



Concussion Information Sheet

A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, **all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly.** In other words, even a “ding” or a bump on the head can be serious. You can’t see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

Symptoms may include one or more of the following:

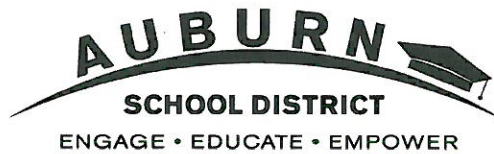
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|---|--|
| ☐ Headaches | ☐ Amnesia |
| ☐ “Pressure in head” | ☐ “Don’t feel right” |
| ☐ Nausea or vomiting | ☐ Fatigue or low energy |
| ☐ Neck pain | ☐ Sadness |
| ☐ Balance problems or dizziness | ☐ Nervousness or anxiety |
| ☐ Blurred, double, or fuzzy vision | ☐ Irritability |
| ☐ Sensitivity to light or noise | ☐ More emotional |
| ☐ Feeling sluggish or slowed down | ☐ Confusion |
| ☐ Feeling foggy or groggy | ☐ Concentration or memory problems
(forgetting game plays) |
| ☐ Drowsiness | ☐ Repeating the same question/comment |
| ☐ Change in sleep patterns | |

Signs observed by teammates, parents and coaches include:

- | | |
|--|--|
| ☐ Appears dazed | ☐ Slurred speech |
| ☐ Vacant facial expression | ☐ Shows behavior or personality changes |
| ☐ Confused about assignment | ☐ Can’t recall events prior to hit |
| ☐ Forgets plays | ☐ Can’t recall events after hit |
| ☐ Is unsure of game, score, or opponent | ☐ Seizures or convulsions |
| ☐ Moves clumsily or displays incoordination | ☐ Any change in typical behavior or personality |
| ☐ Answers questions slowly | ☐ Loses consciousness |

What can happen if my child keeps on playing with a concussion or returns too soon?

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athlete will often under report symptoms of injuries. And concussions are no different. As a result, education of administrators, coaches, parents and students is the key for student-athlete’s safety.



Return to Play after a Concussion

If your child does get a concussion, they will not be able to return to full participation for at least a week. There may be instances in which your child's healthcare provider determines that more time for recovery is needed. Once symptoms have returned to baseline levels, a Return to Play protocol will begin. There must be at least 24 hours in between each step and each step needs to be supervised by a healthcare provider.

The basic Return to Play progression is:

- Day 1: 24 hours with no concussion symptoms (must include a day of school)
- Day 2: Light aerobic activity only to increase the heart rate (5-10 minutes of light jog or exercise bike) (no weight lifting)
- Day 3: Sport-specific activity
- Day 4: Non-contact training drills
- Day 5: Full contact practice
- Day 6: Normal game play/competition"

If you think your child has suffered a concussion

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. The new "Zackery Lystedt Law" in Washington now requires the consistent and uniform implementation of long and well-established return to play concussion guidelines that have been recommended for several years:

"a youth athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time"

and

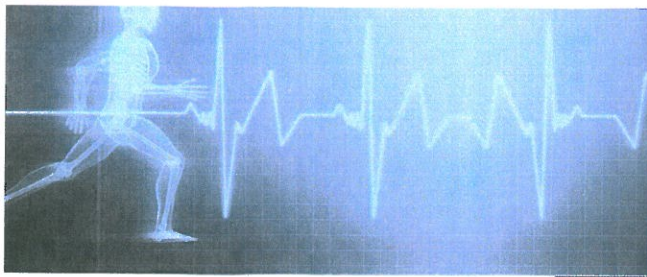
"...may not return to play until the athlete is evaluated by a licensed health care provider trained in the evaluation and management of concussion and received written clearance to return to play from that health care provider".

You should also inform your child's coach if you think that your child may have a concussion. Remember it's better to miss one game than miss the whole season. And when in doubt, the athlete sits out.

For current and up-to-date information on concussions you can go to:

<http://www.cdc.gov/ConcussionInYouthSports/>

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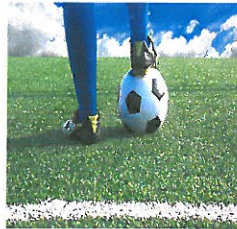
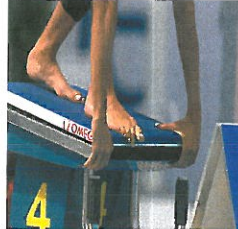
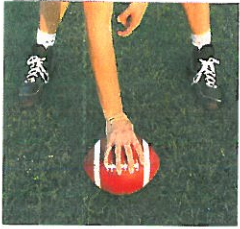


Sudden Cardiac Arrest

Information Sheet for

Student-Athletes, Coaches and Parents/Guardians

SSB 5083 ~ SCA Awareness Act



What is sudden cardiac arrest? Sudden Cardiac Arrest (SCA) is the sudden onset of an abnormal and lethal heart rhythm, causing the heart to stop beating and the individual to collapse. SCA is the leading cause of death in the U.S. afflicting over 300,000 individuals per year.

SCA is also the leading cause of sudden death in young athletes during sports

What causes sudden cardiac arrest? SCA in young athletes is usually caused by a structural or electrical disorder of the heart. Many of these conditions are inherited (genetic) and can develop as an adolescent or young adult. SCA is more likely during exercise or physical activity, placing student-athletes with undiagnosed heart conditions at greater risk. SCA also can occur from a direct blow to the chest by a firm projectile (baseball, softball, lacrosse ball, or hockey puck) or by chest contact from another player (called "commotio cordis").

While a heart condition may have no warning signs, some young athletes may have symptoms but neglect to tell an adult. If any of the following symptoms are present, a cardiac evaluation by a physician is recommended:

- Passing out during exercise
- Chest pain with exercise
- Excessive shortness of breath with exercise
- Palpitations (heart racing for no reason)
- Unexplained seizures
- A family member with early onset heart disease or sudden death from a heart condition before the age of 40

How to prevent and treat sudden cardiac arrest? Some heart conditions at risk for SCA can be detected by a thorough heart screening evaluation. However, all schools and teams should be prepared to respond to a cardiac emergency. Young athletes who suffer SCA are collapsed and unresponsive and may appear to have brief seizure-like activity or abnormal breathing (gasping). SCA can be effectively treated by immediate recognition, prompt CPR, and quick access to a defibrillator (AED). AEDs are safe, portable devices that read and analyze the heart rhythm and provide an electric shock (if necessary) to restore a normal heart rhythm.

Remember, to save a life: recognize SCA, call 9-1-1, begin CPR, and use an AED as soon as possible!



Cardiac 3-Minute Drill

1. RECOGNIZE

Sudden Cardiac Arrest

- Collapsed and unresponsive
- Abnormal breathing
- Seizure-like activity

2. CALL 9-1-1

- Call for help and for an AED

3. CPR

- Begin chest compressions
- Push hard/ push fast (100 per minute)

4. AED

- Use AED as soon as possible

5. CONTINUE CARE

- Continue CPR and AED until EMS arrives



**Be Prepared!
Every Second
Counts!**

UW Medicine
Center For Sports Cardiology
www.uwsportscardiology.org



**WASHINGTON INTERSCHOLASTIC
ACTIVITIES ASSOCIATION**



**SCA Awareness
Youth Heart Screening
CPR/AED in Schools**

www.nickoftimefoundation.org



Compliance Statement for HB 1824, **Youth Sports-Head Injury Policies** and SB 5083,

Sudden Cardiac Arrest Awareness.

(Must be attached to any building/facility use request form)

_____ requests the use of the Auburn School District facilities for the following dates:

This group, verifies all participants, coaches, athletes and their parent/guardian have complied with mandated policies for, the **Management of Concussions and Head Injuries** as prescribed by HB 1824, Section 2 and **Sudden Cardiac Arrest Awareness** as prescribed by SB 5083, Section 3.

Attached is a proof of insurance under an accident and liability policy issued by an insurance company authorized to do business in Washington State covering any injury or damage with at least \$50,000 due to bodily injury or death of one person and at least \$100,000 due to bodily injury or death of two or more persons.

Signed:

Representative of _____
(group renting facility)

_____ (Date)

*Note: Access to school facilities may not be granted until all requirements of this application are complete and approved by the school district and/or designee