



Concussion prevention and management & return to play policy

A concussion is a serious event, but you can recover fully from such an injury if the brain is given enough time to rest and recuperate. Returning to normal activities, including sport participation, is a step-wise process that requires patience, attention, and caution, (*Source: Think First – Return to Play Guideline, 2012*).

Medical clearance is required before athlete returns to participate in the activity and/or a match

- If during a practice, competition, training, camp or clinic an athlete, sustains a direct or indirect force to the head and subsequently exhibits signs, symptoms (see below for list of possible symptoms) and/or functional changes consistent with a concussion, the athlete should be immediately removed from play and receive immediate medical assessment. Coaches are never to make a determination on their own.
- Following removal from play, any person suspected to have sustained a concussion is to be assessed by a medical doctor (or emergency physician) to determine the extent of the athlete's injury and to rule out further pathology.
- Individuals diagnosed with a concussion should rest until they are symptom-free and should then begin a step-wise symptom-limited program with stages of progression, only after they are without symptoms for a 24-hour period.

Possible Symptoms (as per Sport Concussion Assessment Tool 2 – SCAT2)

Presence of any of the following signs & symptoms may suggest a concussion.

-
- | | |
|-------------------------|----------------------------|
| • Loss of consciousness | • Feeling slowed down |
| • Seizure or convulsion | • Feeling like “in a fog” |
| • Amnesia | • “Don’t feel right” |
| • Headache | • Difficulty concentrating |
| • “Pressure in head” | • Difficulty remembering |
| • Neck Pain | • Fatigue or low energy |
| • Nausea or vomiting | • Confusion |
| • Dizziness | • Drowsiness |
| • Blurred vision | • More emotional |
| • Balance problems | • Irritability |
| • Sensitivity to light | • Sadness |
| • Sensitivity to noise | • Nervous or anxious |
-

Return to Play

As recommended by Think First Canada, there is a six (6) step process to evaluate readiness before an athlete can return to play. The steps are as follows:

Step 1: No activity, only complete rest.

Limit school, work and tasks requiring concentration. Refrain from physical activity until symptoms are gone. Once symptoms are gone, a physician, preferably one with experience managing concussions, should be consulted before beginning a step wise return to play process.

Step 2: Light aerobic exercise.

Activities such as walking or stationary cycling. The player should be supervised by someone who can help monitor for symptoms and signs. No resistance training or weight lifting. The duration and intensity of the aerobic exercise can be gradually increased over time if no symptoms or signs return during the exercise or the next day.

Symptoms? Return to rest until symptoms have resolved. If symptoms persist, consult a physician.

No symptoms? Proceed to Step 3 the next day.

Step 3: Sport specific activities.

Activities such as stationary passing, dribbling or shooting can begin at step 3. There should be no body contact or other jarring motions such as high speed stops.

Symptoms? Return to rest until symptoms have resolved. If symptoms persist, consult a physician.

No symptoms? Proceed to Step 4 the next day.

Step 4: Begin drills without body contact.

Symptoms? Return to rest until symptoms have resolved. If symptoms persist, consult a physician.

No symptoms? The time needed to progress from non-contact exercise will vary with the severity of the concussion and with the player. Proceed to Step 5 only after medical clearance.

Step 5: Begin drills with body contact.

Symptoms? Return to rest until symptoms have resolved. If symptoms persist, consult a physician.

No symptoms? Proceed to Step 6 the next day.

Step 6: Participate in the activity and/or play match