

Concussion and Head Injury Acknowledgement

GRAHAM-DUSTIN PUBLIC SCHOOLS

WHAT IS A CONCUSSION?

A concussion is a brain injury and is caused by a bump or blow to the head. It can change the way your brain normally works and can occur during practice or games in any sport. It can happen even if you have not been knocked out and can be serious even if you have just been "dinged".

WHAT ARE THE SYMPTONS OF A CONCUSSION?

Symptoms include: heache or "pressure in the head, nausea or vomiting, balance problems or dizziness, sensitivity to light and/or noise, feeling sluggish-hazy-foggy-or groggy, concentration or memory problems, confusion, and will not "feel right".

WHAT SHOULD I DO IF I THINK I HAVE A CONCUSSION?

1. **Tell your coach or parents.** Neve ignore a bump or blow to the head even if you feel fine. Also, tell your coach if one of your teammates may have a concussion.
2. **Get a medical checkup.** A doctor or health care professional can tell you if have a consussion and when you are OK to return to play.
3. **Give yourself time to get better.** If you have had a concussion, your brain needs time to heal. While your brain is still healing, you are much more likely to have a second concussion. Additional concussions can cause damage to your brain. It is important to rest until you get approval from a doctor or health care professional to return to play.

HOW CAN I PREVENT A CONCUSSION?

1. Follow your coach's rules for safety and the rules of the sport.
2. Practice good sportsmanship.
3. Use the proper equipment, including personal protective equipment (such as helmets, padding, shin guards and eye and mouth guards-- IN ORDER FOR EQUIPMENT TO PROTECT YOU, it must be the right equipment for the game, position, and activity; it must be worn correctly and used every time you play.

FOR MORE INFORMATION VISIT:

www.cdc.gov/TraumaticBraininjury/

www.oata.net

www.ossaa.com

www.nfhslearn.com

In compliance with Oklahoma Statute Section 24-155 of Title 70, this acknowledgement form is to confirm that you have read and understand the Concussion Fact Sheet provided to you by Graham-Dustin Public Schools related to potential concussions and head injuries occuring during participation in athletics.

I, _____, as a student-athlete who participates in Graham-Dustin School athletics and I, _____, as the parent/legal guardian, have read the information material provided to us by Graham-Dustin Public Schools related to concussions and head injuries occuring during participation in athletic programs and understand the content and warnings.

STUDENT-ATHLETE SIGNATURE _____

DATE _____

PARENT/LEGAL GUARDIAN SIGNATURE _____

DATE _____

This form should be completed annually prior to the athlete's first practice and/or competition and be kept on file for one year beyond the date of signature in the principal's office or the office designated by the principal.

