

# When In Doubt, Sit Them Out!



## *When a player shows ANY sign or symptom of a concussion:*

1. Perform an on-field mental status evaluation.

<b>On-Field Mental Status Evaluation</b>
<small>(This mental status assessment is recommended for high school-age athletes and older. Any inability of the athlete to respond correctly to the questions below should be considered abnormal.)</small>
<b>Orientation</b> What period/quarter/half are we in? What stadium/field is this? What city is this? Who is the opposing team? Who scored last? What team did we play last?
<b>Anterograde Amnesia</b> Ask the athlete to repeat the following words: <i>Girl, Dog, Green</i>
<b>Retrograde Amnesia</b> Ask the athlete the following: Do you remember the hit? What happened in the play prior to the hit? What happened in the quarter/period prior to the hit? What was the score of the game prior to the hit?
<b>Concentration</b> Ask the athlete to do the following: Repeat the days of the week backwards (starting with today) Repeat the months of the year backward (starting with December) Repeat these numbers backward 63 (36), 419 (914), 6294 (4926)
<b>Word List Memory</b> Ask the athlete to repeat the three words from earlier: <i>Girl, Dog, Green</i>

This evaluation is part of the "Heads Up: Brain Injury in Your Practice" tool kit developed by the Center for Disease Control and Prevention (CDC). For more information, visit: [www.cdc.gov/injury](http://www.cdc.gov/injury).

2. The player should not be allowed to return to play in the current game or practice.
3. The player should not be left alone; and regular monitoring for deterioration is essential over the initial few hours following injury.
4. The player should be medically evaluated (by an appropriate health care provider) following the injury.
5. Return to play should follow a medically supervised stepwise process.

## *The return to play following a concussion follows a stepwise process:*

1. No activity, complete rest. Once asymptomatic, proceed to step 2.
2. Light aerobic exercise such as walking or stationary cycling, no resistance training.
3. Sport specific exercise (e.g.: running), progressive addition of resistance training at steps 3 or 4.
4. Non-contact training drills.
5. Full contact training after medical clearance.
6. Game play.