



Concussion Procedure and Protocol For Cal North District 6 Recreational Teams U-14 & Below

Concussion: a traumatic brain injury that interferes with normal brain function. Medically, a concussion is a complex, pathophysiological event to the brain that is induced by trauma which may or may not involve a loss of consciousness (LOC). Concussion results in a constellation of physical, cognitive, emotional, and sleep-related symptoms. Signs or symptoms may last from several minutes to days, weeks, months or even longer in some cases.

CONCUSSION SIGNS, SYMPTOMS, AND MANAGEMENT AT TRAINING AND COMPETITIONS

Did a concussion occur?

Evaluate the player and note if any of the following signs and/or symptoms are present:

- (1) Dazed look or confusion about what happened.
- (2) Memory difficulties.
- (3) Neck pain, headaches, nausea, vomiting, double vision, blurriness, ringing noise or sensitive to sounds.
- (4) Short attention span. Can't keep focused.
- (5) Slow reaction time, slurred speech, bodily movements are lagging, fatigue, and slowly answers questions or has difficulty answering questions.
- (6) Abnormal physical and/or mental behavior.
- (7) Coordination skills are behind, ex: balancing, dizziness, clumsiness, reaction time.

Is emergency treatment needed?

This would include the following scenarios:

- (1) Spine or neck injury or pain.
- (2) Behavior patterns change, unable to recognize people/places, less responsive than usual.
- (3) Loss of consciousness.
- (4) Headaches that worsen
- (5) Seizures
- (6) Very drowsy, can't be awakened
- (7) Repeated vomiting
- (8) Increasing confusion or irritability
- (9) Weakness, numbness in arms and legs

If a possible concussion occurred, but no emergency treatment is needed, what should be done now?

Focus on these areas every 5-10 min for the next 1-2 hours, without returning to any activities:

- (1) Balance, movement.
- (2) Speech.
- (3) Memory, instructions, and responses.
- (4) Attention on topics, details, confusion, ability to concentrate.
- (5) State of consciousness
- (6) Mood, behavior, and personality
- (7) Headache or "pressure" in head
- (8) Nausea or vomiting
- (9) Sensitivity to light and noise

Players shall not re-enter competition, training, or partake in any activities for at least 24 hours.

In the case of a possible concussion (Coach's Responsibilities):

The player may return to Cal North and/or US Youth Soccer play only after release from a medical doctor or doctor of osteopathy trained in concussion treatment and management.

The Concussion Notification Form is to be filled out in duplicate and signed by a team official of the player's team.

If a parent/legal guardian of the player is present, have the parent/legal guardian sign and date the Form, and give the parent/legal guardian one copy of the completed Form. If the parent/legal guardian is not present, then the team official is responsible for notifying the parent/legal guardian ASAP by phone or email and then submitting the Form to the parent/legal guardian by email or mail.

When the parent/guardian is not present, the team official must make record of how and when the parent/legal guardian was notified. The notification will include a request for the parent/legal guardian to provide confirmation and completion of the Concussion Notification Form whether in writing or electronically.

The team official must surrender the player pass to the D6 PAD Chair (see below Supplemental Procedure). The player pass will not be returned until a Medical Release has been received by the D6 PAD Chair. After the Medical Release has been completed by an appropriate doctor and returned to the D⁶ PAD Chair, the D6 PAD Chair then must send a copy of the Medical Release to the Cal North office (1040 Serpentine Lane, Suite 206, Pleasanton, CA 94556 or fax 925-426-9473), or preferably email it to medicalclaims@calnorth.org.

Players may wear their jersey, but must not be in full uniform until the D6 PAD Chair has received the Medical Release, **and the pass has been returned to the team official.**

References:

Kissick MD, James and Karen M. Johnston MD, PhD. "Return to Play After Concussion." Collegiate Sports Medical Foundation. Volume 15, Number 6, November 2005.

<http://www.csmfoundation.org!Kissick - return to play after concussion -CJSM 200S.pdf>.

April 22, 2011.

National Federation of State High School Associations, "Suggested Guidelines for Management of Concussion in Sports". 2008 NFHS Sports Medicine Handbook (Third Edition). 200877-82.

<http://www.nfhs.org>. April 21, 2011.

Supplemental Procedures:

(1) The Referee shall retain the player's pass and prepare a Referee's report of a send-off for possible concussion. Both pass and report are to be forwarded to the D6 PAD Chair (4518 Wellesly Way, Sacramento, CA 95861) by U.S. mail or by hand delivery within 24 hours of the occurrence. The Referee's report is the D6's Send off Report with noting the Concussion Reason (found in D6 Soccer.com under referee)

(2) Upon receipt of the Referee's report and player pass, the D6 PAD Chair shall notify the appropriate League President and the appropriate Club Manager of the Concussion send-off.

(3) After completion of the Cal North Concussion Notification form, and within 24 hours of the possible concussion occurrence, the coach shall forward a signed copy of the Cal North notification form to the D6 PAD Chair (4518 Wellesly Way, Sacramento, CA 95861), who will send it on to Cal North.

(4) The D6 PAD Chair shall retain the player's pass until a notification to release the pass has been received from Cal North