter or son starts to show signs of these symptoms, or there any other symptoms you notice about the behavior or conduct of your son or daughter, you should consider seeking immediate medical attention. These symptoms might include, among other signs, the following:

- |                             |                                 |                 |
|-----------------------------|---------------------------------|-----------------|
| -Memory difficulties        | -Less responsive than usual     | -Neck pain      |
| -Delicate to light or noise | -Headaches that worsen          | -Odd behavior   |
| -Repeats the same answer    | -Vomiting                       | -Slurred speech |
| -Focus issues               | -Irregular sleep                | -Slow reactions |
| -Seizures Patterns          | -Weakness/numbness in arms/legs | -Irritability   |

Please take the necessary precautions and seriously consider seeking a professional medical opinion should your child exhibit any of the above symptoms. Georgia Soccer strongly encourages that your medical professional also clears your child for return to soccer activity before you allow your daughter or son to participate further. Until you, as parent or legal guardian, authorize your child to return to play (preferably after seeking a professional medical opinion), please consider the following guidelines for your child:

- Refrain from participation in any activities the day of, and the day after, the occurrence.
- Refrain from taking any medicine unless (1) current medicine, prescribed or authorized, is permitted to be continued to be taken, and (2) any other medicine is prescribed by a licensed health care professional.
- Refrain from cognitive activities requiring concentration such as TV, video games, computer work, and text messaging if they are causing symptoms.

If you are unclear and have questions about the above symptoms, please immediately contact a medical doctor for evaluation and/or clarification on your child's condition.

Your child will not be permitted to return to play in any Georgia Soccer affiliated activity until you sign and return the **"RETURN TO PLAY" AUTHORIZATION** form.

\_\_\_\_\_  
(Signature of Affiliate Coach/Representative)

\_\_\_\_\_  
(Signature of Parent or Legal Guardian)

## GEORGIA SOCCER "RETURN TO PLAY" AUTHORIZATION

(To be signed by the Player's Parent or Legal Guardian and Returned to the Affiliate)

*By inserting my name and date below, and returning this "Return to Play" Form to my local Georgia Soccer Affiliate, I acknowledge that I have read the information contained in the original notification form. I also acknowledge that I am the player's parent or legal guardian and that I have been advised by Georgia Soccer of common Concussion symptoms, including the importance in seeking professional medical guidance before authorizing my child's return to play soccer within any Georgia Soccer sanctioned activity.*

**Please be advised that a player formally identified as suffering a possible concussion injury may not return to play until the player's parent or legal guardian confirms that they believe it safe for their child to do so. Parents/Guardians are strongly encouraged to consider seeking a professional medical opinion of their child's fitness to resume playing before returning this signed authorization to the local soccer affiliate.**

Player Name: \_\_\_\_\_ Gender: \_\_\_\_\_

Player's Team: \_\_\_\_\_

Player's Affiliate/Club Name: \_\_\_\_\_

Age Group & Competitive Division: \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Team Official Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**[THE LOCAL GEORGIA SOCCER AFFILIATE IS REQUIRED TO MAINTAIN A COPY OF THIS RECORD FOR FUTURE REFERENCE]**