



Parent/Guardian Concussion Information Packet

Delaney Farmer, LAT,ATC

Athletic Trainer

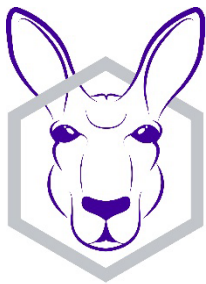
Lake Washington High School

425-390-4121

cfarmer@lwsd.org

www.LWathletictraining.com

This packet has been provided to you to empower you with the resources to better assist in the care of your child.



LAKE WASHINGTON HIGH SCHOOL PARENT CONCUSSION PAMPHLET

To the Parents/Guardians of: _____

Date of Evaluation: _____

My name is Delaney Farmer, and I am the Athletic Trainer for Lake Washington High School.

Today I finished doing an evaluation on your child and have assessed that they have a concussion.
"The WIAA does recognize Athletic Trainers as healthcare professionals to assess and manage concussions".

As of right now, (unless otherwise noted) you do not have to do anything other than just keep an active eye on them (see "Parent Involvement" document in this pamphlet of information).

I have provided this packet of information to empower you with information that will help in the concussion management and monitoring of your child. **(PLEASE READ EVERYTHING)**

Within this packet you will have information that goes over:

1. What is a concussion and things you can do to help
2. Our school's concussion management program that I do for each student-athlete who has a concussion
3. Our schools Return to Play (RTP) program
4. Information to get you involve
5. Clinic options to have your child seen by a concussion specialist
6. A copy of my concussion symptom list I have each athlete fill out each day while at school (to provide to the doctor)

The purpose of this packet as mentioned is to empower you with important information so we can all help each other get your child back to school and sports safely.

If you have any questions at any time, please feel free to email, call or drop by after school and visit me in the training room.

Near the end of the protocol, we ask that you schedule an appointment with a physician (any one of your choices, or I can provide you with some choices) to be evaluated and cleared back to the school. Once we receive this doctor's note, we can finish our return to play protocol and then be able to clear back to their sport. When you visit the physician, we ask that you provide them with our documentation of the student-athletes progress and our return to play clearance documentation. The list of WIAA approved medical providers to provide a clearance note are: Medical Doctor (MD), Doctor of Osteopath (DO), Advance Registered Nurse Practitioner (ARNP), Physicians Assistance (PA-C).

Delaney Farmer, LAT, ATC
Licensed Athletic Trainer
Lake Washington High School
cfarmer@lwsd.org
425-390-4121

What is a Concussion

What is a Concussion?

A concussion is a type of traumatic brain injury, or TBI, caused by a bump, blow, or jolt to the head that can change the way your brain normally works. Concussions can also occur from a fall or a blow to the body that causes the head and brain to move quickly back and forth.

What Can I Do to Help Feel Better After a Concussion?

- Having the child get plenty of rest. Keep a regular sleep schedule, including no late nights and no sleepovers.
- Making sure the child avoids high-risk/ high-speed activities such as riding a bicycle, playing sports, or climbing playground equipment, roller coasters or rides that could result in another bump, blow, or jolt to the head or body. Children should not return to these types of activities until their health care professional says they are well enough.
- Giving the child only those drugs that are approved by the pediatrician or family physician.
- Talking with their health care professional about when the child should return to school and other activities and how the parent or caregiver can help the child deal with the challenges that the child may face. For example, your child may need to spend fewer hours at school, rest often, or require more time to take tests.
- Sharing information about concussion with parents, siblings, teachers, counselors, babysitters, coaches, and others who interact with the child helps them understand what has happened and how to meet the child's needs.
- Wearing blue blocking glasses if headaches tend to persist (or turning on blue light on cell phones).
- In 2024, new evidence is showing that mild exercises is helpful. Going out for walks, walking on a treadmill. A light stroll on a bike. Things that would be 55-70% of the child's Max Heart Rate

For more educational videos and content, please visit this site:

<http://www.cdc.gov/CONCUSSION>

What symptoms will my child have with a concussion?

Only about 3% of young people with a concussion will be “knocked out”! The most common early symptoms are headache, nausea with one or two possible episodes of vomiting, balance problems, blank stare and delayed response to questions, repeating questions, or short term memory loss.

Until the brain is healed, continuing symptoms of concussion may include:

- Headache/Nausea
- Fatigue/Sleeping too much or having trouble sleeping
- Dizziness/Balance problems
- Malaise/Feeling in a “Fog”/Feeling Slow/Trouble concentrating or remembering
- Light or noise sensitivity
- Feeling emotional changes/irritable/feeling flat
- Just not themselves

Does the Student-Athlete need to see a Physician?

No one from the LWSD will ever deny a parents/guardian the right or need to seek medical attention outside of the school. We want you to feel secure that your child is being taken care of and safe. But with that being said, not all cases may warrant seeking outside medical attention. At Lake Washington High School, the Licensed Athletic Trainer is capable to evaluate and manage concussions. At any time, if the Athletic Trainer is concerned or notices decreased progress, the student-athlete WILL get refer out.

Note: Just because the school receives a note from a Physician for return to play, it is ultimately up to the High School's Athletic Trainer who will clear them to play). Multiple things are at play before a full return to sports is allowed. Fulfilling the return to play stages, in order need to be accomplished. They can not be sped up. The stages must be completed and observed by a healthcare provider who the WIAA recognizes to deal with concussions.

If you choose to see a Physician, please refer to the Clinic Option Handout for several great options or be aware of the type of health care provider that the WIAA recognizes as health care providers that deal with concussions..

What danger is there if my child returns to play before completely healed?

If an athlete returns to play before a concussion is complete healed, evidence shows increase risk of catastrophic Second Impact Syndrome, which can cause fatal damage to the brain and increased risk of Post Concussive Syndrome, a condition that can cause long-term concussion symptoms. For this reason, it is encouraged we continue to tell the student-athlete to be honest with themselves. Playing time is second to their health.

Parent Involvement

Parents critical in recognizing their children's concussion symptom

Who else knows your child better than you.

Therefore I am asking that we work together on this. Having your help in keeping an eye on your child and see if they develop any new or advancements in their concussion symptoms will be very beneficial for your child's safety and wellbeing.

Your child is a student first and athlete second. I only want the best care and attention that we can give them so they can return safely to school and then back to sports.

WHAT TO KEEP AN EYE OUT FOR:

If any of the following occur under your watch, please consider taking your child to your Healthcare Provider or the Emergency room if it's after hours.

- Has a headache that gets worse – much worse (pressure becomes alarming)
- Is very drowsy or can't be awakened (woken up) – does not mean you have to periodically wake them up in the middle of the night – sleep is the best thing for them at this point.
- Can't recognize people or places
- Experiences repeated vomiting
- Behaves unusually, seems confused or is very irritable
- Experiences seizures (arms and legs jerk uncontrollably)
- Has weak or numb arms or legs
- Have one pupil (the black part in the middle of the eye) larger than the other
- Loses consciousness
- Is unsteady on his feet; or
- Has slurred speech

Please feel free to call or email me at any time if you have any concerns or questions about what I am providing for you child at the school.

You always have the right to go have your child visit a doctor (MD). If you do, please review the other documents in this packet about the specific professions that the WIAA recognizes as concussion specialist.

My contact information is:

Delaney Farmer, LAT, ATC
Licensed Athletic Trainer
Lake Washington High School
425-390-4121 (C)
cfarmer@lwsd.org

Management Tools

Tools that we use to observe progression of concussion health

Concussion management is never an easy thing. One must evaluate the athlete constantly to observe how their concussion health progresses. Here at Lake Washington High School, we utilize several tools to help provide a better assessment outcome for your child.

- IMPACT Testing
- Daily symptom check monitoring
- A 5 step return to play protocol which is part of our state progression to return to play program

IMPACT TESTING

IMPACT stands for Immediate Post-Concussion Assessment and Cognitive Test

We put each student-athlete who is in an impact sport through this test PRIOR to any season turn out. This allows us to obtain a baseline test score when they are at their possible optimal non-concussion state. We will then re-test them after they are symptom free and we are ready to put them into a their sport.



Daily Symptom Checklist

On a daily basis, the athlete will visit the Athletic Trainer in the training room and go over a list symptoms and rate each symptom between 0-10 (0 = no symptom, 10 = sever symptom). We use this to observe how their symptoms are progressing or digressing. If the student-athlete can not meet in person, we will attempt to send the symptoms home with the athlete by paper or some sort of digital options.

Return to Play (RTP) Protocol

Please see our return to play protocol in this document.

Under supervision of the LW Athletic Trainer, the student-athlete will undergo a stage process by increasing their cognitive and physical well-being. The return to play protocol will allow us to take the student-athlete through several stages from easy cardio activities to full practice play. If they do well and symptoms do not return, we feel confident that they would be suitable for event play. We can always slow the process down if there are any concerns with anyone but we can never speed the process up.

Concussion Clinic Options

Specialist that deals with concussion management

Not all doctors are equal when it comes to the assessment, diagnosis and management of concussions.

If you choose to take your child to a healthcare provider, I highly recommend these 4 programs. They provide great educate for you and your child and perform excellent care for their concussion management.

Seattle Sports Concussion Program: UW Medicine/Harborview

www.uwmedicine.org/sportsconcussion

Toll Free Number: 1-877-900-4323

Location: Seattle

Seattle Sports Concussion Program: Seattle Children's Hospital

<http://www.seattlechildrens.org/clinics-programs/orthopedics/services/seattle-sports-concussion-program>

206-987-2109

Location: Seattle & Bellevue

Dr. Lockhart – Children's Hospital

Seattle Children's Hospital – Bellevue

206-987-7678

Dr. Fry, MD

#425-999-4568

Located: Evergreen Hospital

If you choose to have your child seen by another health care provider, it's important that they are seen by one that is recognized by the WIAA which are credentialed to provide concussion management and care. They are the following:

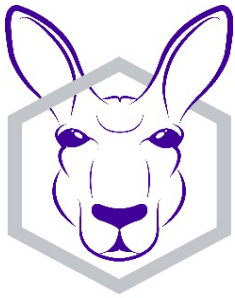
- Medical Doctors (MD)
- Doctor of Osteopathy (DO)
- Advanced Registered Nurse Practitioner (ARNP)
- Physician's Assistant (PA)

For concussion related issues, only these WIAA Health Care Providers can provide a release back to the school & sport activities from their concussion injury. The Athletic Trainer can work with these Healthcare providers but will need a medical clearance from one of them before the Athletic Trainer can complete the school districts protocols.

LWHS RETURN TO PLAY PROGRESSION

STEPS	ACTIVITY STRATEGY	EXAMPLE	OBJECTIVE
1	Symptom Stage - limited activity	Daily activities that do not exacerbate symptoms (e.g, walking)	Gradual reintroduce work/school
2A	Aerobic Activity - <i>Light</i> {up to approx 55% max HR}	Stationary cycling or walkign at slow to medium pace. May start light resistance training that does not result in more than mild and breif exacerbation * of concussion symptoms. 220 - age x 0.55 = training target HR	Increase heart rate
2B	Aerobic Activity - <i>Moderate</i> {up to approx 70% max HR}	Same as 2A but increase training target HR 220 - age x 0.7 = training target HR	Increase heart rate
3	Individual sport-specific exercise NOTE: if sport-specific exersise invovles any risk of head impact, medical determination of readiness should occure prior to step 3	Sport-specific training away from the team enviroment (e.g., running, change of direction and/or individual training drills away from the team enviornment). No activities at risk of head impact.	Add movement, change of direction
Steps 4-6 should begin after resolution of any symptoms, abnormalities in congitive function, and any other clincal findings related to the current concussion, including with and after physical exertion.			
4	Non-contact training drills	Exercise to high intensity including more challenging training drills (e.g., passing drills, multiplayer training). Can integrate into team enviroment.	Resume usual intensity of exercises, coordination, and increased thinking
5	Full contact practice	Particpate in normal training activities	Restore confidence and assess functional skills by coaching staff.
6	Return to sport (<i>Doctor note required before this stage</i>)	Normal game play	

Note: * Mild and brief exaceration of symptoms (i.e., an increase of no more than 2 points on a 1-10 point scale for less than an hour when compared with the baseline value reported prior to physical activity). Athletes may begin Step 1 (i.e., symptom stage - limited activity) within 24 hours of injury, with progression through each subsequent step typically taking a minimum of 24 hours. If more than mild exacerbation of symptoms (i.e., more than 2 points on a 0-10 scale) occurs during Steps 1-3, the athlete should stop and attempt to exerciese the next day. If an athlete experiences concussion-related symptoms during Steps 4-6, they should return to Step 3 to establish full resolution of symptoms with exertion before engaging in at-risk activites. Written determination of readiness to RTS should be provide by HCP before unrestricted RTS as directed by local laws and/or sporting regulations.



Concussion Symptoms

NAME:

SPORT:

DATE OF INJURY:

AGE:

HR 55%:

HR 70%:

	DATE	DATE	>1HR	DATE	>1HR	DATE	>1HR	DATE	>1HR	DATE	>1HR	DATE	>1HR
HEADACHE													
PRESSURE IN HEAD													
NECK PAIN													
NAUSEA/VOMITING													
DIZZINESS													
BLURRED VISION													
BALANCE PROBLEMS													
SENSITIVE TO LIGHT													
SENSITIVE TO NOISE													
FEELING SLOWED DOWN													
FEELING LIKE "IN A FOG"													
"DON'T FEEL RIGHT"													
DIFFICULTY CONCENTRATING													
DIFFICULTY REMEMBERING													
FATIGUE OR LOW ENERGY													
CONFUSION													
DROWSINESS													
MORE EMOTIONAL													
IRRITABILITY													
SADNESS													
NERVOUS OR ANXIOUS													
TROUBLE FALLING ASLEEP													
OUT OF 220 SCALE													
TOTAL SYMPTOMS													

Rating Scale 0-10 0 = No Symptoms 1 = Mild 5 = Moderate 10 = Severe