

THE NEED TO REST PHYSICALLY AND COGNITIVELY AFTER A CONCUSSION

If you want to maximize your child's recovery from concussion, double up on your R's. REDUCE and REST! Insist that your child rest, especially for the first few days post-concussion and throughout the recovery period. We recommend that they initially not do any video gaming, texting, computer work, and television until they are able to tolerate it. Absolutely NO DRIVING for the student until symptoms are gone.

- For the student with intense symptoms, a few days of rest may be needed immediately post injury. Once they are back at school, if they are still having mild symptoms they may attend half days if necessary; alternating morning and afternoon classes. The student may also rest in the nurse's office for a class period.
- Once your student is able to return to academic work we recommend that he/she do 30 minutes of academic work followed by a 30 minute rest period.
- The nurse or the guidance counselor will request temporary academic accommodations in order to reduce cognitive demands. The majority of students are able to continue in their studies with some temporary accommodations. The goal being to balance rest with academic work so that the student progresses as symptoms improve.
- Physical activity such as Physical Education (P.E.), sport activities, and strength/ cardiovascular conditioning must be avoided while recovering from a concussion.
- During this time period it would be helpful if you are in communication with your student's teachers via email.

Remember recovery is very individualized.

STEPS FOR RETURN TO PLAY AND/OR P.E. FOLLOWING A CONCUSSION

STEP 1		<ul style="list-style-type: none"> • No activity; complete physical and mental rest. • Once athlete is SYMPTOM FREE for 24 hours • GO TO STEP 2.
STEP 2	Light Aerobic Activity	Walking or stationary cycling < 70% max heart rate NO RESISTANCE TRAINING- If symptoms return go back to step 1
STEP 3	Sport specific exercise	*HOCKEY / LAX- Stick handling *FOOTBALL –Sideline throwing for quarterbacks *BASKETBALL / SOCCER- Ball handling–Add 1 set of low resistance training if able.
STEP 4	NON CONTACT Training drills	
STEP 5	FULL CONTACT practice	Regular practice with scrimmage / live drills. If this day falls on a GAME DAY the athlete CANNOT participate in the game.
STEP 6	RTP	GAME

With this stepwise progression, the student should continue to proceed to the next level if asymptomatic at the current level.

Generally, each step should take 24 hours so that a student would take approximately one week to proceed through the full rehabilitation protocol once they are asymptomatic at rest and with extensive exercise.

If any post-concussion symptoms occur while in the stepwise program, then the student should drop back to the *previous asymptomatic level* and try to progress again after a full 24-hour period of rest has passed.

HEAD INJURY FACT SHEET



ST. FRANCIS HIGH SCHOOL
COLLEGE PREPARATORY
2130 W. ROOSEVELT ROAD
WHEATON, IL 60187
WWW.SFHSNET.ORG

DEFINITION:

A concussion is any traumatically induced alteration in mental status caused by a bump, blow, or jolt to the head that may or may not involve a loss of consciousness.

- A concussion is a functional, not structural injury. Concussions are typically diagnosed by careful examination of the signs/symptoms of concussion at the time of injury and the resolution of symptoms afterwards.

While a CT scan or an MRI is often used to rule out more serious bleeding in the brain, it is not a diagnostic test for concussion. A “negative” scan does not mean that a concussion did not occur.

If there are signs and symptoms of a concussion then it is likely that the student sustained a concussion.

- *If your student seeks medical attention please provide the school with a doctor’s note*
- *Students in P.E. will follow the “Return to Play” guidelines on the back of the pamphlet unless otherwise directed by the physician.*
- *Have your student see the nurse immediately upon return to school and daily until concussion is resolved.*
- *In addition, all athletes are to see the athletic trainer daily after school.*
- *Sign a Release of Information Form so that the nurse/guidance counselor can talk to the doctor (download from the website)*
- *Students are encouraged to meet with counselor regularly to discuss status of make-up work.*

SIGNS AND SYMPTOMS

A sign is something that can be SEEN.

Symptoms are the way a student feels.

Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days after the injury.

SIGNS	SYMPTOMS
Appears dazed or stunned	Headache or pressure in the head
Confused or disoriented	Nausea or vomiting
Repeats same questions / comment	Dizziness
Vacant stare	Double or blurry vision
Balance problems	Sensitivity to light
Reactions are slow	Sensitivity to noise
Loses consciousness (even briefly)	Feels sluggish, hazy, foggy or groggy
Change in TYPICAL behavior or personality	Difficulty concentrating
Cannot recall events prior to / after injury	Drowsiness
	Changes in sleep patterns

SYMPTOMS AND RECOVERY

A doctor cannot predict the course of recovery at the time of the injury. The course of recovery depends 100% on the on-going monitoring, management and resolution of symptoms. Don’t be alarmed that there are symptoms, there are going to be symptoms.

- The goal is to watch for a steady improvement of all symptoms over time. The majority of concussions resolve well without complication.

All the experts in the area of concussion agree that while recovering from a concussion, the student is extremely vulnerable and at high risk for further injury should they hit their head again. Experts are also concerned that once a student sustains one concussion, they are at three to six times higher risk of sustaining another concussion, sometimes with less force and often with a more difficult recovery.

Nurse’s office: 630-668-5800 X 1146
 Guidance office: 630-668-5800 X 1142
 Athletic Trainers: 630-668-5800 X1211
 Fax number: 630-668-5835

Area Concussion Specialists:

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