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Concussion Advice Sheet

What is a concussion?

A concussion is an **injury to the brain** caused by a direct or indirect blow to the head or caused by the head striking something else such as the ground or a bony hip. A concussion can occur **whether or not a person is “knocked out.”** A concussion typically causes the rapid onset of short lived impairment of brain function that resolves spontaneously with time. However, occasionally there can be a more significant or longer lasting problem, and it is important that the symptoms from every concussion be monitored by team medics and doctors who understand concussion management protocol. When you suffer a concussion, you may suffer from:

- Physical symptoms e.g. headaches, nausea, dizziness, tiredness, intolerance of bright light
- Concentration difficulties, memory loss, difficulty reading or using a computer
- Emotional changes such as mood swings, irritability and aggression
- Sleeping pattern changes – sleeping more or difficulty falling asleep

What should I watch for? (“Red Flags”)

After evaluation by a sideline medic, it may be determined that you are safe to go home. If you are sent home, you should not be left alone. A responsible adult must accompany you. Symptoms from your concussion may persist when you are sent home but should not worsen, nor should new symptoms develop.

Important symptoms to monitor over the next 48 hours include:

- Headaches that worsen
- Severe neck pain
- Loss of feeling or use of an arm or leg
- Confusion
- Slurred speech
- Deteriorating consciousness
- Seizures (fits)
- Repeated vomiting

References: SCAT3 and Child SCAT 3 (Zurich 2012) McCrory P, et al. Br J Sports Med 2013;47:250–258;
IRB Player Welfare <http://www.irbplayerwelfare.com/?documentid=module&module=21>;
NCAA Concussion Fact Sheet for Students http://fs.ncaa.org/Docs/health_safety/ConFactSheetsa.pdf

The presence of **ANY** of these requires **urgent medical attention** and usually a **brain scan**. Report to a hospital casualty, preferably one with a neurosurgeon and brain scanning facilities.

Is it okay to go to sleep?

Concussion often makes a player feel drowsy or tired. Once you have been medically assessed, as long as you are not getting worse, as noted above, it is alright for you to sleep. We do however want the responsible adult to be at home with you in case any problems arise.

May I take something for pain?

Do not take any medication unless a doctor has told you to do so. Normally, we do not advise anything stronger than paracetamol (e.g. Panado). **Avoid anti-inflammatories** e.g. Voltaren, Cataflam, Brufen etc. and anything containing codeine e.g. Myprodol

What should I avoid doing?

Avoid actions that may worsen your symptoms, slow down recovery or place you at risk

- Do not consume **caffeine** (including coffee) or any other stimulants
- Stop taking any **supplements** that you may be using
- Do not consume **alcohol** for at least 48 hours after a concussion and until cleared by a medical doctor
- Do not **drive** a motor vehicle or motorcycle or ride a bicycle until cleared by a medical doctor
- Do not **exercise** at all until medically cleared to do so
- Do not spend long periods behind a **computer**, playing video games, watching TV or reading

May I eat after the practice or game?

It is fine for you to eat if you are hungry. Remember, some athletes do have a sense of nausea and fatigue, and often find that their appetite is decreased immediately after a concussion. Do not force yourself to eat.

How long will I be observed?

You must follow up with a medical doctor after your suspected or confirmed concussion. You must be monitored regularly and your symptoms observed until they have completely cleared. You must refrain from any physical exertion including strength conditioning until released to do so by the medical staff. Return-to-practice and return-to-play decisions are made at the appropriate time by the team physicians and these may differ from player to player.

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Additional testing will be considered (e.g. computerized brain function testing) and this should be explained to you during your follow up visits. Determining if school activities (e.g. class, exams) need to be modified can also be evaluated by your doctor.

There are however mandatory stand-down periods, and different stage durations based on your age at the time of injury. This information can also be found on www.BokSmart.com at the following link: <http://boksmart.sarugby.co.za/content/concussion>

If symptoms persist, what other support is available to me?

Your concussion may make it difficult to **concentrate, study, and/or attend class**. In such a situation, it’s important for you to discuss with your medical team and teachers, different options for receiving academic support during this time including:

- (1) short-term adjustments such as a shorter school day, working in an isolated & quiet environment and limited reading and computer work
- (2) extended accommodations to be made regarding your academic assessments including deferring or allowing for additional time.

These options usually involve disclosing some information about your medical condition to other School or University offices and/or personnel

Important Contacts:

Designation	Name	Tel no.	After hours no.	Email / Website
Doctor				
Hospital				
School/Club nurse				
BokSmart SpineLine operated by ER24		0800 678 678	0800 678 678	www.boksmart.com
Sports Concussion SA		011-8839000	0825746918	www.sportsconcussion.co.za sportsconcussion@mweb.co.za

Document Compiled by Dr Jon Patricios

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Concussion Referral Note by Medical Personnel

_____ has been assessed as having suffered either a suspected or confirmed
concussion on _____ (date)

A SCAT3 Evaluation form is / is not attached

The patient has been referred:

- to _____ hospital for further evaluation
- to home with a responsible adult for monitoring.

It is recommended that the guidelines on this form are strictly adhered to and that Dr _____
at contact number _____ is consulted for further evaluation and advice.

Signed: _____ Date: _____ Tel no.: _____