



William Penn Charter School Family Concussion Information Sheet

A concussion or mild traumatic brain injury (mTBI) is a brain injury that results in a temporary disruption of normal brain function. A concussion is a metabolic injury affecting the brain chemistry, it is not a structural injury. It CANNOT be detected on CT scan or MRI. This injury is often the result of a direct blow to the head or body, that causes a quick or violent shaking of the brain.

| Possible signs you may observe if your child sustains a concussion: | |
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| Disorientation Change in mental status Dazed appearance Slow/slurred speech | Balance problems Abnormal or inappropriate emotions Amnesia (memory loss) |

| Possible symptoms your child may complain of following a concussion: | |
|--|---|
| Headache Dizziness Excessive Tiredness/ Fatigue Doubled or Blurry Vision Foggy Feeling | Light Headed Ringing in Ears Sensitivity to noise and/or light Difficulty Sleeping Difficulty Concentrating |

Although less common, bleeding in the brain can occur with some head injuries. Symptoms can include: Loss of consciousness, mental status deterioration, slurred speech, eyes rolling in the back of head, and an increase in unbearable headache raise the concern for a bleeding injury. If these occur, prompt evaluation to an emergency room is necessary.

What can I do if I suspect my child has sustained a concussion?

First, remove your child from play. Then, make sure to notify a healthcare professional, athletic trainer or school nurse, that you suspect a concussion and allow them to evaluate your child. If your child is diagnosed with a concussion they will not be allowed to return to play, and an individualized care plan will be set into place. Cognitive rest is the first and most crucial part of the recovery process.

It is okay to:

Keep your diet as normal as tolerated.
GO TO SLEEP. Rest as much as possible
Limit electronic use

There is no need to:

-Check pupils/eyes with flashlight
-Wake up every hour
-Obtain imaging.

What is Second Impact Syndrome?

Second Impact Syndrome occurs when another impact to the brain occurs before full recovery. If you receive a second blow to the head before the symptoms of your initial concussion have cleared, the consequences could be deadly.

To prevent second impact syndrome, do not return to sports until symptoms have completely resolved, you have progressed through the appropriate return to play guidelines, and you have been cleared by a physician.

Return to Learn

The first 24 hours after a concussion is considered a critical healing phase for the brain, since concussions are considered a metabolic “mismatch” in the brain neurons. The brain needs rest at this time, and the “cognitive rest” guidelines are the prescribed treatment.

When a student’s symptoms have subsided, or the student has remained on cognitive rest for a week, the student will begin gradually attending school as symptoms allow. The return to learn process is monitored closely by the school nurses, divisional learning specialists, and the student’s advisors.

When can my child return to school?

Each child’s injury is unique and requires careful observation from both parents and your concussion management team. You can promote recovery and prevent ongoing symptoms by following a “return to learn” plan. Academics and school attendance are the first priority. A return to sports is initiated once the child is fully tolerating school and an academic make-up plan is in place. Although recovery times can vary, the majority of students will remain at home for no longer than one week.

Below is an example of a return-to-learn program:

Step 1: Home- Total Rest

- After a confirmed concussion, your child should remain at home on the “cognitive rest” guidelines until the symptoms subside or do not increase with light cognitive exertion.
- Cognitive rest = No homework, no reading, no screen time (including computer/video games), no texting, no noisy environments

Step 2: Home: Light Cognitive Activity

- Once your child’s symptoms have significantly improved, your child may resume some light cognitive activities that do not cause symptoms to get worse.
- Initially, your child may only tolerate 5-15 minutes of light cognitive work, such as reading. The time of cognitive activity is increased as long as symptoms do not worsen significantly.

Step 3: Half Day of School with Accommodations

- Student reports directly to the Health Office (D. Foley) for evaluation and management plan.
- Academic accommodations in place to ease transition to school as facilitated by divisional learning resource specialist and D. Foley.
- Missed work is NOT expected to be made up immediately upon return to school.
- Student remains at school unless a significant escalation of symptoms occurs.
- Student may take breaks or rest in the health office as needed throughout the day for minor elevation of symptoms.

Step 4: Full Day School with Accommodations

- Symptoms continue to be monitored during school, students may take rest breaks as necessary
- Students may be initially excused from band/chorus and cafeteria as advised by CMT.
- No physical education, intramurals or athletic participation until the Return-To-Play protocol completed and cleared by physician.

Step 5: Return-To-Play (RTP)

- The RTP protocol is facilitated by the athletic trainers once the student tolerates a full symptom-free day of school and has progressed forward in the academic make-up plan.

Return to Play Program

The RTP protocol is facilitated by the athletic trainers once the student tolerates a full symptom-free day of school and has progressed forward in the academic make-up plan. Students are required by PA state law to be progressed through a sport specific exercise program. This program is a 5 step progression.

- Day 1: Light aerobic activity, such as a light stationary bike ride
- Day 2: Hard aerobic activity, such as a thirty minute interval bike workout
- Day 3: Full body workout, weight room activities or body weight exercises
- Day 4: Non-contact practice and conditioning exercises
- Day 5: Full contact practice If a student suffers concussion symptoms during any of the steps of the return to play progression that step is discontinued and tried the next day, pending resolution of symptoms.

There must be at least 24 hours between each step. If symptoms arise during exercise, the student will repeat that stage the following day. Because of schedule conflicts and possible symptoms provocation, it is normal for the 5 steps to take more than 5 days. Under PA state law, students must be cleared for full sport participation by an appropriate medical professional.

Frequently Asked Questions

Q: Is there any way to prevent a concussion?

A: Nothing can prevent a concussion. Helmets were designed to prevent skull fractures and catastrophic head injuries. Mouth guards do not lower the risk of concussions either.

Q: Does my child need an Xray, MRI, or other advanced imaging if they are diagnosed with a concussion:

A: No, concussions affect brain function not structure. A concussion will not show up on an Xray, MRI, or other imaging.

Q: My child did not get hit in the head. Could they still have a concussion?

A: Yes, a concussion can result from body movement that causes the head to snap forward and back quickly such as a whiplash injury.

Q: Is a concussion always obvious right away?

A: Most of the time signs/symptoms emerge at the time of the injury. However, it's always possible symptoms won't emerge until later, thus it is very important to monitor your child's status over time. If symptoms don't appear until later, it is important to seek out further medical attention from your pediatrician.

Q: Can my child drive after being diagnosed with a concussion?

A: Most sports medicine physicians do not recommend driving while recovering from a concussion. Driving is a complex process that can be affected by impairments seen while recovering from a concussion.

Q: When will my child be allowed to return to sport?

A: Every child who suffers a concussion must complete a graded 5 day return to play program once they are completely symptom free. This program has to be monitored by an athletic trainer.

Each day increases in exercise intensity and duration. If the athlete reports any symptoms while completing a day of the program, the athlete must rest for 24 hours then they repeat that day. A student can not complete more than 1 day at a time.

Contacts

If you have any questions regarding your child's concussion care please reach out to:

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