

HEAD INJURY GUIDELINES

South Hunterdon Regional High School
Athletic Trainer: Amy Somma A.T.,C.

Observe athlete closely

Check your son or daughter frequently for any of the signs or symptoms listed below.

Seek immediate medical attention, if any of the following occur:

- Moderate, severe, prolonged or increasing headache
- Dizziness or poor balance
- Pupils of unequal size; pupils that do not constrict in response to light
- Nausea or vomiting
- Ringing in the ears
- Blurred or double vision
- Mental confusion, disorientation or memory loss
- Drowsiness or feeling “slowed down”
- Clear fluid or bleeding coming from ears or nose
- Moderate to severe neck and/or back pain
- Tingling, numbness in arms or legs
- Any deterioration in mental function or consciousness

This information is not intended to be, and should not be used as a substitute for appropriate medical care. If you have any doubt about the injury, consult a physician immediately.

Second Impact Syndrome (SIS)

What is Second Impact Syndrome?

SIS is a dangerous and potentially fatal condition that can occur if an athlete returns to activity before he/she has fully recovered from a concussion.

SIS can occur if a concussed athlete receives a second blow to the head, (even a relatively minor one) before the symptoms from the initial concussion have fully cleared.

Receiving a second blow to the head while concussed, can cause the brain to lose its ability to regulate blood flow properly. Without normal blood flow regulation, the blood vessels within the brain will engorge, which then places excessive pressure on the brain. This pressure can result in rapid respiratory failure, coma and even death.

Prevention of Second Impact Syndrome

After suffering a head injury, do not resume any physical activity until your symptoms have completely resolved and you have been cleared by your physician and/or your athletic trainer.

Important Phone Numbers:

Mrs.Somma: 609-548-3528 Mrs. Henricks: 609-397-2065 Phillips Barber: 609-397-3535

Concussion Q & A

What is a concussion?

A concussion is an immediate, temporary impairment of neural function as a result of a direct or indirect force to the brain. Also known as a “mild traumatic brain injury,” a concussion often results from a blow to the head, or a force from the head striking an object such as the ground or another athlete. A concussion can also be caused indirectly, by a strong blow to the body, which then translates a jarring motion to the head.

What are the signs and symptoms of a concussion?

Many people think that one has to lose consciousness (get knocked out) in order for a concussion to occur. This is not true. In fact, 90% of sports-related concussions do not involve a loss of consciousness. Common signs and symptoms include headache, disorientation, confusion, memory difficulties, blurred vision, nausea, vomiting, sensitivity to light or noise, difficulty concentrating, balance problems, feeling “slowed down,” drowsiness, simply “not feeling right” and in some cases, loss of consciousness.

Can my son or daughter take something for the headache?

Concussed athletes should avoid medications containing aspirin or nonsteroidal anti-inflammatory (ie: Advil, Motrin.) These medicines thin the blood and may potentially increase the risk of intracranial bleeding.

It is generally OK to take acetaminophen (Tylenol) sparingly, but check with your physician before giving any medication.

Do I need to wake my son or daughter every few hours during the night?

There is still some considerable debate about the necessity of nighttime wake-ups. Wake-ups disrupt the athlete’s normal sleep pattern. Disruption of sleep can lead to increased symptoms the next day, because of a combination of sleep deprivation and the concussion itself. However, you should wake your son or daughter to check for a decreased level of consciousness and persistent or worsening symptoms if: 1) the athlete experienced any loss of consciousness, 2) had a period of amnesia (memory loss or difficulty), or 3) if he/she still has symptoms at bedtime.

When can my son or daughter return to play?

Return to play decisions, are based on the concussion’s severity and the athlete’s history of prior head injuries. For most minor concussions, a one week symptom-free waiting period is usually necessary to make certain that the brain has fully recovered. Adolescents are generally managed more conservatively than college-aged and professional athletes, since they appear to be at a higher risk for Second Impact Syndrome. Those individuals who have had more than one concussion may need a longer recovery period. Concussed athletes should not return to any physical activity until they have been cleared to do so by the physician or athletic trainer.

References:

Guskiewicz et al. National Athletic Trainers’ Association Position Statement: Management of Sport-Related Concussion. Journal Athletic Training, 2004; 39(3) 280-297.

Pellman et al. Concussion in Professional Football: Recovery on NFL and High School Athletes Assessed by Computerized Neuropsychological Testing. Neurology, Vol. 58, No. 2 Feb. 2006.

