

What is a concussion?

A concussion is a brain injury that cannot be seen on routine X-rays, CT scans, or MRIs. It affects the way you may think and remember things, and can cause a variety of symptoms.

What are the signs and symptoms of a concussion?

You do not need to be knocked out (lose consciousness) to have had a concussion.

You might experience one or more of the following:

Thinking Problems	Player's Complaints	Other Problems
<ul style="list-style-type: none"> Does not know time, date, place, details about a recent activity General confusion Cannot remember things that happened before and after the injury Knocked out 	<ul style="list-style-type: none"> Headache Dizziness Feels dazed Feels “dinged” or stunned; “having my bell rung” Sees stars, flashing lights Ringing in the ears Sleepiness Sees double or blurry Stomachache, stomach pain, nausea “Don’t feel right” 	<ul style="list-style-type: none"> Poor co-ordination or balance Blank stare/glassy-eyed Vomiting Slurred speech Slow to answer questions or follow directions Easily distracted Poor concentration Strange or inappropriate emotions (i.e., laughing, crying, getting mad easily) Not participating well

Get medical help immediately if you have any “red flag” symptoms such as neck pain, repeated vomiting, growing confusion, seizures, and weakness or tingling in your arms or legs. These may be signs of a more serious injury.

What causes a concussion?

Any blow to your head, face or neck, or a blow to your body which causes a sudden jarring of your head may cause a concussion (e.g., hitting your head on the ice, colliding with another player, being checked into the boards).

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

You should stop playing right away. Continuing to play increases your risk of more severe, longer-lasting concussion symptoms and increases your risk of other injury.

Tell your coach, team trainer, parent, official, or another adult you trust that you are concerned you might have a concussion. You should not be left alone and should be seen by a doctor as soon as possible that day. You should not drive.

If you lose consciousness or demonstrate any red flag symptoms, an ambulance should be called to take you to a hospital immediately.

Do not return to play the same day.

What should I do if I think my teammate might have a concussion?

If another player tells you about symptoms or if you notice signs they might have a concussion, tell a coach, team trainer, parent, official or other responsible person. They should not be left alone and should be seen by a doctor as soon as possible that day.

If another player is knocked out or shows red flag symptoms, an ambulance should be called to take them to a hospital immediately.

How long will it take to get better?

The signs and symptoms of a concussion usually last for one to four weeks, but may last longer.

In some cases, it may take many weeks or months to heal. If you have had a previous concussion, you may take longer to recover.

No two concussion are the same. Do not compare your recovery to someone else's, or even to a previous concussion you have had.

If your symptoms are persistent (i.e., last longer than four weeks if you're under 18) you should be referred to a healthcare professional who is an expert in the management of concussion.

How is concussion treated?

After an initial short period of rest (24 to 48 hours), light cognitive and physical activity can begin, as long as these do not worsen your symptoms.

As you're recovering from concussion, you should not do any activities that may make your symptoms worse. This might mean limiting activities such as exercising, studying, and screen time on your phone or other devices. If mental activities (e.g., reading, using the computer) worsen your symptoms, you might have to stay home from school or work.

Recovering from concussion is a process that takes patience. Going back to activities before you are ready is likely to make your symptoms worse, and your recovery may take longer.

When should I go to the doctor?

Anyone with a possible head injury should be seen by a doctor as soon as possible. If you are diagnosed with a concussion, your doctor should schedule a follow-up visit with you within the next one to two weeks.

You should go back to the doctor immediately if, after being told you have a concussion, you have worsening symptoms, such as:

- being more confused
- headache that is getting worse
- vomiting more than twice

- not waking up
- having any trouble walking
- having a seizure
- strange behaviour

When can I return to school?

You may find it hard to concentrate in class, may get a worse headache, or feel sick to your stomach. You should stay home from school if being in class makes your symptoms worse. Once you feel better, you can try going back to school part-time to start (i.e., for half days) and if you are OK with that, then you can go back fulltime.

Students with concussion usually miss one to four days of school. Each concussion is unique, so you may progress at a different rate than other people you know.

The Return-to-School Strategy provides information on the stages of returning to the classroom, and can be accessed at parachute.ca/smarthockey.

Remember, return to school must come before full return to sport.

When can I return to sport?

It is very important that you do not go back to full participation in sport if you have any concussion signs or symptoms.

Returning to hockey and other physical activity before full recovery from concussion puts you at higher risk of sustaining another concussion, with symptoms that may be more severe and last longer. Follow the necessary steps to return to sport and physical activity safely.

In the Return-to-Sport Strategy:

- Each stage is at least 24 hours.
- Move on to the next stage when you can tolerate activities without new or worsening symptoms.
- According to Hockey Canada's Concussion Policy, if symptoms return during the return to

play process, the player should return to stage 2 and be re-evaluated by a doctor.

Stage 1: After an initial 24 to 48 hours of rest, light cognitive and physical activity can begin, as long as these do not worsen your symptoms. Start with daily activities like moving around your home and simple chores, such as making your bed.

Stage 2: Light aerobic activity such as walking or stationary cycling, for 10 to 15 minutes. Do not do any resistance training or other heavy lifting.

Stage 3: Individual sport-specific exercise with no contact for 20 to 30 minutes (e.g., running, skating, shooting a puck). Do not do any resistance training.

Stage 4: Begin practising with no contact. Add in more challenging drills (e.g., shooting and passing drills). Start to add in resistance training, if it's appropriate for you.

Stage 5: Participate in practice with contact. Only proceed to this stage once you have been cleared by a doctor.

Stage 6: Full game play.

Never return to contact practice or gameplay until cleared by a doctor!

How can I prevent concussions?

Follow the 12 on-ice tips provided in this kit to ensure you are playing Smart Hockey and protecting yourself and others from injuries. Respect the rules of the game, especially ones that are in place to reduce head contact.

Wear the appropriate equipment at all times and ensure that all of your equipment fits properly. Your skates need to fit properly and be in good condition to prevent falls and crashes. **Helmets do not prevent concussion**, but always wear your helmet properly to prevent other head injuries. **Mouthguards have not been proven to prevent concussions**, but always wear a properly fitted mouthguard to protect your mouth and teeth.