Concussion guide for

COACHES AND TRAINERS

What is a concussion?
A concussion is a brain injury that cannot be seen on routine X-rays, CT scans, or MRIs. It affects the way an athlete may think and remember things, and can cause a variety of symptoms.

What are the signs and symptoms of a concussion?
An athlete does not need to be knocked out (lose consciousness) to have had a concussion. The athlete might experience one or more of the following:

<table>
<thead>
<tr>
<th>Cognitive (thinking)</th>
<th>Physical</th>
<th>Emotional/ behavioural</th>
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<tbody>
<tr>
<td>• Does not know time, date, place, details about a recent activity</td>
<td>• Headache or head pressure</td>
<td>• Nervousness or anxiety</td>
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<td>• Difficulty remembering things that happened before and after the injury</td>
<td>• Dizziness</td>
<td>• Strange or inappropriate emotions (i.e., laughing, crying, getting mad easily)</td>
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<td>• Difficulty concentrating</td>
<td>• Stomachache, nausea, vomiting</td>
<td>• Slow to answer questions or follow directions</td>
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<td>• Not thinking clearly</td>
<td>• Blank or vacant stare</td>
<td>• Easily distracted</td>
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<td>• Feeling like “in a fog”</td>
<td>• Blurred or fuzzy vision</td>
<td>• Not participating well</td>
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<td>• Sensitive to light or sound</td>
<td>• Changes in sleep patterns</td>
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<td>• Sees stars, flashing lights</td>
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<td>• Ringing in the ears</td>
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<td>• Problems with balance or co-ordination</td>
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<td>• Feels tired or no energy</td>
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<td>• “Don’t feel right”</td>
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Get medical help immediately if an athlete has any “red flag” symptoms such as neck pain, repeated vomiting, growing confusion, seizures and weakness or tingling in their arms or legs. These may be signs of a more serious injury.
What causes a concussion?
Any blow to the head, face or neck, or a blow to
the body that causes a sudden jarring of the head
may cause a concussion (e.g., a ball to the head,
being checked into the boards).

What should I do if I think an athlete
might have a concussion?
In all suspected cases of concussion, the athlete
should stop playing right away. Continuing
to play increases their risk of more severe,
longer-lasting concussion symptoms, as well as
increases their risk of other injury.

The Concussion Recognition Tool 6 (CRT6) can
be used by anyone to help recognize the signs
and symptoms of a possible concussion.

The athlete should not be left alone and should
be seen by a doctor as soon as possible. They
should not drive.

If the athlete loses consciousness, call an
ambulance to take them to the hospital right away.
Follow basic principles of first aid. Do not move
them or remove any equipment such as a helmet.

The athlete should not return to play the same day.

How is concussion treated?
For the first 24 to 48 hours after the injury, the
athlete can engage in activities of daily living,
such as light walking and preparing meals, and
social interactions at home. Screen time should
be minimized in the first 48 hours. Then, school
and sport activities can be introduced and
increased gradually.

As the athlete is returning to activities, their
symptoms may feel a little worse. This is
common and OK as long as it is mild and brief.
“Brief” means their symptoms should settle
back down within an hour. If activities make their
symptoms worsen more than this, they should
take a break and adapt activities.

Recovering from concussion is a process that
takes patience. If the athlete goes back to
activities before they are ready, it is likely to make
their symptoms worse, and their recovery might
take longer.

When should the athlete go to the doctor?
Anyone with a possible head injury should be
seen by a doctor as soon as possible.

The athlete should go back to the doctor
immediately if, after being told they have a
concussion, they have worsening symptoms,
such as:

- being more confused
- headache that is getting worse
- vomiting more than twice
- not waking up
- having any trouble walking
- having a seizure
- strange behaviour

The signs and symptoms of a concussion often
last for up to four weeks but may last longer.
In some cases, athletes may take many weeks
or months to heal. If the athlete has had a
concussion before, they may take longer to heal.

If the athlete’s symptoms are persisting (i.e., last
longer than four weeks) they should be referred
to a licensed healthcare professional who is an
expert in the management of concussion.
Concussion guide for coaches and trainers

When can the athlete return to school?
An athlete with a concussion may miss one or more days of school. Generally, more than one week of complete absence from the school environment is not recommended. Medical clearance is not required to return to school.

The Return-to-School Strategy provides information on the stages of returning to the classroom. *Return to school should be completed before the athlete seeks medical clearance for full return to unrestricted sport activities.*

When can the athlete return to sport?
Return to sport and physical activity must follow a step-wise approach.

In this approach:

- Each stage is at least 24 hours.
- The athlete moves on to the next step when they can tolerate activities.
- If their symptoms worsen more than mildly and briefly, the athlete should stop and try again the next day at the same step.

**Step 1: Activities of daily living and relative rest (first 24 to 48 hours).** The athlete can start with daily living activities such as moving around the home, preparing meals, light walking and social interactions (e.g., talking with friends or family). Minimize screen time.

**Step 2: Light to moderate effort aerobic exercise**

2A: Start with light aerobic exercise such as walking or stationary cycling at a slow to medium pace. May begin light resistance training that does not result in more than mild and brief worsening of symptoms.

2B: Gradually increase the intensity of aerobic exercise to moderate effort, such as stationary cycling or walking at a brisk pace. Moderate effort means the activity may cause faster breathing and heart rate, but not enough to prevent you from being able to talk comfortably.

**Step 3: Individual sport-specific activities, without risk of inadvertent head impact.** Add sport-specific activities, such as running, skating or throwing drills, that can be done individually (away from other participants) in a low-risk environment. Activities should be supervised by a coach, trainer, teacher or parent/caregiver. Continue progressing at this step until symptom-free, even when exercising.

**Medical clearance is required before step 4.**

**Step 4: Training drills and activities with no contact.** Progress to usual intensity exercise and add in more challenging drills such as passing drills. Participate in multi-athlete training (if applicable) and non-contact practices. There should be no impact activities (e.g., no checking, no heading the ball).

**Step 5: Return to non-competitive activities, full-contact practice and physical education activities.** Progress to typical physical activities, except for competitive gameplay. Restore confidence and skills.

**Step 6: Return to sport and physical activity without restriction.**

An athlete should never return to activities with risk of contact until cleared by a doctor!

Returning before full recovery from concussion puts athletes at higher risk of sustaining another concussion, with symptoms that may be more severe and last longer.

Additional resources
Scan the QR code or visit parachute.ca/concussion

parachute.ca