

Appendix A

Rothman ACT: Home Care Recommendations for Concussed Athletes

Name of Athlete: _____ Sport _____

Date of Injury: _____ Home phone _____

Parent/Guardian Name: _____

Your son/daughter has sustained a head injury while participating in _____.

After an athlete has been evaluated for a concussion the following should be implemented and monitored by a parent/guardian. In the event that any or all symptoms noted below change or occur, seek immediate medical attention.

- Deteriorating symptoms
- New presenting symptoms
- Deteriorating level of consciousness

Rest: Physical and cognitive. Rest is the number 1 priority in concussion management. Limit the athlete's exposure to computers, video games, internet, texting, TV and driving in the first 24-48 hours following the diagnosis of a concussion. Athletes should not participate in any kind of physical activity whatsoever.

Medications that should be AVOIDED include Aspirin and NSAIDS (Non-Steroidal Anti-inflammatory Drugs such as Advil/ibuprophen:

In some instances, the signs and symptoms of a concussion do not become obvious until several hours or even days after the injury. This is why we place your son/daughter on a **24 hour Concussion Watch**. Please be especially observant for the following signs and symptoms:

- 1) Headache (especially one that increases in intensity*
- 2) Nausea and vomiting *
- 3) Difference in pupil size from right to left eye, dilated pupils*
- 4) Mental confusion/behavior changes
- 5) Dizziness
- 6) Memory Loss
- 7) Ringing in the ears
- 8) Changes in gait or balance
- 9) Blurry or double vision*
- 10) Slurred speech*
- 11) Noticeable changes in the level of consciousness (difficulty awakening, or losing consciousness suddenly*)
- 12) Seizure activity *
- 13) Decreased or irregular pulse or respiration*

***Seek medical attention at the nearest emergency department.**

Current symptoms reported by your son/daughter to ATC: _____

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The best guideline is to note symptoms that worsen, and behaviors that seem to represent a change in your son/daughter. If you have any questions or concerns at all about the symptoms you are observing, contact your family physician for instructions, or seek medical attention at the closest emergency department. Otherwise you can follow the instructions outlined below:

It is OK to:	There is NO need to:	Do NOT :	Limit:
Use ice pack on head and neck as needed for comfort	Check eyes with a flashlight	Drink alcohol	TV to 30 minutes or less
Eat a light diet	Wake up every hour unless athlete is under the age of 14.	Drive while symptomatic	School work if symptomatic- take breaks to control symptoms.
Go to Sleep	Test reflexes	Exercise	Limit or exclude computer work
Rest (no strenuous activity or sports until cleared)	Stay in bed	Take ibuprofen, aspirin, naproxen or other non-steroidal anti-inflammatory medications until cleared by physician.	Stimulation from bright lights and loud noises
		Play video games	

The goal for the first 24 hours is to rest as much as possible to allow the Brain to heal!!

Please remind your child to check in with the School Nurse **PRIOR TO GOING TO CLASS** on the first day he or she returns to school as well as reporting to the ATC after school to continue care.

Recommendations provided to: _____

Phone #: _____

Recommendation provided by: _____

Phone # _____

Date: _____

Time: _____