WHAT’S IN A CONCUSSION MANAGEMENT PLAN?

Concussions are among the five most frequent injuries for both boys and girls lacrosse players. Teams, leagues and clubs should have a documented plan, reviewed and updated annually, to deal with these injuries.

WHAT SHOULD THE PLAN INCLUDE?
- Education
- Signs & Symptoms for removal from play
- Return to school & return to play

WHO NEEDS EDUCATION?
- Parents
- Athletes
- Coaches

FACT: Boys have a 50% greater risk of concussion than girls.

10 SIGNS OF CONCUSSION AS OBSERVED BY OTHERS
- Appears dazed or stunned
- Confused about assignment or position
- Forgets an instruction
- Unsure of game, score or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior or personality changes
- Can’t recall events prior to hit or fall
- Can’t recall events after hit or fall

10 SYMPTOMS OF CONCUSSION REPORTED BY ATHLETE
- Headache or pressure in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light or noise
- Feeling sluggish, hazy, foggy or groggy
- Concentration or memory problems
- Confusion
- Does not “feel right”
- Is “feeling down”

RETURN TO SCHOOL & RETURN TO PLAY

A graduated return to activity should be used after getting clearance from a qualified healthcare professional. Support from school for classes, exams and schoolwork is important. The return-to-play and return-to-school progression has seven steps:

1. Rest
2. Return to school and/or daily non-athletic activities
3. Begin aerobic exercise
4. Sport specific training/catching and throwing
5. Non-contact drills/line drills
6. Controlled full contact activity/scrimmage
7. Full return to play and game competition

US LACROSSE’S GUIDELINES FOR A CONCUSSION MANAGEMENT PLAN ARE AVAILABLE ONLINE AT USLACROSSE.ORG/CONCUSSIONAWARENESS