

GUIDELINES FOR HEAD INJURIES

SIDE-LINE CONCUSSION ASSESSMENT

Anytime an athlete is suspected of suffering from a concussion, the Certified Athletic Trainer will perform the Standardized Concussion Assessment Tool (SCAT).

ASSESSMENT INTERPRETATION

The side-line scores will be used as additional information for the Certified Athletic Trainer and medical personnel in the course of their normal clinical decision-making. The decision making will also take into account other possible indicators of concussion. Such indicators include the following:

1. Vacant stare (befuddled facial expression)
2. Delayed verbal and motor responses (slow to answer questions or follow instructions)
3. Confusion and inability to focus attention (easily distracted and unable to follow through with normal activities)
4. Disorientation (walking in the wrong direction; unaware of time, date and place)
5. Headache (at rest or with exertion)
6. Slurred or incoherent speech (making disjointed or incomprehensible statements)
7. Gross observable lack of coordination (stumbling, inability to walk tandem/straight line)
8. Emotions out of proportion to circumstances (distraught, crying for no apparent reason)
9. Memory deficits (exhibited by the athlete repeatedly asking the same question that has already been answered, or inability to memorize three out of three words or three out of three objects in five minutes)
10. Any period of loss of consciousness (paralytic coma, unresponsiveness to arousal)

GRADES OF CONCUSSION

Grade 1

1. Transient confusion (inattention, inability to maintain a coherent stream of thought and carry out goal-directed movements)
2. No loss of consciousness
3. Concussion symptoms or mental abnormalities on examination resolve in less than 15 minutes

Grade 2

1. Transient confusion
2. No loss of consciousness
3. Concussion symptoms or mental status abnormalities (including amnesia) on examination last more than 15 minutes

Grade 3

1. Any loss of consciousness
 - a. brief (seconds)
 - b. prolonged (minutes)

MANAGEMENT OF CONCUSSION IN ATHLETES

Grade 1

1. Remove from contest
2. Examine immediately and at five-minute intervals, both at rest and during exertion, for the development of mental status changes or post-concussive symptoms
3. May return to activities after Hopatcong HS concussion policy protocols are completed

Grade 2

1. Remove from contest and disallow return that day
2. Examine on-site frequently for signs of evolving intracranial pathology
3. A trained person should reexamine the athlete the next day
4. A physician should perform a neurologic examination to clear the athlete for return to play after one full week without symptoms, both at rest and during exertion

Grade 3

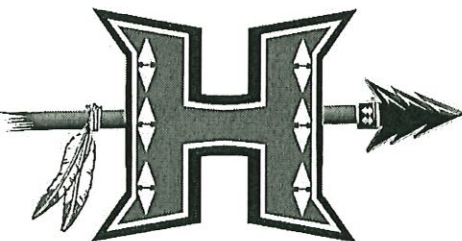
1. Transport the athlete from the field to the nearest emergency department (by ambulance if the player remains unconscious or if worrisome signs are detected and, if needed, with cervical spine immobilization)
2. A thorough neurologic evaluation should be performed emergently, including appropriate neuroimaging procedures when indicated
3. Hospital admission is indicated if any signs of pathology are detected or if mental status of the athlete remains abnormal

CRITERIA FOR RETURN-TO-PLAY BY ATHLETES AFTER CONCUSSION

GRADE OF CONCUSSION	RETURN TO PLAY ONLY AFTER BEING WITHOUT SYMPTOMS WITH NORMAL NEUROLOGIC ASSESSMENT AT REST AND WITH EXERTION
Grade 1	1 week symptom free
Multiple Grade 1 Concussions	1 week and physicians clearance
Grade 2 Concussion	1 week and physicians clearance
Multiple Grade 2 Concussions	2 weeks and physicians clearance
Grade 3 Concussion – Brief Loss of Consciousness (seconds)	1 week and physicians clearance
Grade 3 Concussion – Prolonged Loss of Consciousness (minutes)	2 weeks and physicians clearance
Multiple Grade 3 Concussions	1 month or longer, based on the decision of the physician

If the Certified Athletic Trainer does not feel that the athlete is without symptoms at rest and or exertion at the time of return, then the athlete will not be allowed to return until cleared by the school physician.

Please see below for Concussion Release form, and RTP Protocol:



Chris Buglovsky
Athletic Director

Matt McKowen
Athletic Trainer

Concussion Release Form

To the parents and/or guardians of: _____

Your child may have suffered a concussion while participating in a sporting event on: _____

Be aware, symptoms of a concussion may not be present for up to 72 after post injury.

Possible Signs and Symptoms of a Concussion

Headache	Pressure in the head	Neck pain
Nausea or vomiting	Dizziness	Blurred vision
Balance problems	Light sensitivity	Noise sensitivity
Feeling slowed down	Feeling in a fog	Don't feel right
Difficulty concentrating	Difficulty remembering	Fatigue or low energy
Confusion	Drowsiness	Trouble falling asleep
More emotional	Irritability	Sadness
Nervous or anxious		

- IF ANY OF THE ABOVE SIGNS OR SYMPTOMS WORSENS, TAKE YOUR CHILD TO THE EMERGENCY ROOM IMMEDIATELY. WHEN IN DOUBT, CALL 9-1-1.
- Rest is the best medicine for your child. This means physically and cognitively. Refrain from playing video games, cell phone usage, and bright lights. Avoid loud, noisy environments.
- Do not take NSAIDs or any other medications. Please consult with a physician before administering any medications.
- *In order for your child to return to sports, they must be cleared by a physician trained in evaluations and management of concussions. The attached Return to Play Protocol must be completed with the supervision of the Certified Athletic Trainer, and signed by the treating Physician, before he/she is allowed to compete again.*
- Please contact Mr. Matt McKowen, Athletic Trainer for Hopatcong High School, with any questions or concerns.
Email: mmckowen@hopatcongschools.org
Athletic Trainer's Office Phone: 973.770.8983
Main Office Fax: 973.398.9048

Return To Play Protocol

Athlete Name: _____

- The above student-athlete has been asymptomatic at rest, physically and cognitively, for 24 hours, and may begin a gradual return to play protocol with a Certified Athletic Trainer's supervision. The patient must remain symptom free for 24 hours after each step has been completed in order to advance. If symptoms are experienced during or after a step, they will discontinue activity, and will begin the previous step 24 hours later.

Physician's Name: _____

Date: _____

Physician's Signature: _____

Step 1: Light aerobic exercise, no resistance training. Target HR between 30-40%

- Exercises include: walking, swimming, stationary cycling, lower extremity stretching, beginner single leg balancing

Date Completed: _____

ATC: _____

Step 2: Aerobic exercise with increased intensity, no resistance training. Target HR between 40-60%

- Exercises include: skating, light jogging, dynamic stretching

Date Completed: _____

ATC: _____

Step 3: Sport specific training, normal exercise environment. Target HR between 60-80%

- Exercises include: active warmup, treadmill running, higher level balancing, beginner level agility/footwork, light resistance training

Date Completed: _____

ATC: _____

Step 4: Increased intensity with sport specific training. Target HR between 80%-full exertion.

- Exercises include: active warmup, treadmill running with sprint intervals, high level agility exercises, high level balancing with multitasking, non-contact practice/drills, normal resistance training routine
- Passing drills, shooting drills, skill patterns

Date Completed: _____

ATC: _____

Step 5: Return to full contact practice

Date Completed: _____

ATC: _____

Step 6: Return to full contact competition PENDING MEDICAL CLEARANCE BY A PHYSICIAN

Physician's Signature: _____

Date: _____

Doctor's Office Stamp: