Concussion guide for

PARENTS AND CAREGIVERS



What is a concussion?

A concussion is a brain injury that cannot be seen on routine X-rays, CT scans, or MRIs. It affects the way a child may think and remember things, and can cause a variety of symptoms.

What are the signs and symptoms of a concussion?

Your child does not need to be knocked out (lose consciousness) to have had a concussion. Your child might experience one or more of the following. When watching for signs or symptoms of a potential concussion, consider how your child typically feels and behaves.

Cognitive (thinking)	Physical	Emotional/ behavioural
 Does not know time, date, place, details about a recent activity Difficulty remembering things that happened before and after the injury Difficulty concentrating Not thinking clearly Feeling like "in a fog" 	 Headache or head pressure Dizziness Stomachache, nausea, vomiting Blank or vacant stare Blurred or fuzzy vision Sensitive to light or sound Sees stars, flashing lights Ringing in the ears Problems with balance or coordination Feels tired or no energy "Don't feel right" 	 Nervousness or anxiety Strange or inappropriate emotions (i.e., laughing, crying, getting mad easily) Slow to answer questions or follow directions Easily distracted Not participating well Changes in sleep patterns (sleeping more or less than usual)

It is more difficult for infants, toddlers and preschoolers to communicate how they are feeling. If you have a young child, you might notice any of the following: crying more than usual; unsteady walking; lack of interest in favourite toys; changes in nursing, eating or sleeping patterns; or loss of new skills, such as toilet training.

Get medical help immediately if your child has any "red flag" symptoms such as neck pain, repeated vomiting, growing confusion, seizures, and weakness or tingling in their arms or legs. These may be signs of a more serious injury.









What causes a concussion?

Any blow to the head, face or neck, or a blow to the body that causes a sudden jarring of the head, may cause a concussion (e.g., a ball to the head, colliding with another person).

What should I do if I suspect my child has a concussion?

In all suspected cases of concussion, your child should stop the activity right away. Continuing increases their risk of more severe, longer-lasting concussion symptoms, as well as increases their risk of other injury.

The Concussion Recognition Tool 6 (CRT6) can be used by anyone to help recognize the signs and symptoms of a possible concussion.

Your child should not be left alone and should be seen by a doctor as soon as possible.

If your child loses consciousness, call an ambulance to take them to the hospital right away. Do not move your child or remove any equipment such as a helmet.

Your child should not return to play the same day.

How long before my child gets better?

The signs and symptoms of a concussion often last for up to four weeks but may last longer. In some cases, children may take many weeks or months to heal. If your child has had a concussion before, they may take longer to heal.

If your child's symptoms are not improving or last longer than four weeks, they should be referred to a licensed healthcare professional who is an expert in the management of concussion.

How is concussion treated?

For the first 24 to 48 hours after the injury, your child can do activities of daily living, such as moving around the home, bathing, light walking and social

interactions at home. For the first 48 hours, they should spend less time with screens, such as phones, TVs and computers. Then, school and sport activities can be introduced and increased gradually.

As your child is returning to activities, their symptoms may feel a little worse. This is common and OK as long as it is mild and brief. "Brief" means their symptoms should settle back down within an hour. If activities make their symptoms worsen more than this, they should take a break and adapt activities.

Recovering from concussion is a process that takes patience. If your child goes back to activities before they are ready, it is likely to make their symptoms worse, and their recovery might take longer.

When should my child go to the doctor?

Anyone with a possible head injury should be seen by a doctor as soon as possible. If your child is diagnosed with a concussion, the doctor should schedule a follow-up visit within the next one to two weeks.

Take your child back to the doctor immediately if, after being told they have a concussion, they have worsening symptoms, such as:

- · being more confused
- headache that is getting worse
- vomiting more than twice
- not waking up
- having any trouble walking
- having a seizure
- strange behaviour

When can my child return to school?

A child with a concussion may miss one or more days of school. Generally, more than one week of complete absence from the school environment is not recommended. Medical clearance is not required to return to school.

Your child may find it hard to concentrate in class, get a worse headache or feel sick to their



stomach. They may need to begin with partial days at school and may need accommodations to help them tolerate their workload and the school environment. Examples include access to breaks, extra time to complete work, permission to wear sunglasses in class or a quiet place to eat lunch.

Each concussion is unique, so your child may progress at a different rate than others. They should not be rushed through their return to activities. At the same time, if your child can tolerate being at school, they should not be restricted from attending.

The Return-to-School Strategy provides information on the stages of returning to the classroom. Return to school should be completed before your child seeks medical clearance for full return to unrestricted sport activities.

When can my child return to sport and physical activity?

Return to sport and physical activity must follow a step-wise approach.

In this approach:

- Each stage is at least 24 hours.
- Your child moves on to the next stage when they can tolerate activities.
- If any of your child's symptoms worsen more than mildly and briefly, they should stop and try again the next day at the same step.

Step 1: Activities of daily living and relative rest (first 24 to 48 hours). Your child can start with daily living activities such as moving around the house, light walking and social interactions (e.g., talking with friends or family). Minimize screen time.

Step 2: Light to moderate effort aerobic exercise

2A: Start with light aerobic exercise such as walking or stationary cycling at a slow to medium pace. May begin light resistance training that does not result in more than mild and brief worsening of symptoms.

2B: Gradually increase the intensity of aerobic exercise to moderate effort, such as stationary cycling or walking at a brisk pace. Moderate effort means the activity may cause faster breathing and heart rate, but not enough to prevent you from being able to talk comfortably.

Step 3: Individual sport-specific activities, without risk of inadvertent head impact. Add sport-specific activities, such as running, skating or throwing drills, that can be done individually (away from other participants) in a low-risk environment. Activities should be supervised by a coach, trainer, teacher or parent/caregiver. Continue progressing at this step until symptom-free, even when exercising.

Medical clearance is required before step 4.

Step 4: Training drills and activities with no contact (e.g., no checking, no heading the ball). Progress to usual intensity exercise and add in more challenging drills such as passing drills. Participate in multi-athlete training (if applicable) and non-contact practices.

Step 5: Return to non-competitive activities, full-contact practice and physical education activities. Progress to typical physical activities, except for competitive gameplay. Restore confidence and skills.

Step 6: Return to sport and physical activity without restriction.

Your child should not return to activities with risk of contact until cleared by a doctor!

Returning too soon before full recovery from concussion puts your child at higher risk of sustaining another concussion, with symptoms that may be more severe and last longer.

Additional resources

Scan the QR code or visit parachute.ca/concussion

