

MIDDLETOWN TOWNSHIP PUBLIC SCHOOLS
Department of Athletics
Head Injury and Concussion Home Instruction Sheet

Dear Parent/Guardian:

Your son/daughter has sustained a head injury while participating in high school athletics. This is a medical follow up sheet for your child's health and safety, because the brain is very complex, every brain injury is different. Some symptoms may appear right away, while in some instances, the signs of a concussion do not become obvious until several hours or even days after the injury.

Please be especially observant for the following signs, symptoms or behaviors.

1. Headache (especially one that **increases in intensity***)
2. Nausea and **vomiting***
3. Blurred vision or double vision*
4. Memory loss
5. Mental confusion/behavior changes/agitation
6. Dizziness, poor balance, or unsteadiness
7. Weakness in either arms or legs
8. Abnormal drowsiness or sleepiness
9. Unequal pupils, have one pupil-the black part in the middle of eye larger than the other
10. Ringing of the ears
11. Slurred speech*
12. Convulsions/seizures*
13. Decreased or irregular pulse or respiration*

*Seek medical attention at the nearest emergency department.

The best guideline is to **note symptoms that worsen**, and behaviors that seem to represent a change in your son/daughter. If you have any question or concern at all about the symptoms you are observing, contact your family physician for instructions, or seek medical attention at the nearest emergency department. Otherwise, you can follow the instructions below.

DO NOT:

- Drive while symptomatic
- Exercise or lift weights
- Perform strenuous activity, sports or participate in physical education class
- Take ibuprofen, aspirin, naproxen or other non-steroidal anti-inflammatory medications
- Drink Alcohol
- Take the impact test!

THERE IS NO NEED TO:

- Check eyes with a flashlight
- Wake up every hour
- Test reflexes
- Stay in bed

DECREASE

Activities that require attention and concentration like:

- Texting
- Playing video games
- Reading
- Watching TV
- Using Computer

IT IS OK TO:

- Use acetaminophen (Tylenol) for headaches
- Use ice pack on head & neck for comfort
- Eat a light diet
- Go to Sleep
- Rest

(NOTE: The student athlete may watch television; listen to books on tape or soft music for brief intervals as long as **the symptoms do not increase**)

Please see reverse for instructions on returning to school, going to physician, and returning to play.

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IF A VISIT TO THE EMERGENCY ROOM OR PHYSICIAN WAS NECESSARY:

Any injury that requires a visit to a physician or emergency room requires a note to return to play.

If it has been determined that your son or daughter did suffer a concussion the student athlete must receive written clearance from a physician, trained in the evaluation and management of concussions that states the student athlete

is asymptomatic at rest and may begin the district's graduate return to play protocol.

Medical clearance that is inconsistent with the district's return to play policy will not be accepted and will be referred to the school/team physician.

RETURNING TO SCHOOL:

The concussed brain is affected in many functional aspects as a result of the injury, memory, attention span, concentration and speed of processing significantly impacts learning. Further, exposing the concussed student-athlete to the stimulating school environment may delay the resolution of symptoms needed for recovery.

Please remind your son/daughter to check with the school nurse prior to going to class the first day he/she returns to school as well as following up with the certified athletic trainer after school.

Teachers will be notified of the injury so that temporary accommodations can be made when the student returns to school or be able to observe any symptoms that may develop.

STUDENTS ARE NOT TO TAKE THE IMPACT TEST after a suspected head injury.

The baseline test is for pre participation. Students suspected of having a head injury will be use the impact post injury test once they have been evaluated by the athletic trainer or physician; no symptoms are present and instructed to do so.

Graduated return-to-play protocol:

- **Step 1:** Completion of a full day of normal cognitive activities (school day, studying for tests, watching practice, interacting with peers) **without reemergence of any signs or symptoms. If no return of symptoms, next day advance.**
- **Step 2:** Light Aerobic exercise, which includes walking, swimming, and stationary cycling, keeping the intensity below 70% maximum heart rate. No resistance training. The objective of this step is increased heart rate.
- **Step 3:** Sport-specific exercise including skating, and/or running: no head impact activities. The objective of this step is to add movement.
- **Step 4:** Non-contact training drills (e.g. passing drills). Student-athlete may initiate resistance training.
- **Step 5:** Following medical clearance (consultation between school health care personnel and student-athlete's physician), participation in normal training activities. The objective of this step is to restore confidence and assess functional skills by coaching and medical staff. **Students must have a practice day before they return to game activities.**
- **Step 6:** Return to play involving normal exertion or game activity.

If you have any questions or concerns please call or email me, contact information is below;

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