

# Head/Brain Injury Home Education

LOUDOUN COUNTY PUBLIC SCHOOLS



A Concussion is a Traumatic Brain Injury (TBI) caused by a direct blow to the head, neck, or body, that may cause the brain to move rapidly back and forth in the skull, resulting in a brain injury. This disturbance in normal brain function causes a metabolic crisis rather than a specific structural brain injury that may affect a child’s learning and performance. If suspected, a concussion should be reported to a medical professional right away to ensure the proper steps are taken to support a prompt and full recovery.

Signs and symptoms of a concussion may appear immediately after the injury or become apparent over the next couple of hours or days. Diagnostic testing, including CT and MRI scans, are rarely needed following a concussion. While these are helpful in identifying life-threatening brain injuries, like bleeding in the brain, a concussion does not “show up” on standard CT or MRI. Concussions are diagnosed based on the student-athlete’s description of the injury or event, the student-athlete’s reported symptoms, and the licensed healthcare provider’s examination. Continue to monitor the child and use the checklists below to assist in identifying a possible brain injury and seek medical care when indicated. *Adapted from CDC Heads Up/Concussion Signs and Symptoms and <https://concussion.gmu.edu>*

## Concussion Signs and Symptoms:

Physical			
Fatigue/Drowsiness		Fatigue	
Balance Problems		Visual Problems	
Headache		Dizziness	
Nausea/Vomiting		Sensitivity to Light/Noise	
Cognitive			
Dazed	Slow to Respond	Difficulty Remembering	Mentally Foggy
Unable to Recall Events	Repeated Questioning	Difficulty Concentrating	Feeling Slowed Down
Emotional			
Increased irritability	Sadness	Anxiousness	Dwelling on Negative Feelings
Nervousness	Emotional reactivity	Nervous	More emotional
Sleep			
Sleeping More/Less		Drowsiness	
Daytime Fatigue		Trouble falling asleep or staying asleep	

**DO NOT drive while you have symptoms until cleared by an approved, licensed healthcare professional (HCP).**  
**DO NOT participate in sports or recreational physical activities until cleared by an approved, licensed HCP.**

### When to Immediately Seek Medical Care

*Adapted from [https://www.cdc.gov/headsup/basics/concussion\\_danger\\_signs](https://www.cdc.gov/headsup/basics/concussion_danger_signs)*

If you observe any of the symptoms below, go to the emergency department **immediately**:

- Loss of Consciousness
- Seizure
- Headache that worsens or does not go away
- Very drowsy or unable to wake up
- Repeated Vomiting
- Increasing confusion
- Neck Pain
- Slurred speech
- Weakness/numbness in extremities
- Unusual behavior change
- Can’t recognize people or places
- Significant irritability
- Less responsive than usual
- Decreased coordination

### Returning to School

Should a concussion be suspected or diagnosed, the concussion management team (CMT) will create an individualized student support plan (SSP) based on feedback from you as well as your child’s teachers, coaches, and school-based healthcare professionals to support your student’s successful return to school. The CMT may provide your student with support such as extra time or help with classwork, homework, quizzes, exams, and mental rest breaks during the day as needed. We will advance your student as tolerated based on observed physical and cognitive progress and information provided from you, your student, and school staff. The CMT lead will keep you updated on your student's progress.

*\*All suspected brain injuries should be evaluated, diagnosed, and supervised by an **approved, licensed HCP** such as a Certified Athletic Trainer (ATC), Medical Doctor (MD), Doctor of Osteopathic Medicine (DO), Physician Assistant (PA), Certified Nurse Practitioner (CNP), Neuropsychologist, or Physical Therapist (PT). The (CMT) and appropriate school personnel will be notified of all suspected or diagnosed brain injuries in students.*

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## Home Support Checklist

Please, use this checklist to coordinate your child's care and recovery.

<p><b>Communicate</b> Coordinate communication between healthcare providers and your school team. Keeping everyone updated on your child's progress is crucial to ensuring a full recovery.</p>	<p><b>Monitor</b> Pay attention to symptoms and suggest breaks when symptoms are increasing.</p>	<p><b>Advocate</b> Encourage your child to speak up when they are having difficulties. Discuss your child's recovery concerns with your healthcare provider and school concussion management team.</p>
<p><b>Nutrition</b> Support your child in eating a healthy diet of at least three meals daily. Food provides the energy needed to support recovery.</p>	<p><b>Hydration</b> Encourage your child to drink plenty of water. Having too little water can contribute to their symptoms.</p>	<p><b>Sleep</b> Stick to a consistent sleep schedule, with regular bedtime and waketime. Aim for 7-9 hours a night.</p>
<p><b>Physical Activity</b> Light aerobic activity has been shown to help recovery from injury. Start with a daily leisurely walk and progress gradually as tolerated under the supervision of your healthcare professional.</p>	<p><b>Stress</b> Try to reduce your child's stress by not focusing on symptoms. Celebrate wins such as completing assignments or projects and be proactive in meeting your school team to ensure your child doesn't fall too far behind in school.</p>	<p><b>Connect</b> Social connections can play a significant role in supporting mental wellness. Encourage a friend to visit or have your child attend light social gatherings as tolerated.</p>

### Returning to Sports (RTS)

The student-athlete should **NEVER** return to sports or recreational physical activity until they have been evaluated by an approved healthcare professional (HCP). A student may return to full activities when they have completed the Concussion in Sport Group Graduated Return-to-Sport (RTS) Strategy below AND have received **MEDICAL CLEARANCE** from an approved HCP. The school-based athletic trainer is the approved HCP within LCPS who will determine when the student-athlete can initiate and progress with physical activity, including when the student-athlete may return to sport competition. The LCPS athletic trainer has the final say in all LCPS return to sport decisions.

*There should be at least 24 hours (or longer) for each step of the below RTS progression.* If any symptoms worsen during exercise, the student-athlete should report this change in symptoms to the athletic trainer.

Graduated Return-to-Sport (RTS) Strategy			
Stage	Aim	Activity	Goal
1	Symptom-limited activity	Daily activities that do not provoke symptoms	Gradual reintroduction of work/school activities.
2	Light aerobic exercise	Walking or stationary cycling at a slow to medium pace. No resistance training.	Increased heart rate.
3	Sport-specific exercise	Running or resistance training. No head impact activities. Athlete initiated contact drills.	Add movement and resistance
4	Non-contact training drills	Harder training drills and sport-specific activity. Known or planned contact drills.	Exercise, coordination, and increased thinking.
5	Full contact practice	Full Participation: Unknown or unplanned contact drills allowed	Restore confidence and assess functional skills by coaching staff.
6	Return to sport	Normal game play upon clearance from HCP.	

EPatricios JS, Schneider KJ, Dvorak J, et al. Consensus statement on concussion in sport: the 6th International Conference on Concussion in Sport—Amsterdam, October 2022. British Journal of Sports Medicine 2023;57:695-711.

*If you have any questions or concerns, please contact the athletic trainer or CMT lead for your school.*