



Concussion and Injury Policy

Objective:

To ensure that injured players are protected, return to play in a safe manner and the injury is reported in a proper format.

Applicability:

This policy applies to all NCHA players.

Process:

Hockey Canada injury form must be filled out:

- A player is removed from play for the remainder of a period or game due to an injury sustained while playing hockey (Example: A player injured in the first period, but who returns to play in the second or third period would have a form filled out for them).
- A player is injured during a practice, whether on or off the ice.
- A player is forced to leave play for an unknown health reason.
- To be completed in full by team trainer or other team official.
- **To be completed and submitted to the NOHA within 90 days.**

In the event that a player gets hit, or falls and shows any signs of a concussion (loss of consciousness, nausea, vomiting and disorientation) the team trainer will proceed with the following;

- The player will immediately cease play.
- The player will be taken to the dressing room where the team trainer will review with the player and the parents / guardian the plan for return to play.
- In any situations where the team trainer feels there may be any signs of concussion, it is recommended the player's parents / guardian take the player to be evaluated by a qualified physician.
- The player will be provided with the following documentation:
 - Hockey Canada Injury Report — parent or guardian must



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- request to have the information on page 2 completed (form attached).
- Return to Play Form — must be signed by the physician after the player has met specific targets and tests (form attached).
 - Hospital Patient Information Sheet — this document is handed out to all concussion victims that go to the hospital and are confirmed to have a concussion. This document explains the definition of a concussion, what to expect at the emergency, what to do at home and when and why you should return to the emergency after the examination. This document also explains the minimum expected steps to be followed regardless of the grade of the concussion in order to return to sports (form attached).
 - After the concussion is confirmed, the team plan for return to play is as follows:
 - 4 days minimum no on ice activity (this has been confirmed by doctors and publications - the number of days can change depending on the severity of the concussion), but as confirmed by the physician.
 - On the 5th day the player can come on the ice (supervised by the team trainer) for a skating session only. Very limited team interaction of drills. Concussed player will wear a safety vest identifying him or her as a concussed player that cannot participate in any contact. If the player can skate and shows no signs or symptoms they can then proceed to the next steps, following physician approval.
 - The player will then join the team for a standard practice but again wear the safety vest identifying the player as concussed. If the player can participate in all aspects of the practice and shows no signs or symptoms they can then proceed to the next steps.
 - The player can then go back to see their physician to get final approval and sign off on the “Return to Play” form by the doctor.
 - No player will be able to return to full contact play without the doctor's consent.



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- It is important to note that at any time in any of the steps, if a player starts to show symptoms due to the concussion, the player will need to go back one step and slow the process down.
- We also need to keep in mind that rushing the process will inevitably result in the player being out for a longer period of time or indefinitely.

Any abnormalities can be discussed with the team trainer but if the trainer requests to have a “Return to Play” form signed by a physician, this decision will be final and mandatory.



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PATIENT INFORMATION SHEET

CONCUSSION IN CHILDREN

A concussion is any injury to the head that may cause loss of consciousness or confusion or amnesia (memory loss). You don't need to hit your head or be knocked out to develop a concussion. A sudden jerk or jarring motion can also cause an injury to the brain. After a concussion, symptoms of a "Post-Concussion Syndrome" may appear including: headache, poor concentration, dizziness, blurred vision, fatigue and inability to do normal activities. No sports or other contact activities should be played until all symptoms are completely better — both at rest and during no contact exertion. Severe brain injury can occur if a second concussion occurs before the first injury is completely better.

WHAT TO EXPECT IN THE EMERGENCY DEPARTMENT:

Your doctor will examine your child to determine the severity of the concussion and to look for other possible injuries. Skull x-rays are rarely done in the emergency department. Most children with a concussion can be safely diagnosed without any special tests. Concussions are usually graded as Grade 1 (mild) to Grade 3 (severe - any loss of consciousness).

WHAT TO DO AT HOME:

During the first day, watch your child closely for changes in behavior. Your child may be tired and want to sleep after the injury. After one hour, wake your child up. They should wake up easily and act normally. During the first night after the injury, wake your child for a few minutes every 2 to 3 hours (or as directed by your doctor). Your child should wake and act normal. During the first few hours, only give clear fluids to prevent nausea and vomiting. Give acetaminophen (Tylenol, Tempra, Panadol) to relieve mild headaches and help your child feel more comfortable.



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RETURN TO THE EMERGENCY DEPARTMENT IMMEDIATELY IF YOUR CHILD DEVELOPS:

- A convulsion (seizure).
- Confusion — can't remember their name or their age.
- Dizziness or unsteadiness on their feet.
- Vomiting more than twice.
- A change in personality or behavior.
- A severe headache or a fever.
- Drainage of blood or fluid from their nose or ear(s).
- A new problem or does not improve as expected.

SUGGESTED STEPS IN RETURNING TO SPORTS:

1. No sports. Rest until all symptoms are gone.
2. Walking and simple activities.
3. Sport specific exercises (skating for hockey, running for soccer).
4. Non-contact play.
5. Contact practice after medical clearance.
6. Game play.

If symptoms occur (headache, dizziness, nausea) with any step, return to previous step until symptoms disappear. This may be several days at each step.

REFERENCE

McCrary P et al. Summary and agreement statement of the 2nd International Conference on Concussion in Sport, Prague 2004. Br J Sports Med 2005;39:196-204.