When a concussion occurs:

Once an athlete has experienced any type of potential head injury initiate the following checklist:

1. ☐ Remove athlete from all activity and use the **Concussion Recognition Tool 5** (CRT5).

2. ☐ Activate the enclosed concussion protocol if concussion is suspected.
   - ☐ Start use of Concussion Symptoms Score Card.
   - ☐ Give Education Guides to student athlete to review.

3. ☐ Refer athlete for evaluation by a Medical Provider at Student Health Center:
   
   **1608 Avenue J, Huntsville Tx 77340**  **Phone: (936) 294-2228**

   The medical provider continues to monitor athlete until the athlete is fully reintegrated into school, symptom free, and cleared to resume sports at a competitive level.
   

5. ☐ Medical Provider recommends accommodations for school, if needed. Once the athlete is fully participating in school without symptoms,

6. Athlete must complete progressive steps of the Return to Play Release before given clearance for full activity

---

Athlete: ____________________________________________________________

Date____________________

Notes: _____________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________
When a concussion occurs:

Once an athlete has experienced any type of potential head injury initiate the following checklist:

1. □ Remove athlete from all activity and use the **Concussion Recognition Tool 5** (CRT5).

2. □ Activate the enclosed concussion protocol if concussion is suspected.
   - □ Start use of Concussion Symptoms Score Card.
   - □ Give Education Guides to student athlete to review.

3. □ Refer athlete for evaluation by a Medical Provider at Student Health Center:

   1608 Avenue J, Huntsville Tx 77340  Phone: (936) 294-2228

   The medical provider continues to monitor athlete until the athlete is fully reintegrated into school, symptom free, and cleared to resume sports at a competitive level.


5. □ Medical Provider recommends accommodations for school, if needed. Once the athlete is fully participating in school without symptoms,

6. Athlete must complete progressive steps of the Return to Play Release before given clearance for full activity

---

Athlete: ____________________________________________________________

Date__________________

Notes: ____________________________________________________________

_______________________________________________________________

_______________________________________________________________

_______________________________________________________________

_______________________________________________________________

_______________________________________________________________

_______________________________________________________________
Getting the athlete back in the game
A game plan for the education, recognition, and management of sports related head injuries.

A concussion is the most common form of head injury suffered by athletes. It is a form of traumatic brain injury that occurs when the brain is violently jarred back and forth or rotated inside the skull as a result of a blow to the head or body. This can “stun” the brain cells or even result in their death. You do not need to lose consciousness to suffer a concussion.

Any athlete in motion is at risk for a concussion. This may occur in any sport, to boys and girls alike. Symptoms may appear immediately or develop over several days. They may last a few days to several months and interfere with school-work and social life.

Utilize the Concussion Recognition Tool 5 (CRT5) to help identify concussion.
<table>
<thead>
<tr>
<th>Symptom Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>How do you feel now? Score the symptoms:</strong> Date &amp; Time: By:</td>
</tr>
<tr>
<td>none</td>
</tr>
<tr>
<td>0</td>
</tr>
<tr>
<td>1. Headache</td>
</tr>
<tr>
<td>2. &quot;Pressure in head&quot;</td>
</tr>
<tr>
<td>3. Neck pain</td>
</tr>
<tr>
<td>4. Nausea or vomiting</td>
</tr>
<tr>
<td>5. Dizziness</td>
</tr>
<tr>
<td>6. Blurred vision</td>
</tr>
<tr>
<td>7. Balance problems</td>
</tr>
<tr>
<td>8. Sensitivity (light)</td>
</tr>
<tr>
<td>9. Sensitivity (noise)</td>
</tr>
<tr>
<td>10. Feeling slowed down</td>
</tr>
<tr>
<td>11. Feeling like in a fog</td>
</tr>
<tr>
<td>12. Don't feel right</td>
</tr>
<tr>
<td>13. Difficulty concentrating</td>
</tr>
<tr>
<td>14. Difficulty remembering</td>
</tr>
<tr>
<td>15. Fatigue or low energy</td>
</tr>
<tr>
<td>16. Confusion</td>
</tr>
<tr>
<td>17. Drowsiness</td>
</tr>
<tr>
<td>18. More emotional</td>
</tr>
<tr>
<td>19. Irritability</td>
</tr>
<tr>
<td>20. Sadness</td>
</tr>
<tr>
<td>21. Nervous or Anxious</td>
</tr>
<tr>
<td>22. Trouble falling asleep</td>
</tr>
</tbody>
</table>

Take this score card with you to your medical provider.

When can the student-athlete return to school? It will depend on the individual. Every student’s injury and recovery is unique and requires careful observation from parents and doctors. Promote recovery and prevent ongoing symptoms by following a Return to Learn plan like the one below. The physician will customize a plan to allow recovery at student’s own pace.

Note: A request for accommodations will require an accompanying letter from the ordering provider that is signed by the provider and has the clinic’s official letterhead.

<table>
<thead>
<tr>
<th>Student May Not Attend School at This Time.</th>
<th>Partial Schedule &amp; Accommodations.</th>
<th>Full Schedule &amp; Accommodations.</th>
<th>Normal Classroom.</th>
</tr>
</thead>
</table>
| Student may not attend class and should not work on homework assignments, reading projects, etc. This includes no extracurricular activities, such as all athletic activity, weightlifting, gym class, band, music, debate, etc. Continue to limit at-home activities that can worsen symptoms, such as loud music, television, computer screen time, texting, etc. | Student may attend school with a partial class schedule. Work with the student to help determine the most appropriate schedule. Classes should be prioritized and not worsen symptoms. Special accommodations may be required to limit symptoms (e.g. longer time period to take exams, postponing research papers, quiet studying in the library, etc.) Homework should be limited during this time. Participation in all athletic activity, weightlifting, gym class, and extracurricular activities is still fully restricted. | Student may participate in a normal classroom schedule, but will still require some accommodations, depending on their current symptoms. Continue to work with the student to identify any specific classroom activities that could be worsening symptoms. Student may be able to participate in band and music class if this does not worsen concussions symptoms. All athletic activity, weightlifting and gym class is still not allowed, but the student can start to participate in non-athletic extracurricular activities as tolerated. Classroom options while student has not achieved 100% cognitive recovery could include:  
- Offer a tutor, reader, or a note taker to assist with performance in the classroom.  
- Give an extended period of time to complete quizzes, tests, papers, etc.  
- Allow classroom attendance but postpone tests, quizzes, papers, etc. until cognitive function has improved.  
- Offer accommodations to minimize noisy/stimulating environments or allow them preferential seating in the classroom. Gradually increase school participation and independence as tolerated by the student. Goal is to achieve full return to school without accommodations. |
| Student is NOT allowed to participate in any physical activity, such as weights, jogging, drills, practice or games. The athlete is NOT cleared to start “Warm-up to Play” but may fully participate in normal classroom activities. Work with the student to ensure a classroom “catch-up” plan is in place, if necessary. |

Once participation in the classroom is normal and all concussion symptoms have resolved, physician should use the SCAT5 Graduated Return to Sport Strategy.

Note: Authorization to start Warm-up to Play should be documented on the Return to Play form.

Concussion symptoms may develop within days after a head injury. The patient should continue to be observed for any new symptoms.
Step 1. Light aerobic exercise, including walking or riding an exercise bike. No weightlifting. (increase heart rate)

Step 2. Running in a gym or on the field. No helmet or equipment should be used. (add movement)

Step 3. Non-contact training drills and full equipment. Start light resistance training or light weight training. (add coordination and cognitive load)

Step 4. Full contact training under the supervision of the coach/athletic trainer. (restore confidence and assess functional skills)

Return to Play

Student may fully Return to Play if all the above steps were successfully completed without return of any symptoms. This includes full participation in live competition or practice. Student should return to medical provider 1 week after starting warm up to play for evaluation.

Physician Full Release to Play (Above Steps Completed. No Residual Symptoms or Complications)

Physician Signature ___________________________ Date ________________

An athlete’s return to his/her sport will be a step-by-step process. Once the athlete has no symptoms or signs of concussion and is doing well in school and daily activities, a physician (MD/DO) will sign this form allowing the athlete to start progression back to play.

Athlete should spend a minimum of 30 minutes on each step, remain completely symptom-free, and must wait 24 hours before progressing to the next step. STOP IMMEDIATELY if there is any return of signs/symptoms and report this right away. Go back to rest for the day, refrain from activities including bike riding, skateboarding, playful wrestling, etc. The following day — only if symptom free— athlete may resume progression at the step that was previously symptom-free. If symptoms persist for more than a day or worsen, please notify the physician.
A concussion is the most common form of head injury suffered by athletes. It is a form of traumatic brain injury that occurs when the brain is violently jarred back and forth or rotated inside the skull as a result of a blow to the head or body. This can “stun” the brain cells or even result in their death. You do not need to lose consciousness to suffer a concussion. Any athlete in motion is at risk for a concussion. This may occur in any sport, to boys and girls alike. Symptoms may appear immediately or develop over several days. They may last a few days to several months and interfere with schoolwork and social life.

**Definition >**

**How do I know if I have a concussion?**

If you have any of the signs or symptoms listed under the “Recognition” section of this guide, then you may have a concussion. Don’t ever play through a concussion because it’s not worth the risk to your health and your life.

**What do I do if I think I might have a concussion?**

Stop playing right away! Don’t ignore a bump, blow or jolt to your head. Tell a referee, coach or athletic trainer about your symptoms. You should be immediately removed from practice or the game to avoid further injury. If symptoms develop at home or school, immediately tell a parent/guardian, teacher or coach.

**What happens when I report a possible concussion?**

An athletic trainer, coach, EMT/paramedic or physician will evaluate you as soon as you report your symptoms. If there are not qualified health care professionals available at your practice or game, you need to call your doctor or go to the Emergency Department as soon as possible. If you do have a concussion, you will not be able to play your sport until cleared by a physician.

**What do I need to do while I continue to have symptoms of a concussion?**

- Rest as much as possible. You may need frequent naps during the first few days after your injury.
- Do not use alcohol or other mind-altering drugs.
- Avoid places with bright lights or loud noise and activities that stimulate your brain because mental rest is vital to your recovery. Eliminate or reduce watching television or movies, texting, reading, playing video games and browsing on a computer.
- Do not perform any physical activities, such as weightlifting, riding a bike, jogging, practice drills or other types of exercise.
- Stay home or only attend partial days if schoolwork makes your symptoms worse. Talk to your teachers. You may require more time to complete assignments and take tests, need written instructions for homework or need information repeated. Visit the school nurse if you have headaches.
- Do not drive because the symptoms from a concussion can slow your reaction times and lead to an accident.
- The more aggressively you rest your brain, the sooner you should heal from a concussion.

**How often do I need to see the doctor?**

This will vary depending on the situation. If your symptoms are severe, the physician may want to see you on a daily basis for a while. A physician must sign a written clearance form that says you are allowed to participate in full contact practice again.

---

**Quick Facts >**

1. ALWAYS remove athletes immediately after suspecting a concussion. Do NOT allow return to play the same day with a concussion.
2. Athletes do NOT have to be knocked out to have a concussion. 90% of concussions occur without a loss of consciousness.
3. CT scans don’t diagnose concussions. People with concussions usually have a normal CT scan.
4. It is OK to let someone fall asleep after being hit in the head. With careful monitoring, rest and sleep will be helpful.
5. “Warm Up for Return” is a graded process that requires a minimum of six days.
6. 9 out of 10 athletes will be back to normal within two weeks. They may miss a few games.
7. Athletes who return to full contact too early risk Second Impact Syndrome, a rare but devastating brain injury that may result in death.
8. Concussions can affect driving, school work, sleep, emotions, relationships and self worth.
9. The “game plan” is not just about returning an athlete to their sport; it is about returning the person back to their life.

**Recognition >**

**SIGNS OBSERVED BY OTHERS**
- Appears dazed or stunned
- Is confused about assignment
- Forgets plays
- Is unsure of game, score or opponent
- Moves clumsily or has slurred speech
- Answers questions slowly
- Loses consciousness
- Shows behavior or personality changes
- Cannot recall events prior to hit
- Cannot recall events after hit

**SYMPTOMS REPORTED BY YOU**
- Headache
- Nausea or vomiting
- Balance problems or dizziness
- Double or fuzzy vision
- Sensitivity to light or noise
- Feeling sluggish or drowsy
- Feeling foggy or groggy
- Concentration or memory problems
- Confusion
You must be seen by a physician (MD/DO) during the warm up progression to be released for return to competition or practice.

 SCORE Card >

The first person that evaluates you will fill out a Concussion Symptoms Score Card. If this first person is not your physician who you will visit during recovery, make sure you get a copy of the SCORE Card to take to your physician appointment. This will contain important information that your physician will use to monitor your progression and return you to the game as soon as possible.

 Return to Play >

When can I start playing my sport again?
Only consider starting the Warm-up to Play progression once you are fully participating in school again without any symptoms. Returning to your sport will be a step-by-step process. Once you have no symptoms or signs of concussion, a medical authorization will start your Warm-up to Play. This process should be monitored by an athletic trainer, coach, designated school official, or medical provider. At any time that you do not feel quite right, tell your doctor, parent, coach or athletic trainer immediately.

 After I am symptom-free, what is the progression back to play?
Think of this progression as a warm up for return to your sport. Taking at least 24 hours for each step before moving on to the next step is recommended.
If any symptoms recur, report this right away and stop and rest for the day. You must be completely symptom-free before starting the progression again.

 Step 1. Light aerobic exercise, including walking or riding an exercise bike. No weightlifting. (5-10 min only on first day)
 Step 2. Running in a gym or on the field. No helmet or equipment should be used.
 Step 3. Non-contact training drills and full equipment. Start light resistance training or light weight training.
 Step 4. Full contact training under supervision of coach/athletic trainer.
 Step 5. Return to competition or game play.

 Concerns >

What are possible complications from a concussion?
While 90% of athletes are back to their baseline within 7-10 days, there are 10% of athletes who will experience prolonged symptoms or other complications.
This is called Post-Concussive Syndrome and occurs when symptoms from a concussion are prolonged. Difficulty with concentration, memory and persistent headaches are common symptoms.
Talk with the physician if symptoms last longer than a couple of weeks. A referral to a specialist for further evaluation and treatment may be required.

What might happen if the athlete returns to his/her sport too soon?
If an athlete receives another blow while still recovering from a first concussion, he/she could develop Second Impact Syndrome. This syndrome can cause serious life-long health difficulties or, in rare situations, even result in death.

This possibility is a major reason why health care professionals are concerned about carefully treating any concussion. While the brain is still healing, it may not be able to compensate and protect itself from a new injury.

Better to miss a game or two than the whole season or your whole life!