

MURILLO MINOR ATHLETIC ASSOCIATION

SOFTBALL CONCUSSION AWARENESS SHEET



WHAT IS AND WHAT CAUSES A CONCUSSION?

A concussion is a brain injury that can't be seen on x-rays, CT or MRI scans. It affects the way an athlete thinks and can cause a variety of symptoms. Any blow to the head, face or neck, or somewhere else on the body that causes a sudden jarring of the head may cause a concussion.

WHEN SHOULD I SUSPECT A CONCUSSION?

A concussion should be suspected in any athlete who sustains a significant impact to the head, face, neck, or body and reports *ANY* symptoms or demonstrates *ANY* visual signs of a concussion. A concussion should also be suspected if an athlete reports *ANY* concussion symptoms to one of their peers, parents, teachers, or coaches or if anyone witnesses an athlete exhibiting *ANY* of the visual signs of concussion. Some athletes will develop symptoms immediately while others will develop delayed symptoms (beginning 24-48 hours after the injury).

WHAT ARE SYMPTOMS OF A CONCUSSION? Common symptoms include:

- Headaches or head pressure
- Dizziness and balance problems
- Nausea and vomiting
- Blurred or fuzzy vision
- Sensitivity to light or sound
- Not thinking clearly
- Feeling slowed down
- Sadness
- Nervousness or anxiety
- Feeling more emotional
- Easily upset or angered
- Sleeping more or sleeping less
- Having a hard time falling asleep
- Difficulty working on a computer
- Difficulty reading
- Difficulty learning new information
- Feeling tired or having no energy

WHAT ARE THE VISUAL SIGNS OF A CONCUSSION? Visual signs may include:

- Lying motionless on the playing surface
- Slow to get up after a direct or indirect hit to the head
- Disorientation or confusion or inability to respond appropriately to questions
- Clutching head
- Balance, gait difficulties, motor incoordination, stumbling, slow labored movements
- Blank or vacant stare
- Facial injury after head trauma

WHAT SHOULD I DO IF I SUSPECT A CONCUSSION?

If any athlete is suspected of sustaining a concussion during sports they should be immediately removed from play. Any athlete who is suspected of having sustained a concussion must not be allowed to return to the same game or practice.

It is important that ALL athletes with a suspected concussion undergo medical assessment by a medical doctor or nurse practitioner, as soon as possible; and receive written medical clearance from a medical doctor or nurse practitioner before returning to sport activities.

HOW LONG WILL IT TAKE TO RECOVER, AND WHEN CAN THE ATHLETE RETURN TO SCHOOL AND SPORTS?

Most athletes who sustain a concussion will make a complete recovery within 1-2 weeks while most youth athletes will recover within 1-4 weeks. Approximately 15-30% of patients will experience persistent symptoms (>2 weeks for adults; >4 weeks for youth) that may require additional medical assessment and management.

It is important that all athletes diagnosed with a concussion follow a step-wise return to school and sports-related activities that includes the following Return-to-School and Return-to-Sport Strategies. It is important that youth and adult student-athletes return to full-time school activities before progressing to stage 5 and 6 of the Return-to-Sport Strategy.

RETURN-TO-SCHOOL STRATEGY

Stage	Aim	Activity	Goal of each step
1	Daily activities at home that do not give the student-athlete symptoms	Typical activities during the day as long as they do not increase symptoms (i.e. reading, texting, screen time). Start at 5-15 minutes at a time and gradually build up.	Gradual return to typical activities.
2	School activities	Homework, reading or other cognitive activities outside of the classroom.	Increase tolerance to cognitive work.
3	Return to school part-time	Gradual introduction of schoolwork. May need to start with a partial school day or with increased breaks during the day.	Increase academic activities.
4	Return to school full-time	Gradually progress.	Return to full academic activities and catch up on missed school work.

RETURN-TO-SPORT STRATEGY

Stage	Aim	Activity	Goal of each step
1	Symptom-limiting activity	Daily activities that do not provoke symptoms	Gradual re-introduction of work/school activities
2	Light aerobic activity	Walking or stationary cycling at slow to medium pace. No resistance training	Increase heart rate
3	Sport-specific exercise	Low to moderate intensity individual running, throwing and outfield catching. No in-field, catching or pitcher position practice	Add movement
4	Non-contact training drills	High intensity running (including non-contact base running), throwing, out-field and in-field catching. Non-contact individual and team drills. Batting cage or taking pitches from a coach. Individual catcher and pitching position practice	Exercise, coordination and increased thinking
5	Full contact practice	Following medical clearance, high intensity full contact practice and scrimmage	Restore confidence and assess functional skills by coaching staff
6	Return to sport	Normal game play	

HOW CAN I HELP PREVENT CONCUSSIONS AND THEIR CONSEQUENCES?

Concussion prevention, recognition and management require athletes to follow the rules and regulations of their sport, respect their opponents, avoid head contact, and report suspected concussions.

TO LEARN MORE ABOUT CONCUSSIONS PLEASE VISIT:

www.parachutecanada.org/concussion
www.Ontario.ca/concussions