



Concussion Information Sheet

In March of 2010, the Governor of New Mexico, Bill Richardson, signed a bill that established safety protocols and education regarding brain injury resulting from school athletic activities. The new law requires that:

1. An informed consent must be signed annually by parents and youth athletes prior to practice or competition acknowledging the risk of head injury.
2. A student athlete who is suspected of sustaining a concussion or head injury must be removed from practice or play and not allowed to return on the same day.
3. A student athlete who has been removed from play **must refrain from activity for a minimum of seven days AND receive clearance from a licensed health care provider prior to returning to play.**

What is a concussion?

A concussion is a type of traumatic brain injury, or TBI, caused by a bump, blow, or jolt to the head that can change the way your brain normally works. Concussions can also occur from a fall or a blow to the body that causes the head and brain to move quickly back and forth. Even though most concussions are mild, **all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly.** You can't see a concussion and most sports concussions occur without loss of consciousness. If your child reports any symptoms of concussion (listed in the boxes below), or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

Symptoms that may be reported by athlete:		
• Headaches	• Sensitivity to light/noise	• Feeling mentally foggy
• Dizziness/nausea	• Numbness/Tingling	• Feeling slowed down
• Fatigue	• Repeats questions	• Feeling more emotional
• Visual problems	• Nervous/Anxious	• Problems concentrating
• Balance problems	• Feeling confused	• Problems remembering

Signs that may be observed by coaches/parents/athletes:	
• Appears dazed or stunned	• Answers questions slower than normal
• Looks or acts confused	• Moves clumsily
• Seems forgetful	• "Blacked out" or lost consciousness
• Abnormal behavior or personality changes	• Can't recall information before or after the injury

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What can happen if my child keeps on playing with a concussion or returns too soon?

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after a concussion occurs.

All athletes that sustain a concussion should be evaluated by a medical professional who has training in dealing with individuals with concussions (i.e. licensed physician, licensed osteopathic physician, licensed nurse practitioner, licensed psychologist, and licensed athletic trainer). Emergency referral should be considered if there is any decreasing alertness, unusual behavior change, slurring of speech, or any other sign or symptom that seems in need of immediate medical treatment

When and how should my child return to participation?

Anyone with a concussion should NEVER return to play if they still have ANY symptoms.

It has been suggested in the most current medical research for concussions (3rd International Conference on Concussion in Sport) that returning to play should occur in gradual steps beginning with aerobic exercise only to increase heart rate (stationary bicycle); moving to increasing heart rate with movement (running); then adding controlled contact if appropriate; and finally return to competition.

Return to Play Plan

24 hours is required with no symptoms before moving from one level to the next level

If any symptoms return, report to the medical professional that is treating the concussion and return to step # 1.

1. No physical activity until asymptomatic (no symptoms) for a minimum of 24 hours.
2. Low levels of physical activity with no symptoms during or after. This includes walking, light jogging, light stationary biking, and light weight lifting (low weight, higher reps, no bench, no squat)
3. Moderate levels of physical activity with body/head movement. This includes moderate jogging, brief running, moderate intensity stationary biking, moderate-intensity weightlifting (reduced time and/or weight)
4. Heavy non-contact physical activity. This includes sprinting/running, high-intensity stationary biking, regular weightlifting routine, non-contact sport-specific drills (in 3 planes of movement).
5. Full participation in a controlled practice.
6. Full participation in game play.