



## **Westwood High School Athletic Training Concussion Notification Form**

### **MANAGEMENT OF HEAD INJURIES THAT INTERRUPT RETURN TO PLAY**

Any athlete whose concussion involves loss of consciousness, doesn't "clear" in 15 minutes or who has had previous concussions should not return to play or practice until medical clearance is obtained. Generally, an athlete is advised not to return to play or practice in a contact sports until he/she is asymptomatic and clear for at least one week. This means no headache, confusion or any of the symptoms related to a concussion

#### ***Return to Play Protocol*** ⇒

Once it is determined that the student-athlete may resume activity, the following return to play protocol will be followed. Each step represents one day or a 24 hour period.

1. No activity, complete rest. Once asymptomatic, proceed to next level.
2. Light aerobic exercises such as walking or stationary bike, no resistance training.
3. Sport specific exercise (ex., running in soccer, catching passes in football), progressive addition of resistance training at steps 3 or 4.
4. Non-contact training drills.
5. Full contact training after medical clearance.
6. Game play.

With this stepwise progression, the athlete should continue to proceed to the next level if asymptomatic at the current level. If any post concussion symptoms occur, the student athlete will drop back down to the previous asymptomatic level and try to progress again after another 24 hours.

**THESE ARE GENERAL GUIDELINES AND ARE NOT MEANT TO REPLACE THE JUDGEMENT OF A PHYSICIAN OR CERTIFIED ATHLETIC TRAINER PRESENT ON THE SIDELINE. IF THERE IS ANY OBVIOUS ABNORMALITY OR DETERIORATION OF SYMPTOMS, IMMEDIATE MEDICAL CARE SHOULD BE FOUND.**

## Sideline Evaluation for Suspected Concussion

### Orientation:

What month is it?	What year is it?
What day of the week is it?	What's today's date?
Who are we playing?	

### Concentration:

Repeat the days of the week backwards.  
 Repeat these numbers in reverse order: 3-1-7      4-6-8-2

### Memory:

Recall three words at 0 minutes and 5 minutes: Table, Blue, Bulldog  
 What happened during the play?  
 What is the score of the game?  
 Do you remember the hit?

### *Cranial Nerves:*

I. Smell	VII. Taste, Facial Expression
II. Vision	VIII. Hearing, Balance
III. Pupil Equally Reactive to light	IX. Swallow
IV. Upward Eye Movement	X. "Say Ahh"
V. Chew	XI. Resisted Shoulder Shrug
VI. Move Eyes Lateral	XII. Tongue Movement

### Exertional Test:

40 yard Sprint  
 5 Deep Knee Bends

### Neurological Test:

Strength  
 Coordination & Agility  
 Sensation

\* Headaches, dizziness, nausea, unsteadiness, light sensitive, blurred or double vision, emotional instability  
 The schematic below reflects the latest recommendations on concussion management in a form we believe should be helpful to schools, especially if no medically trained individual is available on the sideline.

### **SIDELINE CONCUSSION MANAGEMENT**

#### **HEAD INJURY NO LOSS OF CONSCIOUSNESS**

#### **HEAD INJURY LOSS OF CONSCIOUSNESS**

↓

First Concussion  
 "Clear" in 15  
 minutes of Rest and  
 Post Exercise

↓

OK to Return to  
 Game or Practice

↓

First Concussion  
 Doesn't Clear in  
 15 Minutes

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Should not return to game or practice and should have medical clearance, even if athlete seems OK. This includes any other strenuous activity.

↓

History of Previous  
 Concussion

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Should not return to game or practice and should have medical clearance, even if athlete seems OK. This includes any other strenuous activity.

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NFHS Rules  
**PROHIBIT** Return  
 to Contest

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Should not return to game or practice and should have medical clearance, even if athlete seems OK. This includes any other strenuous activity.