

# EXETER SPORTS MEDICINE PROGRAM

## HEAD INJURY INFORMATION SHEET

Your child has suffered a head injury during athletic participation. To make sure that he/she recovers from a concussion, please follow these important recommendations:

- Please remind your child to report to the athletic training room tomorrow and every day afterward for follow-up evaluations.

- Please review the items outlined on the "Immediate Physician Referral Checklist" below. If any of these problems develop prior to his/her visit, please contact your ATC, the local emergency center, or your family physician. Otherwise you can follow the instructions outlined below:

### **It is OK to:**

1. Use acetaminophen (Tylenol) for headaches **after 24 hours has passed.**
2. Use ice packs on head and neck as needed for comfort.
3. Eat a light diet.
4. Drink plenty of water.
5. Return to school – the school nurse will be notified of your child's concussion and will appropriately notify his/her teachers.
6. Go to sleep.
7. Rest (no strenuous activity, sports, or prolonged electronic screen viewing).

### **There is NO need to:**

1. Check eyes with flashlight.
2. Wake up every hour.
3. Test reflexes.
4. Stay in bed.

### **Do Not:**

1. Drink alcohol.
2. Eat spicy food.

Please be aware that your child must be cleared by the certified athletic trainer and your team or family physician prior to returning to athletic participation. If you have any questions, please do not hesitate to contact us at the number listed at the bottom of the page.

### **Immediate Physician Referral Checklist**

- Deterioration of neurological function – speaking incoherently, not recognizing people/pets, severe balance problems, inability to wake up, etc.
- Decreasing level of consciousness – see above, plus unwillingness/inability to stay awake or talk to you,
- Decrease or irregularity on pulse – feel where thumb meets forearm for pulse – a normal range is usually 50-85 at rest.
- Decrease or irregularity in respiration – a normal count is 12 per minute
- Unequal, dilated, or unreactive pupils – when in a darkened room, pupils should be large, when a light is shined into them, they should contract. If not, they are unreactive.
- Any signs or symptoms of associated injuries, spine or skull fracture, or bleeding – Obvious deformity, bleeding, extreme bruising (with quick onset), reluctance to move.
- Mental status changes: lethargy, difficulty maintaining wakefulness, confusion, or agitation.
- Seizure activity.

Please do not hesitate to call Audrey Dickman or Kyle Moyer, your school's certified athletic trainers, at 610-780-5940 and 610-780-4287 respectively, with questions or concerns. They will work with the school nurse in your child's building to make sure he/she is taken care of appropriately (note sharing, PE limitations, etc). When your child sees a doctor for this concussion (it is required that all concussed adolescents are seen by a physician), please make sure to get a note from him/her indicating impending clearance, based on symptoms or time. Our team physician may be able to see your son/daughter in our office depending on time of year and availability – please ask us about this service if you are interested.