Omaha Public Schools Sports Medicine Advisory Committee
Parent and Student Athlete Concussion Information
and Fact Sheet

In the fall of 2008, the Certified Athletic Trainers and Physicians working with OPS began utilizing new guidelines to evaluate, assess, and manage concussions incurred by OPS student athletes. Since then the guidelines have been reviewed and updated annually to reflect emerging best practices in the recognition and management of concussions in youth sports.

Did You Know?
According to the Center for Disease Control and other publications:

- Each year 300,000 athletes suffer sports-related concussions.
- The national estimate for concussions in high school athletes is 136,000.
- In ages 15-24, sports are the 2nd leading cause of traumatic brain injury.
- Most studies done on concussions focus on the “mature” brain and thus, we cannot ignore the fact that the young brain is still developing and the effects of concussions are not fully understood.
- High school athletes who sustain a concussion demonstrate prolonged memory dysfunction compared with college athletes.
- A concussion is: “getting your bell rung,” and “getting dinged.”
- Failure to recognize and properly manage a concussion can lead to a catastrophic injury known as “second impact syndrome.”
- Second impact syndrome can be catastrophic, even fatal.
- Second impact syndrome is preventable – if concussions are recognized and properly managed.
- On April 18, 2011, LB 260 – “The Concussion Awareness Act” was signed into law with the intent to protect the youth participating in athletics across the state from the dangers of concussions that are often unrecognized, undiagnosed, and/or mismanaged.

Sources:

Concussions may result from sudden trauma, such as sports injuries, that cause the brain to hit the inside of the skull.

According to a study by McCrea published in 2004, The top reasons for athletes not reporting concussions were:
1. Didn’t think the concussion was serious.
2. Didn’t want to leave the game.
3. Didn’t realize a concussion was sustained.
4. Didn’t want to let down their teammates.

WHAT DOES A CONCUSSION LOOK LIKE?

<table>
<thead>
<tr>
<th>SIGNS:</th>
<th>SYMPTOMS:</th>
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<tbody>
<tr>
<td>1. Appears dazed or stunned</td>
<td>1. Headache or “pressure” in the head</td>
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<td>2. Is confused about an assignment</td>
<td>2. Nausea</td>
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<td>3. Forgets plays</td>
<td>3. Balance problems or dizziness</td>
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<td>4. Moves clumsily or displays problems with balance and coordination</td>
<td>4. Double or fuzzy vision</td>
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<td>5. Loses consciousness (even briefly)</td>
<td>5. Sensitivity to light or noise</td>
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<td>6. Shows behavioral of personality changes</td>
<td>6. Feeling slowed down, foggy, or groggy</td>
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<td>7. Does not “feel right”</td>
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Parent/Guardian Keep This Sheet