Concussion Awareness Standards

from USA Wrestling's National Coaches Education Program (NCEP)

Know the Facts about mTBI (mild Traumatic Brain Injury)

- Concussions occur when the head **or the body** are impacted causing the brain to contact the skull creating damage to the brain.
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- Helmets and headgear do not prevent cerebral concussions.
- 50% of high school athletes do not report concussions they sustain.



- Athletes suspected of sustaining a concussion should not be permitted to return to a practice, game or activity involving exertion activity on the same day. Return to participation protocol involves 5 steps and no more than 2 steps in one day.
- 80% of concussion cases will heal themselves with proper rest and limited or no activity for a period of 10 days. Limit bright light, TV and gaming.
- Pushing an athlete to "get back on the mat" after demonstrating concussion symptoms is not an acceptable standard practice for coaches or parents. Symptoms may include: headache, dizziness or seeing "stars", blurred vision, lost of memory or consciousness, nausea, fatigue, vomiting, slurred speech, sensitivity to light or sound, sleep disturbances and/or confusion.



FAQ (Frequently Asked Questions):

Why is it important to not permit my athlete to return to participation until written release from a licensed physician or an athletic trainer?

Research has identified that a person with a concussion who returns to activity without clearance from a medical professional, and is still experiencing symptoms of a concussion, are at a significantly higher risk of Second Impact Syndrome (SIS).

Second Impact Syndrome (SIS) typically occurs after an injured athlete receives and additional blow to the head or body causing swelling of the brain steam and eventual death.

I think my child may have suffered a concussion. What should I do?

The first thing is to remove him or her from any athletic or recreational activity until a medical professional familiar with the management of sport-related concussion can properly evaluate





them. The Academy of Pediatrics recommends that you call your child's doctor for advice for anything more than a light bump on the head. Avoid taking pain relievers such as aspirin or ibuprofen as they may increase the risk of bleeding. Consider acetaminophen (Tylenol, others).

How long after a concussion should my child be withheld from competition?

Typically, mild concussions will take approximately 10 days to recover in the younger athlete. In some cases, recovery is quicker while in others it may be longer. Providing access to medical professionals familiar with the management of sport-related brain injuries can ensure your child will receive competent and comprehensive care for their injury, while at the same time being return to participation in a safe and effective manner.



My child's schoolwork has been suffering after his/her concussion. What are some steps I can follow to ease their transition back to school?

Student-athletes typically experience functional school problems including short focus on lectures/classwork/homework, difficulty with retaining new information or accessing information they have learned when they need it. A candid discussion with school officials may allow for your child to be accommodated during the short-term recovery period.

I need to buy my child a helmet or headgear. Do you have any recommendations?

While unpublished data may suggest some helmets or headgear perform better than others, no prospective study with comprehensive injury surveillance has established any one helmet or headgear to be superior to another.

My child's coach said that mouth guards prevent concussion. Is this true?

To date, no mouth guard emerging on the market has provided objective peer-reviewed data to support this claim.

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References: The Matthew A. Gfeller Sport-Related Traumatic Brain Injury Research Center, <u>http://tbicenter.unc.edu/MAG_Center/faq.html</u>, 2207 Stallings-Evans Sports Medicine Center, Campus Box 8700, Chapel Hill, NC 27599-8700, Ph: 919.962.0409



