

Concussion Policy

Date in effect: August 2017

This Concussion Policy is to apply to all skaters, regardless of their age or their level of participation.

Introduction

The following policy is based on the ongoing work being done by the Concussion in Sport Group and their latest 2017 "Consensus statement on concussion in sport—the 5th international conference on concussion in sport", held in Berlin, October 2016 and in reference to Skate Canada Concussion Policies, and the "Canadian Guideline on Concussion in Sport".

The guidelines within this policy aim to ensure that athletes with a suspected concussion receive timely and appropriate care, and proper management to allow them to return to their sport. Without identification and proper management, effects of a concussion can persist or can result in permanent or severe brain damage.

These guidelines are for general informational purposes only. They are not intended to and do not constitute medical advice and do not contain any medical diagnoses, symptom assessments or medical opinions. Sources for information are cited on the last page of this document.

Definition:

A concussion:

- is a brain injury that causes changes in how the brain functions, leading to symptoms that can be physical (e.g. headache, dizziness), cognitive (e.g., difficulty concentrating or remembering), emotional/behavioral (e.g., depression, irritability) and/or related to sleep (e.g., drowsiness, difficulty falling asleep);
- may be caused either by a direct flow to the head, face or neck, or a blow to the body that transmits a force to the head that causes the brain to move rapidly within the skull (including whip-lash movement);
- results from the rapid movement of the brain within the skull;
- can occur even if there has been no loss of consciousness (in fact most concussions occur without a loss of consciousness);
- cannot normally be seen on X-rays, standard CT scans or MRIs;
- can result in symptoms that are evident immediately, or may evolve and persist over the course of hours, days or even months.

While most individuals will make a complete recovery and be able to return to full school and sport activities within a few weeks with proper medical attention, some athletes will experience symptoms that persist much longer and prevent return to sport for more extended time periods.

Initial Response to Suspected Concussion Trauma: Removal from Play

An individual responsible for those who are participating in organized physical activity who believes that, following a blow to the head, face or neck, or a blow to the body that transmits a force to the head, a participant in the activity may have suffered a concussion needs to take immediate action.

- If the participant is unconscious as a result of a trauma occurred during a skating activity:
 - o Dial 911.
 - Do not move the participant;
 - Wait for paramedics to arrive.
- If the participant **is conscious** after the trauma:
 - The participant must be treated according to current standard First Aid procedure.
 - The participant should not be left alone.
 - Symptoms should be documented and may include:
 - Loss of consciousness
 - Seizure or convulsion
 - Amnesia
 - Headache
 - Pressure in head
 - Neck pain
 - Dizziness
 - Blurred vision
 - Balance problems
 - Sensitivity to light

 - Sensitivity to noise
 - Feeling slowed down

- Feeling like "in a fog"
- "Don't feel right"
- Difficulty concentrating
- Difficulty remembering
- Fatigue or low energy
- General confusion
- More emotional
- Depression or irritability
- Sadness
- Nervous or Anxious
- Drowsiness
- Difficulty falling asleep.
- If any one or more of the signs or symptoms is present, a concussion should be suspected.
- Coaches are never to make the concussion determination in the field on their own.
- If there is doubt as to whether a concussion has occurred, it is to be assumed that it has occurred.
- The participant's parent/guardians will be contacted and they will be required to have the injury properly assessed at a hospital or medical clinic.

Return to Play after a Suspected Concussion

A participant must undergo medical evaluation for diagnosis and guidance to determine the extent of the individual's injury by a licensed healthcare professional, preferably one who is trained in concussion management.

- If concussion **IS NOT** diagnosed, the participant may return to the sport.
- If a concussion **IS** diagnosed, the participant is not allowed to skate until the individual has completed the 6 STEPS TO RETURN TO PLAY and receives written medical clearance to return to programming (on or off ice).
- Return to play guidelines are clearly stated in "Canadian Guideline on Concussion in Sport"

 http://www.parachutecanada.org/injury-topics/item/canadian-guideline-on-concussion-in-sport

Guidelines to Return to Figure Skating after a Concussion Diagnosis

Suggested guidelines have been adapted to be sport relatable (following the example of other skating federations). (4)

Example of Steps – Each step must take a minimum of one day.

- **Step 1**: An initial period of 24-48 hours of rest. Once there are no signs or symptoms experienced (cleared by doctor), go to Step 2.
- **Step 2**: Light aerobic exercise such as walking or stationary cycling for 10-15 minutes.
- **Step 3**: Sport specific aerobic activity skating for 20-30 minutes. No jarring motions.
- **Step 4**: Sport specific activity Increased intensity and/or length of time. No jumping, no spinning. No contact.
- **Step 5:** Resume normal skating activities, having been cleared by a medical professional.

Note: If the participant experiences any symptoms during the above activities, the participant must stop the activity immediately, rest until symptoms resolve, for a minimum of 24 hours, and go back to the previous step. (2)

- **Step 6:** The Return to Play form must be completed by a healthcare professional.
 - Considerations/Restrictions with respect to returning to skate must be documented.
 - A copy of this form must be given to the primary coach and club administrator/office.
 - The document must indicate that the individual is symptom-free and able to return to full participation in physical activity.

Disclaimer/Waivers

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Registration Forms:

• All skaters (or if under 18 their parents/guardians) who register with Arctic Edge Skating Club (AESC) must indicate during the on line registration that they have read the AESC Concussion Policy. The policy will be posted on the AESC website.

Cited Sources

- 1. McCrory P, Meeuwisse W, Dvořák J, et al Consensus statement on concussion in sport—the 5th international conference on concussion in sport held in Berlin, October 2016. *Br J Sports Med* 2017;51:838-847. http://bjsm.bmj.com/content/51/11/838
- 2. Parachute. (2017). *Canadian Guideline on Concussion in Sport*. Toronto: Parachute. http://www.parachutecanada.org/injury-topics/item/canadian-guideline-on-concussion-in-sport
- 3. Skate Canada. Skate Canada Draft Policy: Concussion. https://info.skatecanada.ca/hc/en-ca/article.../SC_Draft_Policy_-_Concussion_EN.pdf
- 4. Skate Ontario. Skate Ontario Concussion Policy. http://www.skateontario.org/wp-content/uploads/2009/09/Ver-2-2015-Skate-Ontario-Concussion-Policy.pdf

Medical Assessment Form and Medical Clearance to Return to Skate Forms follow on the next pages.



Medical Assessment Form

Name of Skater:	Date of sustained injuries:
Results of Medical Assessment:	
☐ This patient has not been diagnosed	with a concussion and can resume full participation in
school, work, and sport activities wi	thout restriction.
☐ This patient has not been diagnosed	with a concussion but the assessment led to the
following diagnosis and recommend	ations:
☐ This patient has been diagnosed wit	h a concussion.
Considerations/restrictions with respec	ct to returning to skate:
Name of Treating Physician:	
Signature of Treating Physician:	
Clinic:	Clinic Phone Number:
Date:	

Personal information used, disclosed, secured or retained by Arctic Edge Skating Club / Skate Canada – BC/YK Section will be held confidentially and safely for the purpose for which we collected it.



Medical Clearance / Return to Skate Form

Name of Skater:	Date:
tolerated, effective on the above of Symptom-limiting activity symptoms) Light aerobic activity (Wamin. No resistance training Sport-specific aerobic activities)	y (cognitive and physical activities that don't provoke alking or stationary cycling at slow to medium pace; 10-15 g.) ivity (running or skating drills; 20-30 min. No head impact or der training drills; increased intensity and/or length of time. No contact.)
	n respect to returning to skate:
Name of Treating Physician:	
Signature of Treating Physician:	
Clinic:	Clinic Phone Number:
Date:	

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