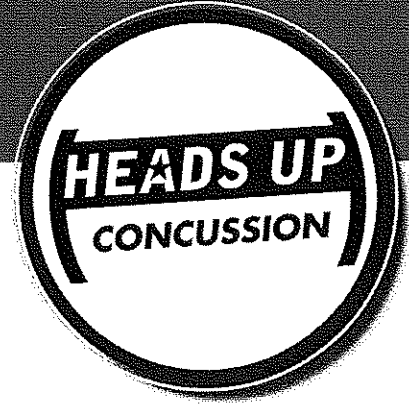


# LISBON CENTRAL SCHOOL

2018-2019

## PARENT & ATHLETE CONCUSSION INFORMATION SHEET



### WHAT IS A CONCUSSION?

A concussion is a type of traumatic brain injury that changes the way the brain normally works. A concussion is caused by a bump, blow, or jolt to the head or body that causes the head and brain to move quickly back and forth. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious.

### WHAT ARE THE SIGNS AND SYMPTOMS OF CONCUSSION?

Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury.

If an athlete reports one or more symptoms of concussion after a bump, blow, or jolt to the head or body, s/he should be kept out of play the day of the injury. The athlete should only return to play with permission from a health care professional experienced in evaluating for concussion.

### DID YOU KNOW?

- Most concussions occur without loss of consciousness.
- Athletes who have, at any point in their lives, had a concussion have an increased risk for another concussion.
- Young children and teens are more likely to get a concussion and take longer to recover than adults.

### SYMPTOMS REPORTED BY ATHLETE:

- Headache or “pressure” in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Just not “feeling right” or is “feeling down”

### SIGNS OBSERVED BY COACHING STAFF:

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes
- Can’t recall events prior to hit or fall
- Can’t recall events after hit or fall



**“IT’S BETTER TO MISS ONE GAME  
THAN THE WHOLE SEASON”**

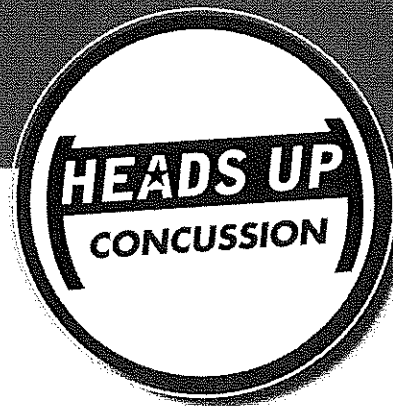
# LISBON CENTRAL SCHOOL

PARENT & ATHLETE CONCUSSION  
SIGNATURE PAGE



**Please Sign and Return the Signature page only.  
Keep the first 2 pages for future reference.**

I have read and understand this document the  
“Parent & Athlete Concussion Information Sheet”  
and understand the severities associated with  
concussions and the need for immediate treatment of  
such injuries.



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STUDENT-ATHLETE NAME (Printed)

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STUDENT-ATHLETE NAME (Signed)

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DATE

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PARENT OR GUARDIAN NAME (Printed)

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PARENT OR GUARDIAN NAME (Signed)

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DATE