

Soloway JCC

Concussion Prevention Management Policy

CONTEXT:

A concussion can have a significant impact on an individual's health and well-being. If a concussion is not identified and properly managed, it can result in permanent brain damage and, in rare occasions, even death.

Awareness of the signs and symptoms of concussion and knowledge of how to properly manage a concussion is critical to recovery and helping to ensure the individual is not returning to physical activities too soon, risking further complications.

A concussion is a clinical diagnosis made by a physician. It is critical that someone with a suspected concussion be examined by a medical doctor or nurse practitioner.

DEFINITION:

A concussion:

is a brain injury that causes changes in how the brain functions, leading to symptoms that can be physical (e.g., headache, dizziness), cognitive (e.g., difficulty concentrating or remembering), emotional/behavioural (e.g., depression, irritability) and/or related to sleep (e.g., drowsiness, difficulty falling asleep);

may be caused either by a direct blow to the head, face or neck, or a blow to the body that transmits a force to the head that causes the brain to move rapidly within the skull;

- can occur even if there has been no loss of consciousness (in fact most concussions occur without a loss of consciousness); and,

- Signs/symptoms can appear right after the injury, or may appear within hours or days of the injury.

- An individual may be reluctant to report symptoms because of a fear that they will be removed from the activity,

- It may be difficult for younger children (under the age of 10) and those with special needs to communicate how they are feeling.

- Signs for younger children (under the age of 10) may not be as obvious as in older children/adults.

COMMON SIGNS AND SYMPTOMS OF CONCUSSION:

Possible Signs Observed

A sign is something that will be observed by another person

Physical

- vomiting
- slurred speech
- slowed reaction time
- poor coordination or balance
- blank stare/glassy-eyed/dazed or vacant look
- decreased playing ability
- loss of consciousness or lack of responsiveness
- lying motionless on the ground or slow to get up
- amnesia
- seizure or convulsion
- grabbing or clutching of head

Possible Symptoms Reported

A symptom is something the injured will feel/report.

Physical

- headache
- pressure in head
- neck pain
- feeling off/not right
- ringing in the ears
- seeing double or blurry/loss of vision
- seeing stars, flashing lights
- pain at physical site of injury
- nausea/stomach ache/pain
- balance problems or dizziness
- fatigue or feeling tired
- sensitivity to light or noise

Cognitive

- difficulty concentrating
- easily distracted
- general confusion
- cannot remember things that happened before and after the injury
- does not know time, date, place, class, type of activity in which he/she was participating
- slowed reaction time (e.g., answering questions or following directions)

Emotional/Behavioural

- strange or inappropriate emotions (e.g., laughing, crying, getting angry easily)

Sleep Disturbance

- drowsiness
- insomnia

Cognitive

- difficulty concentrating or remembering
- slowed down, fatigue or low energy
- dazed or in a fog

Emotional/Behavioural

- irritable, sad, more emotional than usual
- nervous, anxious, depressed

Sleep Disturbance

- drowsy
- sleeping more/less than usual
- difficulty falling asleep

INITIAL RESPONSE – Removal from Physical Activity:

If a participant receives a blow to the head, face or neck, or a blow to the body that transmits a force to the head that causes the brain to move rapidly within the skull, and as a result may have suffered a concussion, the manager or instructor responsible for the activity must take immediate action as follows:

For a participant who is:

Unconscious

- Initiate emergency action by activating the emergency pull station and asking the front desk to call **911**.
- Stay with the individual until the First Responders arrive with the trauma kit or Emergency Medical Services arrives.
- Contact the family (via front desk data base or emergency contact cards for children) to inform them of the injury and inform them to which hospital the injured person will be transported.

Even if consciousness is regained, he/she needs to be examined by EMS or a physician.

Complete incident report

Ensure that family is aware that they must inform staff of the injured person's condition and physician's diagnosis prior to returning to physical activity.

For someone who is Unconscious: Assume there is also a possible head and/or neck injury and, **only if trained**, immobilize the individual before ambulance transportation to hospital. Do not remove athletic equipment (e.g. helmet) unless there is difficulty breathing.

Conscious

- Remove the participant from the activity immediately.
- If signs are observed or symptoms are reported, **a concussion should be suspected**. Call the first responders.

Contact the family (via front desk data base or emergency contact cards for children) to inform them of the injury.

Stay with the injured participant until a parent/guardian or emergency contact arrives.

Monitor and document any physical, emotional and/or cognitive changes.

Ensure that family is aware that they must inform staff of the injured person's condition and physician's diagnosis prior to returning to physical activity.

Complete incident report.

If a concussion is not suspected (i.e., signs are not observed and symptoms are not reported), the participant may resume physical activity; however, for children, a parent/guardian should be contacted and informed of the incident and suggest a medical examination.

For a Participant who is Conscious: **If in doubt, sit them out.**

MEDICAL EXAMINATION:

Following examination by a medical doctor or nurse practitioner and prior to the individual returning to physical activity, the manager must be informed of the results.

If **No Concussion** is **Diagnosed**: the participant may return to physical activities.

or

If a **Concussion** is **Diagnosed**: staff will be informed of the Return to Physical Activity (R2P) plan recommended by the physician.