

## HEADS UP: CONCUSSION IN YOUTH SPORTS

### PARENT/PLAYER INFORMED CONSENT FORM

[www.uuvolleyballcamps.com](http://www.uuvolleyballcamps.com)

In 2009, the State of Ohio passed the Zackery Lystedt Law and in 2013, the State of Ohio passed Jenna's Law (which expanded the existing Max's Law to non-school athletic teams). Both directly affect youth sports and head injury policies – particularly how coaches must respond to player injuries. These laws require:

1. A coach, volunteer and/or referee must receive annual training to learn how to recognize the symptoms of a concussion and how to seek proper medical treatment for a person suspected of having a concussion.

2. An informed consent form must be signed by parents and youth athletes acknowledging the risk of head injury prior to tryouts, practice or competition.

3. A youth athlete who exhibits any signs, symptoms or behaviors consistent with a concussion following an observed or suspected blow to the head must be removed from training and/or play for the entire remainder of the day – “when in doubt, sit them out.”

4. A youth athlete who has been removed from training and/or play due to a suspected concussion must receive a medical release from a health care professional prior to returning to training and/or play.

Facts:

- A concussion is a brain injury.
- All concussions are serious.
- Concussions can occur without loss of consciousness.
- Concussions can occur in any sport.
- Recognition and proper management of concussions when they first occur can help prevent further injury or even death.

What is a concussion? A concussion is an injury to the brain that causes stretching and tearing of brain cells, damaging the cells and creating chemical changes in the brain. These chemical changes result in physical, emotional, and cognitive symptoms. Once these changes occur, the brain is vulnerable to further injury and sensitive to any increased stress until it fully recovers. A concussion is caused by a blow to the head or body that causes the brain to move rapidly inside the skull. Even a “ding,” “getting your bell rung,” or what appears to be a mild jolt or blow to the head or body may cause the brain to shift or rotate suddenly within the skull. Concussions can also result from a fall or from players colliding with each other or with obstacles even if they do not directly hit their head. The potential for concussion is greatest in athletic environments where collisions are common. Concussions can occur, however, in any organized or unorganized sport or recreational activity; as many as 3.8 million sports and recreation related concussions occur in the United States each year. Recognizing a Possible Concussion Loss of consciousness is not required to have a concussion; less than 10% of athletes with a concussion are “knocked out.”

To help recognize a concussion, you should watch for the following two things:

1. A forceful blow to the head or body that results in rapid movement of the head.
2. Any change in the athlete's behavior, thinking, or physical functioning.

#### Signs Observed by Coach

- Appears dazed or stunned
  - Is confused about assignment or position
  - Forgets sports plays
  - Is unsure of game, score, or opponent
  - Moves clumsily
  - Answers questions slowly
  - Loses consciousness (even briefly)
  - Shows behavior or personality changes
  - Can't recall event prior to hit or fall
  - Can't recall events after hit or fall
- #### Symptoms Reported by Athlete
- Headache or "pressure" in head
  - Nausea or vomiting
  - Balance problems or dizziness
  - Double or blurry vision
  - Sensitivity to light
  - Sensitivity to noise
  - Feeling sluggish, hazy, foggy or groggy
  - Concentration or memory problems
  - Confusion
  - Does not "feel right"

Athletes who experience any of these signs, symptoms or behaviors following an observed or suspected blow to the head or body must not be allowed to participate in any athletic event or training for the remainder of that day. That athlete cannot be allowed to participate in any future athletic event or training until the athlete both (i) no longer exhibits signs, symptoms or behaviors consistent with a concussion; and (ii) receives a medical release form from a health care professional. Signs and symptoms of concussion can last from several minutes, to days, weeks, months or even longer in some cases. Remember, you can't see a concussion and some athletes may not experience and/or report symptoms until hours or days after the injury. If your athlete exhibits any signs, symptoms or behaviors following an observed or suspected blow to the head or body, you must keep the athlete out of the game or practice for the remainder of the day and cannot allow that athlete to again participate in games or practices until the athlete has been medically cleared.

## Prevention and Preparation

How can concussions be prevented? Every sport is different, but there are steps that athletes and their parents can take to help protect them from concussions.

- Educate yourself about concussions.
- Follow the coach's rules for safety and rules of the sport. Insist that safety comes first.
- Encourage athletes to practice good sportsmanship at all times.
- Make sure athletes wear the right protective equipment for their activity. Protective equipment should fit properly, be well maintained and worn consistently and correctly.
- Review the athlete fact sheet with your child to help them recognize the signs and symptoms of a concussion.
- Teach athletes that it's not smart to play with a concussion. When in doubt, sit them out.
- Prevent long-term problems.

A repeat concussion that occurs before the brain recovers from the first concussion – usually within a short period of time (hours, days or weeks) – can slow recovery or increase the likelihood of having long-term cognitive problems. In rare cases, repeat concussions can result in brain swelling, permanent brain damage and even death. This is a more serious condition called second impact syndrome. Avoidance of second impacts is why it is critical to keep athletes with known or suspected concussions from play or practice until they have been evaluated and received a medical release form from a qualified health care professional. Remind your child: "It's better to miss one game than the whole season."

## PLAYERS' ACTION PLAN

What should I do if I think I have a concussion?

1. Tell your coaches and your parents. Never ignore a bump or blow to the head even if you feel fine. Also, tell your coach if one of your teammates might have a concussion.
2. Get a medical check up. A doctor or health care professional can tell you if you have a concussion and when you are OK to return to play.
3. Give yourself time to get better. If you have had a concussion, your brain needs time to heal. While your brain is still healing, you are much more likely to have a second concussion. Repeat concussions can cause damage to your brain. It is important to rest until you get approval from a doctor or health care professional to return to play.

## PARENTS' ACTION PLAN

What should you do if you think your child has a concussion?

1. Seek medical attention right away. A health care professional will be able to decide how serious the concussion is and when it is safe for your child to return to sports.

2. Keep your child out of play. Concussions take time to heal. Don't let your child return to play until a health care professional says it's OK. Children who return to play too soon – while the brain is still healing – risk a greater chance of having a second concussion. Repeat concussions can be very serious. They can cause permanent brain damage, affecting your child for a lifetime.

3. Tell your child's coach about any recent concussion. Coaches should know if your child had a recent concussion in any sport. You child's coach may not know about a concussion your child received in another sport or activity unless you tell the coach.

Who can issue a Medical Release? To allow an athlete to return to practice or play, the medical release must be issued by one of the following health care professionals for whom the evaluation and treatment of concussions and brain injuries is within their scope of practice: In Ohio: • Physician (MD) • Physician's Assistant (PA) • Doctor of Osteopathy (DO) licensed by the Ohio State Board of Medicine • Nurse practitioner licensed by the Ohio State Board of Nursing • Psychologist licensed by the Ohio Board of Psychologist Examiners Source: OAR 581-022-421(1)(d) – (e).

Ohio state law requires coaches take steps to protect athletes when the athlete exhibits any signs, symptoms or behaviors associated with a concussion. Parents may strongly disagree with a coach's decision to pull an athlete due to a suspected concussion. Similar requirements also apply under Washington State law.

More Information

For more information, including printable fact sheets please go to the following link:

<http://www.cdc.gov/concussion/HeadsUp/index.html>

## **HEADS UP: CONCUSSION IN YOUTH SPORTS**

### **PARENT/PLAYER INFORMED CONSENT FORM**

#### **ZACHERY LYSTEDT LAW/JENNA'S LAW COMPLIANCE STATEMENT**

I certify that: 1. I have been provided with information on concussions in youth sports in compliance with ORS 417.875 (Jenna's Law) and/or RCW 4.24.660 and 28A.600.190 (the Lystedt Law). 2. I understand that on a yearly basis, the concussions in youth sports information sheet shall be signed and turned into my club by myself (or my parent or legal guardian if I am under the age of eighteen (18) years old) prior to my initiating tryouts, practice or competition. If any player/participant is suspected of suffering a concussion or brain injury, the player will be removed from tryouts, practice or competition and may not return until cleared in writing by a licensed health care provider (see Who Can Issue a Medical Release? above).

Player Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_ (printed) Parent Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ (printed)

**SUBMIT THIS SIGNED PAGE AT CHECK IN BEFORE ANY PARTICIPATION**