

# HEADS UP: Concussion in High School Sports

**The Iowa Legislature passed a new law, effective July 1, 2011, regarding students in grades 7 – 12 who participate in extracurricular interscholastic activities. Please note this important information from Iowa Code Section 280.13C, Brain Injury Policies:**

- (1) A child must be immediately removed from participation (practice or competition) if his/her coach or a contest official observes signs, symptoms, or behaviors consistent with a concussion or brain injury in an extracurricular interscholastic activity.
- (2) A child may not participate again until a licensed health care provider trained in the evaluation and management of concussions and other brain injuries has evaluated him/her and the student has received written clearance from that person to return to participation.
- (3) Key definitions:
  - “**Licensed health care provider**” means a physician, physician assistant, chiropractor, advanced registered nurse practitioner, nurse, physical therapist, or athletic trainer licensed by a board.
  - “**Extracurricular interscholastic activity**” means any extracurricular interscholastic activity, contest, or practice, including sports, dance, or cheerleading.

## What is a concussion?

A concussion is a brain injury. Concussions are caused by a bump, blow, or jolt to the head or body. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious.

## What parents/guardians should do if they think their child has a concussion?

1. **OBEY THE NEW LAW.**
  - a. Keep your child out of participation until s/he is cleared to return by a licensed healthcare provider.
  - b. Seek medical attention right away.
2. Teach your child that it's not smart to play with a concussion.
3. Tell all of your child's coaches and the student's school nurse about ANY concussion.

## What are the signs and symptoms of a concussion?

You cannot see a concussion. Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days after the injury. If your teen reports one or more symptoms of concussion listed below, or if you notice the symptoms yourself, keep your teen out of play and seek medical attention right away.

## STUDENTS:

If you think you have a concussion:

- **Tell your coaches & parents** – Never ignore a bump or blow to the head, even if you feel fine. Also, tell your coach if you think one of your teammates might have a concussion.
- **Get a medical check-up** – A physician or other licensed health care provider can tell you if you have a concussion, and when it is OK to return to play.
- **Give yourself time to heal** – If you have a concussion, your brain needs time to heal. While your brain is healing, you are much more likely to have another concussion. It is important to rest and not return to play until you get the OK from your health care professional.

## IT'S BETTER TO MISS ONE CONTEST THAN THE WHOLE SEASON.

**IMPORTANT: Students participating in interscholastic athletics, cheerleading and dance; and their parents/guardians; must annually sign the acknowledgement below and return it to their school. Students cannot practice or compete in those activities until this form is signed and returned.**

We have received the information provided on the concussion fact sheet titled, “HEADS UP: Concussion in High School Sports.”

## Signs Reported by Students:

- Headache or “pressure” in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light or noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Just not “feeling right” or is “feeling down”

## PARENTS:

### How can you help your child prevent a concussion?

Every sport is different, but there are steps your children can take to protect themselves from concussion and other injuries.

- Make sure they wear the right protective equipment for their activity. It should fit properly, be well maintained, and be worn consistently and correctly.
- Ensure that they follow their coaches' rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.

## Signs Observed by Parents or Guardians:

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes
- Can't recall events prior to hit or fall
- Can't recall events after hit or fall

Information on concussions provided by the Centers for Disease Control and Prevention.

For more information visit: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion)

Student's Signature

Date

Student's Printed Name

Parent's/Guardian's Signature

Date

Student's Grade

Student's School



## **A PARENT'S GUIDE TO CONCUSSION**

**National Federation of State High School Associations (NFHS)  
Sports Medicine Advisory Committee (SMAC)**

### **What is a concussion?**

- A concussion is a brain injury which results in a temporary disruption of normal brain function. A concussion occurs when the brain is violently rocked back and forth or twisted inside the skull, typically from a blow to the head or body. An athlete does not need to lose consciousness (be “knocked-out”) to suffer a concussion, and in fact, less than ten percent of concussed athletes suffer loss of consciousness.

### **Concussion Facts**

- A concussion is a type of traumatic brain injury. The result is a more obvious functional problem than a clear structural injury, causing it to be invisible to standard medical imaging (CT and MRI scans).
- It is estimated that over 140,000 high school athletes across the United States suffer a concussion each year. (Data from NFHS Injury Surveillance System)
- Concussions occur most frequently in football, but boys’ ice hockey, boys’ lacrosse, girls’ soccer, girls’ lacrosse and girls’ basketball follow closely behind. All athletes are at risk.
- A concussion may cause multiple symptoms. Many symptoms appear immediately after the injury, while others may develop over the next several days or weeks. The symptoms may be subtle and are often difficult to fully recognize.
- Concussions can cause symptoms which interfere with school, work, and social life.
- Concussion symptoms may last from a few days to several months.
- An athlete should not return to sports or physical activity like physical education or working-out while still having symptoms from a concussion. To do so puts them at risk for prolonging symptoms and further injury.

### **What should I do if I think my child has had a concussion?**

If an athlete is suspected of having a concussion, he or she must be immediately removed from that activity. Continuing to play or work out when experiencing concussion symptoms can lead to worsening of symptoms, increased risk for further injury and possibly death. Parents and coaches are not expected to be able to make the diagnosis of a concussion. A medical professional trained in the diagnosis and management of concussions will determine the diagnosis. However, you must be aware

of the signs and symptoms of a concussion. If you are suspicious your child has suffered a concussion, he or she must stop activity right away and be evaluated:

## **When in doubt, sit them out!**

All student-athletes who sustain a concussion need to be evaluated by a health care professional who is experienced in concussion management. You should call your child's physician and explain what has happened and follow your physician's instructions. If your child is vomiting, has a severe headache, is having difficulty staying awake or answering simple questions, he or she should be immediately taken to the emergency department.

### **What are the signs and symptoms of a concussion?**

<b>SIGNS OBSERVED BY PARENTS, FRIENDS, TEACHERS OR COACHES</b>	<b>SYMPTOMS REPORTED BY ATHLETE</b>
<b>Appears dazed or stunned</b>	<b>Headache</b>
<b>Is confused about what to do</b>	<b>Nausea</b>
<b>Forgets plays</b>	<b>Balance problems or dizziness</b>
<b>Is unsure of game, score, or opponent</b>	<b>Double or fuzzy vision</b>
<b>Moves clumsily</b>	<b>Sensitivity to light or noise</b>
<b>Answers questions slowly</b>	<b>Feeling sluggish</b>
<b>Loses consciousness</b>	<b>Feeling foggy or groggy</b>
<b>Shows behavior or personality changes</b>	<b>Concentration or memory problems</b>
<b>Can't recall events prior to hit</b>	<b>Confusion</b>
<b>Can't recall events after hit</b>	

### **When can an athlete return to play following a concussion?**

After suffering a concussion, **no athlete should return to play or practice on that same day**. Previously, athletes were allowed to return to play if their symptoms resolved within 15 minutes of the injury. Studies have shown that the young brain does not recover quickly enough for an athlete to safely return to activity in such a short time.

Concerns over athletes returning to play too quickly have led state lawmakers in almost all states to pass laws stating that **no player shall return to play that day following a concussion, and the athlete must be cleared by an appropriate health-care**

**professional before he or she is allowed to return to play in games or practices.**

The laws typically also mandate that players, parents and coaches receive education on the dangers and recognizing the signs and symptoms of concussion.

Once an athlete no longer has symptoms of a concussion and is cleared for return to play, he or she should proceed with activity in a step-wise fashion to allow the brain to re-adjust to exertion. On average, the athlete will complete a new step each day. An example of a typical return-to-play schedule is shown below:

*Day 1:* Light exercise, including walking or riding an exercise bike. No weight-lifting.

*Day 2:* Running in the gym or on the field. No helmet or other equipment.

*Day 3:* Non-contact training drills in full equipment. Weight-training can begin.

*Day 4:* Full contact practice or training.

*Day 5:* Game play.

**If symptoms occur at any step, the athlete should cease activity and be re-evaluated by their health care provider.**

### **How can a concussion affect schoolwork?**

Following a concussion, many student-athletes will have difficulty in school. These problems may last from days to months and often involve difficulties with short- and long-term memory, concentration and organization.

In many cases after the injury, it is best to decrease the athlete's class load early in the recovery phase. This may include staying home from school for a few days, followed by academic accommodations (such as a reduced class schedule), until the athlete has fully recovered. Decreasing the stress on the brain and not allowing the athlete to push through symptoms will shorten the recovery time.

### **What can I do?**

- Both you and your child should learn to recognize the "Signs and Symptoms" of concussion as listed above.
- Teach your child to tell the coaching staff if he or she experiences such symptoms.
- Emphasize to administrators, coaches, teachers and other parents your concerns and expectations about concussion and safe play.
- Teach your child to tell the coaching staff if he or she suspects that a teammate has suffered a concussion.
- Ask teachers to monitor any decrease in grades or changes in behavior that could indicate a concussion.
- Report concussions that occurred during the school year to appropriate school staff. This will help in monitoring injured athletes as they move to the next season's sports.

## **Other Frequently Asked Questions**

### **Why is it so important that athletes not return to play until they have completely recovered from a concussion?**

Student-athletes that return to any activity too soon (school work, social activity or sports activity), can cause the recovery time to take longer. They also risk recurrent, cumulative or even catastrophic consequences, if they suffer another concussion. Such risk and difficulties are prevented if each athlete is allowed time to recover from his or her concussion and the return-to-play decisions are carefully and individually made. No athlete should return to sport or other at-risk activity when signs or symptoms of concussion are present and recovery is ongoing.

### **Is a “CAT scan” or MRI needed to diagnose a concussion?**

Diagnostic testing, which includes CT (“CAT”) and MRI scans, are rarely needed following a concussion. While these are helpful in identifying life-threatening head and brain injuries (skull fractures, bleeding or swelling), they are currently insensitive to concussive injuries and do not aid in the diagnosis of concussion. Concussion diagnosis is based upon the athlete’s story of the injury and a health care provider’s physical examination and testing.

### **What is the best treatment to help my child recover quickly from a concussion?**

The best treatment for a concussion is rest. There are no medications that can help speed the recovery. Exposure to loud noises, bright lights, computers, video games, television and phones (including text messaging) may worsen the symptoms of a concussion. You should allow your child to rest as much as possible in the days following a concussion. As the symptoms lessen, you can allow increased use of computers, phone, video games, etc., but the access must be lessened or eliminated, if symptoms worsen.

### **How long do the symptoms of a concussion usually last?**

The symptoms of a concussion will usually go away within 2–3 weeks of the initial injury. You should anticipate that your child will likely be out full participation in sports for about 3-4 weeks following a concussion. However, in some cases symptoms may last for many more weeks or even several months. Symptoms such as headache, memory problems, poor concentration, difficulty sleeping and mood changes can interfere with school, work, and social interactions. The potential for such long-term symptoms indicates the need for careful management of all concussions.

### **How many concussions can an athlete have before he or she should stop playing sports?**

There is no “magic number” of concussions that determine when an athlete should give up playing contact or collision sports. The circumstances that surround each individual injury, such as how the injury occurred and the duration of symptoms following the concussion, are very important and must be individually considered when assessing an athlete’s risk for and potential long-term consequences from incurring further and potentially more serious concussions. The decision to “retire” from sports is a decision

best reached after a complete evaluation by your child's primary care provider and consultation with a physician or neuropsychologist who specializes in treating sports concussions.

**I've read recently that concussions may cause long-term brain damage in professional football players. Is this a risk for high school athletes who have had a concussion?**

The issue of "chronic traumatic encephalopathy (CTE)" in former professional players has received a great deal of media attention lately. Very little is known about what may be causing these dramatic abnormalities in the brains of these unfortunate players. At this time we do not know the long-term effects of concussions (or even the frequent sub-concussive impacts) which happen during high school athletics. In light of this, it is important to carefully manage every concussion and all concussion-like signs and symptoms on an individual basis.

Some of this information has been adapted from the CDC's "Heads Up: Concussion in High School Sports" materials by the NFHS's Sports Medicine Advisory Committee. Please go to [www.cdc.gov/ncipc/tbi/Coaches\\_Tool\\_Kit.htm](http://www.cdc.gov/ncipc/tbi/Coaches_Tool_Kit.htm) for more information.

**Revised and Approved April 2013  
April 2010**

**DISCLAIMER – NFHS Position Statements and Guidelines**

The NFHS regularly distributes position statements and guidelines to promote public awareness of certain health and safety-related issues. Such information is neither exhaustive nor necessarily applicable to all circumstances or individuals, and is no substitute for consultation with appropriate health-care professionals. Statutes, codes or environmental conditions may be relevant. NFHS position statements or guidelines should be considered in conjunction with other pertinent materials when taking action or planning care. The NFHS reserves the right to rescind or modify any such document at any time.