SUPPORTING A CHILD/adolesCENT WITH CONCUSSION:
Your role as a coach

Helping children and adolescents with their concussion care and returning to play, school, sport and daily life activities requires the support of many. As a coach, you have an important role to play! If you are a coach who has never had a child/adolescent with a concussion, use this information to build your knowledge. For coaches who have had child/adolescent with a concussion, use this information to advocate for the care and support they may need.

**About this resource:** The information shared in this resource is based on the Living Guideline for Diagnosing and Managing Pediatric Concussion. Coaches representing different sports reviewed and selected recommendations from this Guideline that they thought coaches should be aware of.

**EDUCATION: Know about concussion**

- A concussion is a brain injury caused by sudden shaking of the head. Any hit to the head, face, neck or body can cause a concussion. Concussions can happen from a fall, during a motor vehicle collision or sports, or during play at school, camp or in the neighbourhood.
- If the child/adolescent has a significant impact to the head, face, neck, or body and reports any symptoms or shows any of the visual signs of a concussion, you should suspect a concussion.

**Concussion symptoms:** Symptoms describe how someone feels after they are injured. Some symptoms may not appear until the next day. Common concussion symptoms the child/adolescent may experience are:

- Headaches or head pressure
- Blurred or fuzzy vision
- Dizziness
- Sensitivity to light or sound
- Nausea and vomiting
- Balance problems
- Easily upset or angered
- Feeling more emotional
- Nervous or anxious
- Sadness
- Sleeping more or less
- Having a hard time falling asleep
- Feeling slow, tired or having no energy
- Difficulty working on a computer
- Not thinking clearly
- Difficulty reading or remembering

**Concussion signs:** Signs describe how a child/adolescent looks or acts when they are injured. Common concussion signs are:

- Lying still on the ground or ice
- Slow to get up
- Confusion or can’t answer questions
- Blank stare
- Difficulty standing or walking
- Injury to the face or holding their head

**Take action:**

Returning a child/adolescent to sport too soon after a concussion can lead to another injury. This may affect how they recover. If you think the child/adolescent has a concussion:

- sit them out
- contact the parents immediately
- recommend that the child/adolescent be seen by a medical doctor or nurse practitioner as soon as possible
The restoration of normal daily activities and sports can happen concurrently. It is important for the child/adolescent to return to school full-time at a full academic load (i.e., writing exams without accommodations in place as a result of the concussion) before completely returning to full-contact sport or high-risk activities.

Return-to-Activity/Sport/Play Steps:

<table>
<thead>
<tr>
<th>Steps*</th>
<th>Activity</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Physical and cognitive activities that do not make the child/adolescent feel worse</td>
<td>Walking at home or in school</td>
</tr>
<tr>
<td>2</td>
<td>Light physical activity</td>
<td>Jogging or stationary cycling at slow to medium speed. No weight training</td>
</tr>
<tr>
<td>3</td>
<td>Sport-specific exercise</td>
<td>Running or skating drills. No drills with risk of head injury</td>
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<tr>
<td>4</td>
<td>Non-contact activities</td>
<td>Practice without body contact. Gym class activities without risk of head injury</td>
</tr>
<tr>
<td>5</td>
<td>Full-contact activities</td>
<td>Full activities/sports practices after doing full-time school and getting a medical doctor's note that states the child/adolescent is cleared to return to full-contact sport or high-risk activity</td>
</tr>
<tr>
<td>6</td>
<td>Return to all activities and sports</td>
<td>Normal full-contact game play</td>
</tr>
</tbody>
</table>

* The child/adolescent can start these steps 1-2 days after a concussion, even with symptoms. Each step should take about one day. If symptoms get worse, the child/adolescent should go back to the last step. Try it again until the child/adolescent can do it without bringing on new symptoms or making symptoms worse. It is important to receive a note from the medical doctor or nurse practitioner that states the child/adolescent is cleared to return to full-contact sport or high-risk activity.
STAY CONNECTED: Communicate with the child/adolescent, family and teachers

- If the child/adolescent has had a concussion, stay informed.
- Have ongoing conversations about concussion symptoms, medical management and recovery so that you can best support the child/adolescent through the concussion recovery process.
- If you notice that the child/adolescent is developing new concussion-like symptoms or sustains a new suspected concussion, recommend that the child/adolescent be seen by a medical doctor or nurse practitioner.
- Concussion recovery takes time, so it is important to have patience with the child/adolescent and the family during this process.

Looking for resources?

Here are examples of resources that might be helpful and that you can share with your coaching colleagues and sport organization:

- Concussion Recognition Tool 5: To help identify concussion in children, adolescents, and adults
- Parachute Concussion Guidelines for Parents & Caregivers
- Concussion Ed – Parachute Concussion Education
- PAR Concussion Recognition & Response: Concussion symptom recognition tool for coaches and parents
- CATT: Concussion Information Package for Coaches