Northern Section, CIF
Concussion Information Sheet
A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, **all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly.** In other words, even a “ding” or a bump on the head can be serious. You can’t see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

### Symptoms may include one or more of the following:

<table>
<thead>
<tr>
<th>• Headaches</th>
<th>• Amnesia</th>
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<td>• “Pressure in head”</td>
<td>• “Don’t feel right”</td>
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<td>• Nausea or vomiting</td>
<td>• Fatigue or low energy</td>
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<td>• Neck pain</td>
<td>• Sadness</td>
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<td>• Balance problems or dizziness</td>
<td>• Nervousness or anxiety</td>
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<td>• Blurred, double, or fuzzy vision</td>
<td>• Irritability</td>
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<td>• Sensitivity to light or noise</td>
<td>• More emotional</td>
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<td>• Feeling sluggish or slowed down</td>
<td>• Confusion</td>
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<tr>
<td>• Feeling foggy or groggy</td>
<td>• Concentration or memory problems (forgetting game plays)</td>
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<td>• Drowsiness</td>
<td>• Repeating the same question/comment</td>
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<td>• Change in sleep patterns</td>
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### Signs observed by teammates, parents and coaches include:

- Appears dazed
- Vacant facial expression
- Confused about assignment
- Forgets plays
- Is unsure of game, score, or opponent
- Moves clumsily or displays incoordination
- Answers questions slowly
- Slurred speech
- Shows behavior or personality changes
- Can’t recall events prior to hit
- Can’t recall events after hit
- Seizures or convulsions
- Any change in typical behavior or personality
- Loses consciousness

Adapted from the CDC and the 3rd International Conference on Concussion in Sport
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Northern Section, CIF  
Concussion Information Sheet

What can happen if my child keeps on playing with a concussion or returns to soon?

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athlete will often under report symptoms of injuries. And concussions are no different. As a result, education of administrators, coaches, parents and students is the key for student-athlete’s safety.

If you think your child has suffered a concussion

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. The new CIF Bylaw 313 now requires implementation of long and well-established return to play concussion guidelines that have been recommended for several years:

“
A student-athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time and for the remainder of the day.”

and

“A student-athlete who has been removed may not return to play until the athlete is evaluated by a licensed health care provider trained in the evaluation and management of concussion and received written clearance to return to play from that health care provider”.

You should also inform your child’s coach if you think that your child may have a concussion. Remember it’s better to miss one game than miss the whole season. And when in doubt, the athlete sits out.

For current and up-to-date information on concussions you can go to:  
http://www.cdc.gov/ConcussionInYouthSports/

 Student-athlete Name Printed  
Student-athlete Signature  
Date

Parent or Legal Guardian Printed  
Parent or Legal Guardian Signature  
Date

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The language listed below may be used as a guideline to assist schools that are developing their “conditions of participation for student-athletes” and specifically with the new requirement under Bylaw 524.

Print Name of Student-Athlete

As a condition of membership in the CIF, all schools shall adopt policies prohibiting the use and abuse of androgenic/anabolic steroids. All member schools shall have participating students and their parents, legal guardian/caregiver agree that the athlete will not use steroids without the written prescription of a fully licensed physician (as recognized by the AMA) to treat a medical condition (Bylaw 524).

By signing below, both the participating student-athlete and the parents, legal guardian/caregiver hereby agree that the student shall not use androgenic/anabolic steroids without the written prescription of a fully licensed physician (as recognized by the AMA) to treat a medical condition. We also recognize that that under CIF Bylaw 200.D., there could be penalties for false or fraudulent information. We also understand that the (insert school/school district name here) policy regarding the use of illegal drugs will be enforced for any violations of these rules.

Signature of Athlete ______________________ Date ______

Signature of Parent/Caregiver ______________________ Date ______
**Player Agreement Form**

I, ________________________, will abide by all the eligibility rules as stated in the Athletic Handbook for Mercy High School.

I realize that my participation on an athletic team or extra-curricular activity is a privilege and not a right. As such, my continued participation is a function of whether or not I live up to the expectations outlined for me in this activity and in the *Athletic Handbook*.

_________________________  ___________________  ___________________
Signature of Athlete          Date                   Parent/Guardian          Date

Please return signed form to Athletic Director prior to participation.

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**MERCY HIGH SCHOOL FIGHT SONG**

Cheer Warriors, Cheer for your team  
Colors blue and white are supreme  
Send a rousing cheer on high  
Shake down the thunder from the sky

Although the odds may be great or small  
We'll pull right through and win over all  
While our loyal team is playing  
Playing to victory

*RAH! RAH! RAH!*