Concussions in Youth Sports:

How Do They Measure Up?

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SPORTS INJURY
EVERY
25
SECONDS

12% of these ER visits were for concussions.

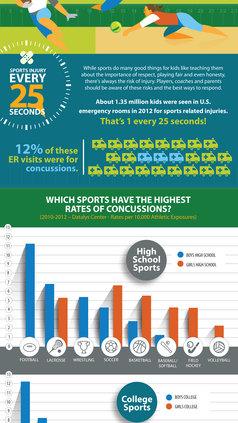
While sports do many good things for kids like teaching them about the importance of respect, playing fair and even honesty, there's always the risk of injury. Players, coaches and parents should be aware of these risks and the best ways to respond.

About 1.35 million kids were seen in U.S. emergency rooms in 2012 for sports related injuries.

That's 1 every 25 seconds!

WHICH SPORTS HAVE THE HIGHEST RATES OF CONCUSSIONS?

(2010-2012 – Datalys Center - Rates per 10,000 Athletic Exposures)



WHAT IS A CONCUSSION ?

A concussion is a brain injury caused by a blow to the head, or a blow to the body that causes a jolt to the head.

What An Observer May Spot

- Dazed or stunned appearance
- Confusion about assignment or position in game
- Forgetting instructions
- Unsure of game, score or opponent
- Answers questions slowly
- Clumsy movement
- Loses consciousness (even briefly)
- Shows behavioral or personality changes
- Can't recall events prior to the head impact
- Can't recall events after the head impact

What A Youth Athlete May Report

- Headache or "pressure" in head
- Dizziness
- Nausea or vomiting
- Feeling "dazed," "stunned"
- Balance problems
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy or groggy
- Concentration or memory problems
- Confusion
- Trouble falling asleep
- Trouble staying asleep
- Sleeping more than usual
- Does not "feel right"

WHAT TO DO IF YOU SUSPECT A CONCUSSION

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SEEK MEDICAL ATTENTION

A doctor will be able to confirm the diagnosis of concussion and advise the best treatment. This is essential for maximizing recovery.

KEEP THEM SAFE

Remove the youth from play. Concussions may take a significant amount of time to fully heal, and a child should not return to sports until a doctor has evaluated him/her and determined that he/she is fully recovered and ready to begin a gradual progression back to sports. Any child or athlete with a suspected or known concussion should never return to play the same day as the injury.

INFORM THE COACHES

Tell coaches about any recent concussions. Because concussion problems can increase the more concussions a child has, it is important that coaches and medical professionals have the most accurate information regarding a child's concussion history.

WHAT IS THE TREATMENT & RECOVERY FOR CONCUSSIONS?

A physician will diagnose a concussion by taking a history and performing a physical, neurological and cognitive exam, including tasks that test memory, balance and attention.

For a typical concussion, the treatment is a period of rest from physical activities and from stressful cognitive activities, such as schoolwork, until symptoms begin to improve.

Your physician will provide guidance on when it is safe to resume activity (both physical and cognitive).

No two concussions are the same, and the recovery process is unique to each individual.

Unfortunately, it is not possible to predict how long symptoms will last.

Concussions are no longer classified as "mild," "moderate" or "severe" at the time of injury.

Concussion severity is determined by how long symptoms persist, so it is not possible to know how severe the concussion was until the athlete is fully recovered.

Over-the-counter pain medications are not recommended for treating concussion symptoms.

S M T W T F S

Concussions resolve within 2 weeks

for 80-90% of high school aged athletes.

S M T W T F S

Concussions resolve within 2-4 weeks

for 80-90% of athletes younger than high school aged.

Returning to sports and other physical activities after a concussion should be done gradually once symptoms have resolved and the child has been cleared by his/her physician.*

This is an example of a typical return-to-sports schedule that might be recommended by a physician:

DAY 1:	Day 2:	Day 3:	Day 4:	Day 5:
Light aerobic exercise (jogging, stationary bicycle, brisk walking)	Single sports-specific drills with no risk of contact; individual skill work with a ball; resistance training such as push-ups and sit-ups	Complex sports-specific drills with no risk of contact, passing and catching/ shooting drills	Full practice including contact drills	Complete competition play

* Most states, including Illinois, require by law that a physician clearance be required before an athlete can return to practice or competition.

HOW TO REDUCE THE RISK OF CONCUSSION FOR YOUR YOUNG ATHLETE

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Coaches, parents and athletes all should learn to recognize signs and symptoms of concussions. Prompt recognition, removal from play, and proper treatment can prevent a typical concussion from becoming one with a protracted recovery or more debilitating symptoms.

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Encourage athletes and coaches to follow the rules of the sport.

13% of concussions occur in the setting of an illegal hit or other rule violation.

Ensure that protective equipment required by the sport fits properly, is in good condition, and is worn consistently and correctly.

Coaches should teach athletes proper and safe techniques for performing the skills for their sport, and appropriate strength and conditioning routines.

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Coaches should always encourage players to speak up if they are injured, and they should remove athletes with suspected injuries from play.

Studies show that about 42% of athletes intentionally do not report their concussion symptoms and 62% say they know someone who has failed to report symptoms.

Coaches, athletes and parents should take a course in first aid, CPR, and injury prevention.

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