

## South Park Baseball Association Concussion Policy

The standard of care for current medical practice and the law in most states requires that any athlete with a **suspected** concussion is ***immediately removed from play***.

- A concussion is a traumatic brain injury- ***there is no such thing as a minor brain injury***.
- A player does not have to be “knocked-out” to have a concussion- ***less than 10% of players actually lose consciousness***.
- A concussion can result from a blow to head, neck or body.
- The youth player’s brain is more susceptible to concussion.
- In addition, the concussion in a young athlete may be harder to diagnosis, takes longer to recover, is more likely to have a recurrence and can be associated with serious long-term effects.
- Treatment is individualized and it is impossible to predict when the athlete will be allowed to return to play- ***there is no standard timetable***.

A player with any symptoms or signs; disorientation; impaired memory, concentration, balance or recall has a concussion.

Remember these steps:

1. Remove immediately from play (training, practice or game)
2. Inform the player’s coach/parents
3. Refer the athlete to a qualified health-care professional
4. Initial treatment requires physical and cognitive rest
5. The athlete begins a graded exertion and schoolwork protocol.
6. Medical clearance is required for return to play

### **Diagnosis**

Players, coaches, parents and health care providers should be able to recognize the symptoms and signs of a concussion:

#### **Symptoms**

- Headache
- Nausea
- Poor balance
- Dizziness
- Double vision
- Blurred vision
- Poor concentration

- Impaired memory
- Light Sensitivity
- Noise Sensitivity
- Sluggish
- Foggy
- Groggy
- Confusion

### Signs

- Appears dazed or stunned
- Confused about assignment
- Moves clumsily
- Answers slowly
- Behavior or personality changes
- Unsure of score or opponent
- Can't recall events after the injury
- Can't recall events before the injury

### Management Protocol

1. If the player is unresponsive- call for help & dial 911
2. If the athlete is *not breathing*: start CPR
  - ✓ DO NOT move the athlete
  - ✓ DO NOT remove the helmet
  - ✓ DO NOT rush the evaluation
3. Assume a neck injury *until proven otherwise*
  - ✓ DO NOT have the athlete sit up until you have determined:
    - no neck pain
    - no pain, numbness or tingling
    - no midline neck tenderness
    - normal muscle strength
    - normal sensation to light touch
4. If the athlete is conscious & responsive without symptoms or signs of a neck injury...
  - help the player to the bench area
  - perform an evaluation
  - do not leave them alone
5. Evaluate the player on the bench:
  - Ask about concussion ***symptoms*** (How do you feel?)
  - Examine for ***signs***

- Verify **orientation** (What day is it?, What is the score?, Who are we playing?)
- Check **immediate memory** (Repeat a list of 5 words)
- Test **concentration** (List the months in reverse order)
- Test **balance** (have the players stand on both legs, one leg and one foot in front of the other with their eyes closed for 20 seconds)
- Check **delayed recall** (repeat the previous 5 words after 5-10 minutes)

6. A player with any symptoms or signs, disorientation, impaired memory, concentration, balance or recall has a concussion.

**“When in doubt, sit them out”**

- Remove immediately from play (training, practice or game)
- Inform the player’s coach/parents
- Refer the athlete to a qualified health-care professional
- Medical clearance is required for return to play

7. If any of the signs or symptoms listed below develop or worsen: go to the hospital emergency department or dial **911**.

- Severe throbbing headache
- Dizziness or loss of coordination
- Memory loss or confusion
- Ringing in the ears (tinnitus)
- Blurred or double vision
- Unequal pupil size
- No pupil reaction to light
- Nausea and/or vomiting
- Slurred speech
- Convulsions or tremors
- Sleepiness or grogginess
- Clear fluid running from the nose and/or ears
- Numbness or paralysis (partial or complete)
- Difficulty in being aroused

8. An athlete who is *symptomatic* after a concussion initially requires **physical** and **cognitive rest**.

- A concussed athlete should not participate in physical activity, return to school, play video games or text message if he or she is having symptoms at rest.
- Concussion symptoms & signs *evolve over time*- the severity of the injury and estimated time to return to play are unpredictable.

9. A qualified health care provider guides the athlete through a **Functional Return to School/Play protocol**.