



# **FARMINGTON YOUTH LACROSSE**

## **Concussion Management Policy**

*When in doubt, sit them out!*

Farmington Youth Lacrosse (FYL) is committed to a “safety first” attitude toward our young athletes. In recent times it has become more and more apparent that concussions have become an unwelcome and sometimes unrecognized problem in youth sport. Accordingly, we have adopted this written policy designed to protect our student athletes through two important areas: injury recognition and return to sport.

Every coach in FYL is required to read and adhere to this document and its enclosures as well as take the Online Training Course sponsored by US Lacrosse and the Centers for Disease Control and Prevention (CDC).

Coaches must understand what concussion is, as well as the signs and symptoms necessary to recognize it. Following guidelines from the American Academy of Pediatrics, if the athlete has been unconscious, assume cervical spine injury. Do not move the athlete until function in all four limbs is found to be intact and the athlete has no reported neck pain or cervical spine tenderness. If there is any doubt, or if qualified medical help is not available on the field, the athlete should be brought to an emergency facility. An athlete who was not unconscious or is not suspected of having a cervical spine injury can be further evaluated on the sidelines.

The two most common concussion symptoms are confusion and amnesia. Amnesia almost always includes the loss of memory of the impact that caused the concussion. Sideline evaluation of symptoms can be assessed using a brief set of questions to evaluate orientation as well as short and long-term memory related to the sport and current game. The policy and questions are included in a short version by US Lacrosse/CDC included with this document.

### ***If a concussion is identified:***

- The athlete should be removed from the remainder of the practice or game on that day.
- The athlete’s parent/guardian should continue to monitor the condition for several hours after the injury to evaluate for any deterioration.
- Referral to an emergency room is warranted if an athlete experiences repeated vomiting, severe or progressively worsening headache, seizure activity, unsteady gait or slurred speech, weakness or numbness in the extremities, or unusual behavior.
- Under no circumstances should athletes ultimately diagnosed with concussion return to play the same day of their concussion.
- Subsequent to diagnosis of concussion, the athlete cannot be readmitted to full-contact practices or games without written authorization from his/her physician received by the coach.
- The athlete must undergo a graduated return to play regime. Most athletes recover within several days. Each level equates to 24 hours (or one practice) with no returning symptoms before moving to the next level. Any return of symptoms in the athlete should be reported immediately to the parent/guardian. If any symptoms do occur, the athlete should be dropped

back to the previous level and try to complete that level after a 24-hour rest. The progression levels are listed below:

- 1) No activity with complete physical and cognitive rest
- 2) Light aerobic exercise (less than 70% of maximum heart rate)
- 3) Sport specific exercise (drills specific to athlete's sport)
- 4) Non-contact training drills (more intense sport drills with no contact from other players)
- 5) Full contact practice (following medical clearance)
- 6) Return to play (normal game play)

US Lacrosse, in conjunction with the CDC, has compiled concussion related resources to assist youth sports programs, parents and players. FYL strongly recommends that ALL player parents or guardians familiarize themselves and their sons and daughters with this information:

US Lacrosse/CDC Coaches Online Concussion Training Course

[http://www.cdc.gov/concussion/HeadsUp/online\\_training.html](http://www.cdc.gov/concussion/HeadsUp/online_training.html)

Coaches Fact Sheet:

[http://www.cdc.gov/concussion/pdf/coaches\\_Engl.pdf](http://www.cdc.gov/concussion/pdf/coaches_Engl.pdf)

Parents Fact Sheet:

[http://www.cdc.gov/concussion/pdf/parents\\_Eng.pdf](http://www.cdc.gov/concussion/pdf/parents_Eng.pdf)

## Sources

Mark E. Halstead, MD, Kevin D. Walter, MD and the Council on Sports Medicine and Fitness; American Academy of Pediatrics. *Sport-Related Concussion in Children and Adolescents*. Published online September 1, 2010. PEDIATRICS Vol. 126, No. 3, September 2010, pp. 597-615 (doi:10.1542/peds.2010-2005)

US Lacrosse. *Concussion Management*. Accessed Online November 24, 2010.

<http://www.uslacrosse.org/UtilityNav/AboutTheSport/SportsScienceandSafety/ConcussionManagement.aspx>

National Center for Injury Prevention and Control. *Heads Up: Concussion in Youth Sports, Activity Report, (2007-2008)* Centers for Disease Control and Prevention. 2008.

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