



Concussion Policy

Concussions in canoe/ kayak are rare, but can occur while participating in any sport or recreational activity. In the Sprint and Marathon disciplines athletes are especially vulnerable during land training and when entering and exiting the water. In Slalom, Whitewater athletes may also be at risk when upside down in moving water. Since the circumstances under which a concussion can be sustained are so varied, it's important for all coaches, parents, and athletes to be aware of the signs, symptoms, and what to do if a concussion occurs. Trauma may occur through direct contact to the head or face or indirectly through a deceleration or rotational injury to the head. Injuries to the brain are characterized by an altered state of consciousness. It is the altered state of consciousness that is the key thing to look for with any head injury.

A concussion is a common injury, but since they cannot be detected on x-rays or CT scans, they have been difficult to fully investigate and understand. Fortunately, there have been many important advances in our knowledge of concussions, including how to identify, manage and recover from a concussion. Although concussions are often referred to as 'mild traumatic head injuries' and often resolve uneventfully, ALL concussions have the potential for serious and long-lasting symptoms and so must be identified and treated carefully and in consultation with a physician.

Concussion Education and Awareness

Concussion in Sport

All players who are suspected of having a concussion must be removed from play and seen by a physician as soon as possible. A concussion is a brain injury. It may occur with or without loss of consciousness.

How Concussions Happen

Because concussion is usually caused by rapid deceleration or rotation of the brain within the skull, it can be caused by a blow to the head or face, a fall, or a rapid change of direction of the body such as a tackle.

Common Symptoms and Signs of Concussion

	Symptoms Reported:	Signs Observed:
Physical	Headache Neck Pain Stomach ache Blurred vision Pressure in head	Loss of consciousness Nausea/vomiting Seizure/convulsion Poor coordination/balance Amnesia

	Dizziness Sensitivity to light/noise	Slowed reaction time Slurred speech
Cognitive	Feeling in a fog Difficulty concentrating Difficulty remembering	Difficulty concentrating Difficulty remembering Confusion Slowed reaction time
Behavioural	Irritability Sad/emotional Nervous/anxious Depressed	Inappropriate emotions Depression
Sleep	Drowsiness Difficulty falling asleep	Drowsiness

Source:

<http://www.ocdsb.ca/com/SupportingourYouth/ConcussionManagement/Pages/default.aspx>

Commented [C1]: Accessed 17-01-2014

Symptoms and signs may have a delayed onset (may be worse later that day or even the next morning), so players should continue to be observed even after the initial symptoms and signs have returned to normal.

It is important for our coaches to be able to recognize concussion. There may or may not be a loss of consciousness, there is always a temporary loss of some brain function which may result in the player being: dazed, slow to respond to questions or other stimuli, blurred vision, difficulty concentrating, dizziness, irritability, nausea, vomiting or headache. A few or all of these symptoms may occur. The coach's role is not to make a firm diagnosis, but to recognize the athlete at risk, remove him/her from sport and get the athlete assessed medically.

NOTE: Children are more sensitive to the effects of a concussion and may need to have a longer period of rest prior to returning to activity and the sport.

Initial Response to Loss of Consciousness

If there is loss of consciousness or a suspicion of concussion without loss of consciousness, Initiate Emergency Action Plan and call an ambulance. Assume possible neck injury. Continue to monitor airway, breathing and circulation.

Concussion – Key Steps

- If a concussion occurs in practice or at a competition remove the athlete from the activity
- Do not leave the athlete alone; monitor symptoms and signs
- Do not administer medication
- Inform the coach, parent or guardian about the injury
- The athlete should be evaluated by a medical doctor as soon as possible
- The athlete must not return to practice or the regatta

6 Step Return to Play

The return to play process is gradual and begins after a doctor has given the athlete clearance to return to activity. If any symptoms/signs return during this process, the player must be re-evaluated by a physician. No return to play if any symptoms or signs persist. Remember, symptoms may return later that day or the next, not necessarily when exercising! Be aware that

some medical doctors may restrict sports for at some time after a concussion, however concussion treatment is evolving and it is important to seek [current medical advice](#).

Commented [C2]: See [article](#)

Step 1: No activity, only complete mental and physical rest. Limit school, work and tasks requiring concentration. Refrain from physical activity until symptoms are gone. Once symptoms are gone, a physician, preferably one with experience managing concussions, should be consulted before beginning a step wise return to play process.

Step 2: Activities such as walking, stationary cycling or paddle machine. The player should be supervised by someone who can help monitor for symptoms and signs. No resistance training or weight lifting. The duration and intensity of the aerobic exercise can be gradually increased over time if no symptoms or signs return during the exercise or the next day.
Symptoms? Return to rest until symptoms have resolved. Then restart at previous step. If symptoms persist, consult a physician.
No symptoms? Proceed to Step 3 the next day.

Step 3: Light paddling on the water. We highly suggest that athletes are placed in a stable boat and wear a Government Approved Personal Flotation Device regardless of age.
Symptoms? Return to rest until symptoms have resolved. Then restart at previous step. If symptoms persist, consult a physician.
No symptoms? Proceed to Step 4 the next day.

Step 4: Medium intensity paddling can begin. Athletes may return to the boats they used pre-concussion. We continue to recommend the use of a Government Approved Personal Flotation Device regardless of age. May add light resistance training. Go to step 5 after medical clearance. (reassessment and note)

Step 5: Return to higher intensity training and medium to heavy resistance training.

Step 6: Return to full training and racing.

Note: Athletes should proceed through return to play steps only when they do not experience symptoms or signs and the physician has given clearance. Each step should be a minimum of one day. If symptoms or signs return, the athletes should return to step 1, and be re-evaluated by a physician.

For an expanded description of the steps please refer to the [McMaster Guidelines for Return to Activity and School](#).

Never return to play if symptoms persist!

This policy has been adopted from the Coaching Association of Canada and Hockey Canada concussion policy. For more information on concussions please visit the [Coaches Association of Canada Guidelines for Return to Play After a Concussion](#).