

POSSIBLE CONCUSSION



LOYOLA
UNIVERSITY MARYLAND

Concussion is a type of brain injury that can result from an injury that shakes the head. Loss of consciousness may or may not occur. With rest, the majority of people fully recover within 7–14 days but occasionally some take a few weeks to recover.

People who have had prior concussion(s), a history of migraine headaches, ADHD/ADD or another learning disability, insomnia, motion sickness, or a current mental health diagnosis may have more pronounced symptoms and/or take longer to recover.

After a concussion, the brain is more sensitive to repeat trauma especially during recovery. Be sure to avoid activities that could cause another head injury.

SYMPTOMS OF CONCUSSION:

- Headache
- Feeling sick on your stomach with or without vomiting
- Feeling dizzy or off balance
- Vision seems off
- Feeling unusually tired or sleepy
- New sensitivity to light and/or noise
- Feeling mentally foggy or slowed down
- Difficulty concentrating or remembering
- Changes in sleep (trouble falling asleep, sleeping more than usual or less than usual)
- Feeling more emotional, irritable, sad, nervous or anxious

SELF-CARE MEASURES:

- **Brain rest:** Minimize all brain activities for the first 24-36 hours after the concussion. During this time you should not go to class, do any school work, or other activities requiring significant brain power (like puzzles, etc.) (Specific step-by-step instructions on advancing academic activity are included below).
- **Physical rest:** Minimize physical activity for the first 24-48 hours after the concussion. Following this, continue to limit physical activity (no sports or physical workouts) until your brain feels back to normal AND you are able to fully participate in and complete all academic work. (Step-by-step return to exercise instructions are included below.)
- **Treat your headache:** Take Ibuprofen (Advil®) 600 mg every 6 hours or Acetaminophen (Tylenol®) 650 mg every 6 hours as needed for headache
- **Avoid alcohol:** NO ALCOHOL until the concussion has totally resolved and you are back to full activity.
- **Blue-light blocking glasses** may help especially if you notice that light or screens aggravate your symptoms. These are available at the UHC Pharmacy or found online/local retail stores.
- **For dizziness:** Move slowly and minimize head and eye movement. Avoid actions that cause dizziness. Do not drive until your dizziness has resolved.
- **Anxiety, sadness, lack of motivation and/or depression** may occur following a concussion and should resolve. If these symptoms are particularly significant, seek an evaluation at the counseling center.
- If the concussion will likely interfere with academic activity, contact your professor(s) and explain what is going on. If your professor(s) require specific medical input on your academic limitations, you will need to be evaluated at the UHC, in the Urgent Care Clinic. Call (540) 568-6178 to arrange this visit.

WHEN TO SEEK IMMEDIATE MEDICAL EVALUATION

(go to the closest Emergency Department):

- Headache is getting significantly worse
- Episodes of vomiting keep occurring
- Any loss of consciousness
- You notice or are told that you are showing unusual behavior or you become increasingly irritable
- Any seizures
- New slurred speech or extremity weakness
- Drowsiness is increasing or the individual is difficult to awaken or can't be awakened
- New or increasing confusion

CONCUSSION RETURN TO LEARN AND RETURN TO EXERCISE: STEP-WISE APPROACH

Limit physical activity: You should have no more than 2 days of complete rest (this is only recommended for patients with significant symptoms). Otherwise your activities should be limited to activities of daily living (attending to your personal needs and getting to class) and at least two 20-minute walks each day. You can increase light physical activity if symptoms decrease or resolve. No significant physical exertion (running, weight lifting, sports, etc.) until you have returned to full academic function. This includes required physical activity through academics (Kinesiology, SCUBA) or ROTC.

Step 1 – Cognitive Rest (Typically Same Day of Injury) Cognitive rest for the first 24–36 hours after the event; avoid activities that require cognitive energy, such as class/lab attendance, homework, “screen time” (i.e., phone, computer and video game use), reading, driving, bright lights and loud noises. Consider remaining in your room/apartment to avoid stressors such as loud noise and bright lights. 24–36 hours after the injury progress to Step 2.

Step 2 – Begin Limited Cognitive Activity

- Begin cognitive activity such as homework or reading for 30 min followed by 15 minute rest periods. If symptoms do not develop, increase cognitive activity to 45 min followed by 15 minutes of rest.
- Return to classes, but consider avoiding specific classes or activities that lead to the onset of symptoms, such as particularly challenging classes, labs and excessive computer use.
- Students should communicate to professors and instructors when they are experiencing symptoms and ask to leave class in order to decrease these symptoms.
- You should request not take quizzes or tests or request extended time for these during this period of time.
- You should begin to make up any missed academic work. If symptoms develop while/after participating in activities, rest until symptoms subside. When you can complete a partial day of classes without the onset of concussion symptoms, progress to Step 3.

Step 3– Increased Cognitive Activity (With Minimum Modifications) Return to all classes but take breaks when necessary. Begin to take quizzes (consider asking for an oral test/quiz instead of a written one or ask for a test/quiz on paper instead of computer). When you can attend all classes without the onset of concussion symptoms, progress to Step 4.

Step 4 – Full Cognitive Activity (No Modifications) Return to classes as usual, fully participating and taking all quizzes or tests in the original format. Continue to work with professors and instructors to complete any missed work. Any return of symptoms should prompt a follow up visit with a medical professional.

RETURN TO EXERCISING:

Begin exercising only when all symptoms of concussion have resolved and then follow this stepwise approach. If symptoms occur with activity at any step, stop and start over beginning the next day. The following progression is at a rate no faster than one step every 24 hours.

- Low level activity: fast walking, light jogging, light stationary bike, light weight lifting (low weight, high rep)
- Moderate activity with body/head movement: Moderate jogging, brief sprinting, moderate intensity stationary bike and weight lifting (reduced time or weight from typical)
- Heavy non-contact physical activity: includes sprinting, high intensity stationary bike, regular weight lifting program and non-contact sport specific drills.
- Club Sports participants: Follow-up with Sports Medicine in UREC before progressing to practice and game play.