Concussions

Coach’s Meeting
Overview

- Caused by a **force** to the head that disrupts brain function
  - *Direct contact to the head is not necessary to disrupt brain function*

- Range from mild to severe

- **Rarely** causes loss of consciousness

- Causes a varied constellation of signs & symptoms

- Can occur in **ANY** sport, but do not have to be sport related
Signs, Symptoms, & Behaviors

• **SIGNS** -
  - Amnesia
  - Altered level of consciousness
  - Disorientation
  - Incoherent speech
  - Slowed response / Difficulty responding to questions
  - Vacant stare
  - Behavior / Emotional changes
  - Visual disturbances
  - Balance disturbances
  - Abnormal pupil response

• **SYMPTOMS** -
  - Headache
  - Dizziness
  - Nausea / Vomiting
  - Drowsiness
  - Unable to focus / concentrate
  - Feeling hazy, foggy
  - Blurred vision
  - Confusion
  - Not “feeling right”
  - Light / Noise sensitivity
Key Points

• Symptoms can occur immediately, or can occur hours or days after the initial injury

• Symptoms can worsen or reappear with physical activity or mental activities

• Symptoms can last longer and be more severe with repetitive concussions

• No two student-athletes are the same / No two concussions are the same
Key Points

• Any student-athlete that exhibits signs, symptoms, or behaviors consistent with a concussive injury must be evaluated by U-M Athletic Medicine Personnel

• If the student-athlete is diagnosed with a concussion, he / she will be withheld from participation for the remainder of the day.
Concussion Management

• Baseline Testing-
  – Education
  – Detailed injury history & comprehensive pre-participation physical examination, including a neurologic assessment
  – Michigan Standardized Assessment of Concussion (MSAC) \{high risk sports\}
  – Computerized neurocognitive assessment \{high risk sports\}

• Individualized, step-wise concussion management & return-to-play progression

• Every SA has the same access to care-
  – Athletic Trainer \(\rightarrow\) Primary Care Sports Medicine Physician \(\rightarrow\) Team Neurologist
Return-to-Play

Student-athletes diagnosed with a concussion will be removed from participation for the remainder of the day of injury and will not be considered for return to participation until the student-athlete has been evaluated by a University of Michigan Team Physician and has successfully progressed through an individualize graded exercise & head injury progression.
Academics

• When a SA is diagnosed with a concussion, the Athletic Trainer will notify the SA’s Academic Advisor

• Any restrictions and/or modifications in a SA’s academic program will be prescribed by a U-M Team Physician in consultation with ASP personnel
Coach’s Role

• Support for the SA-
  – Consistent message regarding seriousness of injury & recovery process
  – Support rest / sleep
  – Encourage hydration & good nutrition practices

• Support for the medical team-
  – Consistent message to the SA
  – Another pair of “eyes & ears”

• Communication-
  – Daily communication with the medical team
  – Positive & supportive communication with the SA
  – Liability potential for comments made
QUESTIONS
THANK YOU

“Leaders and Best in Concussion Management”
CONCUSSION
A FACT SHEET FOR COACHES

THE FACTS
• A concussion is a brain injury.
• All concussions are serious.
• Concussions can occur without loss of consciousness or other obvious signs.
• Concussions can occur from blows to the body as well as to the head.
• Concussions can occur in any sport.
• Recognition and proper response to concussions when they first occur can help prevent further injury or even death.
• Athletes may not report their symptoms for fear of losing playing time.
• Athletes can still get a concussion even if they are wearing a helmet.
• Data from the NCAA Injury Surveillance System suggests that concussions represent 5 to 18 percent of all reported injuries, depending on the sport.

WHAT IS A CONCUSSION?
A concussion is a brain injury that may be caused by a blow to the head, face, neck or elsewhere on the body with an “impulsive” force transmitted to the head. Concussions can also result from hitting a hard surface such as the ground, ice or floor, from players colliding with each other or being hit by a piece of equipment such as a bat, lacrosse stick or field hockey ball.

RECOGNIZING A POSSIBLE CONCUSSION
To help recognize a concussion, watch for the following two events among your student-athletes during both games and practices:
1. A forceful blow to the head or body that results in rapid movement of the head;
   -AND-
2. Any change in the student-athlete’s behavior, thinking or physical functioning (see signs and symptoms).

SIGNS AND SYMPTOMS

Signs Observed By Coaching Staff
• Appears dazed or stunned.
• Is confused about assignment or position.
• Forgets plays.
• Is unsure of game, score or opponent.
• Moves clumsily.
• Answers questions slowly.
• Loses consciousness (even briefly).
• Shows behavior or personality changes.
• Can’t recall events before hit or fall.
• Can’t recall events after hit or fall.

Symptoms Reported By Student-Athlete
• Headache or “pressure” in head.
• Nausea or vomiting.
• Balance problems or dizziness.
• Double or blurry vision.
• Sensitivity to light.
• Sensitivity to noise.
• Feeling sluggish, hazy, foggy or groggy.
• Concentration or memory problems.
• Confusion.
• Does not “feel right.”
PREVENTION AND PREPARATION

As a coach, you play a key role in preventing concussions and responding to them properly when they occur. Here are some steps you can take to ensure the best outcome for your student-athletes:

- Educate student-athletes and coaching staff about concussion. Explain your concerns about concussion and your expectations of safe play to student-athletes, athletics staff and assistant coaches. Create an environment that supports reporting, access to proper evaluation and conservative return-to-play.
  - Review and practice your emergency action plan for your facility.
  - Know when you will have sideline medical care and when you will not, both at home and away.
  - Emphasize that protective equipment should fit properly, be well maintained, and be worn consistently and correctly.
  - Review the Concussion Fact Sheet for Student-Athletes with your team to help them recognize the signs of a concussion.
  - Review with your athletics staff the NCAA Sports Medicine Handbook guideline: Concussion or Mild Traumatic Brain Injury (mTBI) in the Athlete.
- Insist that safety comes first.
  - Teach student-athletes safe-play techniques and encourage them to follow the rules of play.
  - Encourage student-athletes to practice good sportsmanship at all times.
  - Encourage student-athletes to immediately report symptoms of concussion.
- Prevent long-term problems. A repeat concussion that occurs before the brain recovers from the previous one (hours, days or weeks) can slow recovery or increase the likelihood of having long-term problems. In rare cases, repeat concussions can result in brain swelling, permanent brain damage and even death.

IF YOU THINK YOUR STUDENT-ATHLETE HAS SUSTAINED A CONCUSSION:

Take him/her out of play immediately and allow adequate time for evaluation by a health care professional experienced in evaluating for concussion.

An athlete who exhibits signs, symptoms or behaviors consistent with a concussion, either at rest or during exertion, should be removed immediately from practice or competition and should not return to play until cleared by an appropriate health care professional. Sports have injury timeouts and player substitutions so that student-athletes can get checked out.

IF A CONCUSSION IS SUSPECTED:

1. Remove the student-athlete from play. Look for the signs and symptoms of concussion if your student-athlete has experienced a blow to the head. Do not allow the student-athlete to just “shake it off.” Each individual athlete will respond to concussions differently.

2. Ensure that the student-athlete is evaluated right away by an appropriate health care professional. Do not try to judge the severity of the injury yourself. Immediately refer the student-athlete to the appropriate athletics medical staff, such as a certified athletic trainer, team physician or health care professional experienced in concussion evaluation and management.

3. Allow the student-athlete to return to play only with permission from a health care professional with experience in evaluating for concussion. Allow athletics medical staff to rely on their clinical skills and protocols in evaluating the athlete to establish the appropriate time to return to play. A return-to-play progression should occur in an individualized, step-wise fashion with gradual increments in physical exertion and risk of contact.

4. Develop a game plan. Student-athletes should not return to play until all symptoms have resolved, both at rest and during exertion. Many times, that means they will be out for the remainder of that day. In fact, as concussion management continues to evolve with new science, the care is becoming more conservative and return-to-play time frames are getting longer. Coaches should have a game plan that accounts for this change.

IT’S BETTER THEY MISS ONE GAME THAN THE WHOLE SEASON.
WHEN IN DOUBT, SIT THEM OUT.

For more information and resources, visit www.NCAA.org/health-safety and www.CDC.gov/Concussion.

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Big Ten Coaches Concussion Acknowledgement Form

I, _________________________________, acknowledge that as a member of the University of Michigan Department of Intercollegiate Athletics, I accept responsibility for supporting our athletic department’s policy on concussion management.

I understand that my student-athletes, through participation in sport and/or non-sport related incidences, may suffer a head injury and/or concussion. I also understand the importance of the student-athlete reporting any symptoms of a head injury / concussion to Athletic Medicine personnel. I accept the responsibility for reporting any signs, symptoms, or behaviors consistent with a concussive injury that I may witness.

I understand and acknowledge that the determination of whether to allow a student-athlete to return to participation following a head injury / concussion is within the sole discretion of a University of Michigan Team Physician.

By signing below, I acknowledge that the University of Michigan Department of Intercollegiate Athletics has provided me with educational materials on concussion and has given me an opportunity to ask questions about areas and issues that are not clear to me on this issue.

I have read the above and agree that the statements are accurate.

_________________________________________  ________________
Signature                                   Date

______________________________
Sport