

If you think your athlete has sustained a concussion:

- Take him/her out of play
- Contact your physician



SIGNS OBSERVED BY COACH/PARENT

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

SYMPTOMS REPORTED BY ATHLETE

- Headache or "pressure" in head
- Nausea or vomiting
- Balances problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Does not "feel right"



FAQs about Baseline Testing among Young Athletes

To help answer some common questions about baseline testing among young athletes, CDC has compiled a list of frequently asked questions to help you, your school, or your league prepare for concussions both pre- and post-season.

What is baseline testing?

Baseline testing is a pre-season exam conducted by a trained health care professional. Baseline tests are used to help assess an athlete's balance and brain function (including learning and memory skills, ability to pay attention or concentrate, and how quickly he or she thinks and solve problems), as well for the presence of any concussion symptoms. Results from baseline tests (or pre-injury tests) can be used and compared to a similar exam conducted by a health care professional during the season if an athlete has a suspected concussion.

Baseline testing should take place during the pre-season—ideally prior to the first practice. It is important to note that some baseline and concussion assessment tools are only suggested for use among athletes ages 10 years and older.

How is baseline testing information used if an athlete has a suspected concussion?

Results from baseline testing can be used if an athlete has a suspected concussion. Comparing post-injury test results to baseline test results can assist health care professionals in identifying the effects of the injury and making more informed return to school and play decisions.

Education should always be provided to athletes and parents if an athlete has a suspected concussion. This should include information on safely returning to school and play, tips to aid in recovery (such as rest), dangers signs and when to seek immediate care, and how to help reduce an athlete's risk for a future concussion.

What should be included as part of baseline testing?

Baseline testing should include a check for concussion symptoms, as well as balance and cognitive (such as concentration and memory) assessments. Computerized or paper-pencil neuropsychological tests may be included as a piece of an overall baseline test to assess an athlete's concentration, memory, and reaction time.

During the baseline pre-season test, health care professionals should also assess for a prior history of concussion (including symptoms experienced and length of recovery from the injury). It is also important to record other medical conditions that could impact recovery after concussion, such as a history of migraines, depression, mood disorders, or anxiety, as well as learning disabilities and Attention Deficit/Hyperactivity Disorder. Baseline testing also provides an important opportunity to educate athletes and others about concussion and return to school and play protocols.

Who should interpret baseline tests?

Only a trained health care professional with experience in concussion management should interpret the results of baseline exam. When possible, ideally a neuropsychologist should interpret the computerized or paper-pencil neuropsychological test components of a baseline exam. Results of neuropsychological tests should not be used as a stand-alone diagnostic tool, but should serve as one component used to make return to school and play decisions.

How often should an athlete undergo baseline testing?

It is recommended that most components of baseline testing be repeated annually to establish a valid test result for comparison. Baseline computerized or paper-pencil neuropsychological tests may be repeated every 2 years. However, more frequent neuropsychological testing may be needed if an athlete has sustained a concussion or if the athlete has a medical condition that could affect results of the the test.

Who should administer baseline tests?

Baseline tests should only be conducted by a trained health care professional.

Resources for coaches and parents: visit www.cdc.gov/concussion



Heads Up to Schools: KNOW YOUR CONCUSSION ABCs

Assess the situation
Be alert for signs and symptoms
Contact a health care professional



A Fact Sheet for Parents

What is a concussion?

A concussion is a type of brain injury that changes the way the brain normally works. A concussion is caused by a bump, blow, or jolt to the head. Concussions can also occur from a blow to the body that causes the head and brain to move rapidly back and forth. Even what seems to be a mild bump to the head can be serious.

Concussions can have a more serious effect on a young, developing brain and need to be addressed correctly.

What are the signs and symptoms of a concussion?

You can't see a concussion. Signs and symptoms of concussion can show up right after an injury or may not appear or be noticed until hours or days after the injury. It is important to watch for changes in how your child or teen is acting or feeling, if symptoms are getting worse, or if s/he just "doesn't feel right." Most concussions occur without loss of consciousness.

If your child or teen reports *one or more* of the symptoms of concussion listed below, or if you notice the symptoms yourself, seek medical attention right away. Children and teens are among those at greatest risk for concussion.

SIGNS AND SYMPTOMS OF A CONCUSSION

SIGNS OBSERVED BY PARENTS OR GUARDIANS

- Appears dazed or stunned
- Is confused about events
- Answers questions slowly
- Repeats questions
- Can't recall events *prior* to the hit, bump, or fall
- Can't recall events *after* the hit, bump, or fall
- Loses consciousness (even briefly)
- Shows behavior or personality changes
- Forgets class schedule or assignments

SYMPTOMS REPORTED BY YOUR CHILD OR TEEN

Thinking/Remembering:

- Difficulty thinking clearly
- Difficulty concentrating or remembering
- Feeling more slowed down
- Feeling sluggish, hazy, foggy, or groggy

Physical:

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Fatigue or feeling tired
- Blurry or double vision
- Sensitivity to light or noise
- Numbness or tingling
- Does not "feel right"

Emotional:

- Irritable
- Sad
- More emotional than usual
- Nervous

Sleep*:

- Drowsy
- Sleeps *less* than usual
- Sleeps *more* than usual
- Has trouble falling asleep

**Only ask about sleep symptoms if the injury occurred on a prior day.*

To download this fact sheet in Spanish, please visit: www.cdc.gov/Concussion. Para obtener una copia electrónica de esta hoja de información en español, por favor visite: www.cdc.gov/Concussion.

DANGER SIGNS

Be alert for symptoms that worsen over time. Your child or teen should be seen in an emergency department right away if s/he has:

- One pupil (the black part in the middle of the eye) larger than the other
- Drowsiness or cannot be awakened
- A headache that gets worse and does not go away
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Difficulty recognizing people or places
- Increasing confusion, restlessness, or agitation
- Unusual behavior
- Loss of consciousness (even a brief loss of consciousness should be taken seriously)

Children and teens with a concussion should **NEVER** return to sports or recreation activities on the same day the injury occurred. They should delay returning to their activities until a health care professional experienced in evaluating for concussion says they are symptom-free and it's OK to return to play. This means, until permitted, not returning to:

- Physical Education (PE) class,
- Sports practices or games, or
- Physical activity at recess.

What should I do if my child or teen has a concussion?

1. **Seek medical attention right away.** A health care professional experienced in evaluating for concussion can determine how serious the concussion is and when it is safe for your child or teen to return to normal activities, including physical activity and school (concentration and learning activities).
2. **Help them take time to get better.** If your child or teen has a concussion, her or his brain needs time to heal. Your child or teen may need to limit activities while s/he is recovering from a concussion. Exercising or activities that involve a lot of concentration, such as studying, working on the computer, or playing video games may cause concussion symptoms (such as headache or tiredness) to reappear or get worse. After a concussion, physical and cognitive activities—such as concentration and learning—should be carefully managed and monitored by a health care professional.
3. **Together with your child or teen, learn more about concussions.** Talk about the potential long-term effects of concussion and the dangers of returning too soon to normal activities (especially physical activity and learning/concentration). For more information about concussion and free resources, visit: www.cdc.gov/Concussion.

How can I help my child return to school safely after a concussion?

Help your child or teen get needed support when returning to school after a concussion. Talk with your child's teachers, school nurse, coach, speech-language pathologist, or counselor about your child's concussion and symptoms. Your child may feel frustrated, sad, and even angry because s/he cannot return to recreation and sports right away, or cannot keep up with schoolwork. Your child may also feel isolated from peers and social networks. Talk often with your child about these issues and offer your support and encouragement. As your child's symptoms decrease, the extra help or support can be removed gradually. Children and teens who return to school after a concussion may need to:

- Take rest breaks as needed,
- Spend fewer hours at school,
- Be given more time to take tests or complete assignments,
- Receive help with schoolwork, and/or
- Reduce time spent reading, writing, or on the computer.

*To learn more about concussion and to order materials **FREE-OF-CHARGE**, go to: www.cdc.gov/Concussion or call 1.800.CDC.INFO.





HEADS UP CONCUSSION IN YOUTH SPORTS

A Fact Sheet for **ATHLETES**

CONCUSSION FACTS

A concussion is a brain injury that affects how your brain works.

- A concussion is caused by a bump, blow, or jolt to the head or body.
- A concussion can happen even if you haven't been knocked out.
- If you think you have a concussion, you should not return to play on the day of the injury and not until a health care professional says you are OK to return to play.

CONCUSSION SIGNS AND SYMPTOMS

Concussion symptoms differ with each person and with each injury, and they may not be noticeable for hours or days. Common symptoms include:

- Headache
- Confusion
- Difficulty remembering or paying attention
- Balance problems or dizziness
- Feeling sluggish, hazy, foggy, or groggy
- Feeling irritable, more emotional, or "down"
- Nausea or vomiting
- Bothered by light or noise
- Double or blurry vision
- Slowed reaction time
- Sleep problems
- Loss of consciousness

During recovery, exercising or activities that involve a lot of concentration (such as studying, working on the computer, or playing video games) may cause concussion symptoms to reappear or get worse.

WHAT SHOULD I DO IF I THINK I HAVE A CONCUSSION?

- **DON'T HIDE IT. REPORT IT.** Ignoring your symptoms and trying to "tough it out" often makes symptoms worse. Tell your coach, parent, and athletic trainer if you think you or one of your teammates may have a concussion. Don't let anyone pressure you into continuing to practice or play with a concussion.
- **GET CHECKED OUT.** Only a health care professional can tell if you have a concussion and when it's OK to return to play. Sports have injury timeouts and player substitutions so that you can get checked out and the team can perform at its best. The sooner you get checked out, the sooner you may be able to safely return to play.
- **TAKE CARE OF YOUR BRAIN.** A concussion can affect your ability to do schoolwork and other activities. Most athletes with a concussion get better and return to sports, but it is important to rest and give your brain time to heal. A repeat concussion that occurs while your brain is still healing can cause long-term problems that may change your life forever.

HOW CAN I HELP PREVENT A CONCUSSION?

Every sport is different, but there are steps you can take to protect yourself.

- Follow your coach's rules for safety and the rules of the sport.
- Practice good sportsmanship at all times.

It's better to miss one game than the whole season.

For more information, visit www.cdc.gov/Concussion.



Parents & Coaches Taking Charge of the Youth Concussion Issue

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As a parent, with all the current media attention given to concussions, it is hard not to be worried and to question your child's involvement in sports, especially contact sports. **Youth coaches** might ask "Why do I want to do this if concussions are such a problem?" On the positive side, youth sports are an excellent place for children to learn important life lessons. As a society, we want our children to be active in sports, stay healthy, and enjoy all their positive benefits. There are many things a youth sports league, its coaches, and officials can be doing to maximize the benefits of the experience and minimize the risk. While there is a risk in any sport, if coached and played with head safety in mind, the benefits will likely far outweigh the risk. By arming oneself with proper concussion knowledge and skill, parents and youth coaches can feel more in charge of this injury, thereby increasing confidence in active sports participation.

To safeguard children from concussion, parent and coach responsibilities include:

1. Obtain education on concussion signs & symptoms, and risks
2. Develop skills to recognize signs & symptoms, and respond appropriately
3. Obtain appropriate post-injury medical evaluation and support symptom management at home and school
4. Understand the need for return to sport participation only with proper, written medical clearance.

In youth sports, trained medical professionals are typically not on the sidelines. Parents and youth coaches, therefore, have an important responsibility to recognize when a child may have sustained a concussion on the playing field, and respond appropriately. While the general public has become more aware of concussions over the past five years, many lack the basic information about what to do next when a concussion is suspected. Parents and coaches may ask the question: "How will I remember what to look for if I suspect a concussion and what should I do?" It is important to feel confident in recognizing the signs and symptoms of concussion and to take the proper action steps to prevent further injury. We offer the following six action steps every parent and youth coach can take to address concussion.



Three Action Steps Every Parent and Youth Coach Can Take

1. **Recognize a concussion.** To recognize a concussion, look for two things:
 - (1) A blow to the head or to the body that moves the head violently, and
 - (2) Any sign or symptom that indicates a change in the child's physical, cognitive, emotional function or behavior.

For further information and education, we recommend parents view one of the online educational videos on concussion (e.g., CDC's Concussion Training www.cdc.gov/concussion, the Brain 101 concussion training program <http://brain101.orcasinc.com/> or one of the sport-specific videos (football, lacrosse, ice hockey) made by the National Academy of Neuropsychology and the National Athletic Trainer's Association www.nanonline.org).

Use tools to guide your recognition and response. The CDC materials are excellent (www.cdc.gov/concussion) either in paper form or via the free Concussion Recognition & Response (CRR) app to help guide your recognition of the signs and symptoms that we developed. (<http://www.childrensnational.org/score/smart-phone-apps.aspx>)

Learn the 12 Danger Signs of brain injury. There are 12 danger signs of a brain injury that, although relatively uncommon, require immediate emergency medical attention if they are observed or suspected. Call 911 immediately if any of these signs are present.

2. **IF YOU SUSPECT, YOU MUST PROTECT! Remove the child from play if you suspect a concussion, and obtain a medical evaluation. When in doubt, sit them out.** Any blow to the head, no matter how mild, can cause a concussion. Look for the associated signs and symptoms. It is better to be safe than question if they should return to the game. **Treat all concussions as serious.**

If you suspect a concussion, call your child's pediatrician and ask if he or she would prefer to examine your child or if you should go to the emergency room. Do not try to judge the seriousness of the injury yourself. Second-impact syndrome, though rare, occurs when an individual sustains a second concussion before the first has properly healed, and can be severely disabling or even lead to death.

3. **Monitor and record the child's symptoms at home** as is recommended by the CDC. The **Home Symptom Monitoring** feature of the CRR app can assist you to track symptom progress and provide this valuable information to your healthcare provider to assist post-injury treatment.

Support proper treatment. After a concussion, the individual's brain should not be over-stimulated or subjected to any further risk of re-injury. The less "work" the brain has to do, especially early in recovery, the more energy it can put toward healing. During recovery, it is important to provide a careful balance between activity and rest, not allowing the symptoms to worsen but also increasing activity as symptoms allow. Managing the child's physical and cognitive (school) activity is very important throughout recovery.



Ten Questions to Ask Youth Sports Organizations About Head Safety

In whatever sport a child chooses, to feel more comfortable and confident with their participation as it relates to concussion risk, parents must do their homework and ask questions of the league and coaches about how they handle head safety. A parent needs to feel at ease that safety is treated as a priority. At a youth football Q&A event in Virginia in 2012, the commissioner of the NFL, Roger Goodell, was asked by a parent how to be assured of their child's head safety by the youth sports league. He responded with an excellent question "How many of you would send your child to a babysitter without first checking on them for safety, quality, etc.? You need to do the same with their sports activities." In following this advice, we encourage parents to ask the following 10 questions, and we encourage all youth sports organizations to properly prepare themselves for these questions.

1. Does the league have a general policy in how they manage concussions?
2. Does the league have access to healthcare professionals with knowledge and training in sport-related concussion?
3. Are the coaches required to take a concussion education and training course?
4. Who is responsible for the sideline concussion recognition and response to suspected concussions during practice and games?
5. Do the coaches have readily available the tools - concussion signs & symptoms cards, clipboards, fact sheets, smartphone apps, etc. - during practice and games to guide proper recognition and response of a suspected concussion?
6. Does the league provide concussion education for the parents, and what is the policy for informing parents of suspected concussions?
7. What is the policy regarding allowing a player to return to play? [Correct answer – ONLY when an appropriate medical professional provides written clearance that the athlete is fully recovered and ready to return.]
8. Does the league teach/ coach proper techniques (e.g., blocking and tackling in football, checking in hockey and lacrosse) in ways that are "head safe" by not putting the head in position to be struck? If the player does demonstrate unsafe technique during practice or a game, do the coaches re-instruct them with the proper technique/ method? Is head and neck strengthening taught?
9. If a contact sport, are there limitations to the amount of contact? How often (# days per week, # minutes per practice) do you practice with live contact? Is that any different than past years?
10. How amenable is the league/ team / coach to accepting feedback from parents about their child's safety as it relates to head safety?



ACE POST-CONCUSSION HOME/SCHOOL INSTRUCTIONS



You have been evaluated for a suspected concussion.
These instructions are intended for use in the first several days after the injury.
They can prevent further injury and help recovery.

WHEN TO SEEK CARE URGENTLY

Seek care quickly if symptoms worsen or if there are any behavioral changes.
Also, watch for any of the following Danger Signs:

Headaches that worsen Seizures Neck pain Unusual behavior change	Very drowsy, can't be awakened Repeated vomiting Slurred speech Significant irritability	Can't recognize people or places Increasing confusion Weakness/numbness in arms/legs Less responsive than usual
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If you observe any of the above Danger Signs, call your doctor or return to the Emergency Department immediately.

COMMON SIGNS & SYMPTOMS

It is common to have one or many concussion symptoms. There are four types of symptoms: physical, cognitive, emotional, and sleep. Keep track of them and record them.

Physical	Cognitive	Emotional	Sleep
Headache	Feeling mentally foggy	Irritability	Drowsiness
Nausea/Vomiting	Feeling slowed down	Sadness	Sleeping less than usual
Dizziness	Difficulty remembering	More emotional	Sleeping more than usual
Balance Problems	Difficulty concentrating	Nervousness	Trouble falling asleep

RETURNING TO DAILY ACTIVITIES

The key to recovery is sleeping, resting physically and mentally, and avoiding activities that might cause head injury.

- **Avoid:**
 - Physical activities that produce concussion symptoms, as this might increase the recovery time.
 - Lengthy mental activities requiring concentration (ie. Homework, schoolwork, job-related work, and extended video game playing) as these activities worsen symptoms and prolong recovery.
- Sleep: Get good sleep, take naps if tired. No late nights or sleepovers. It is NOT necessary to wake up regularly.
- The injured person should not participate in ANY high risk activities that might result in head injury until examined and cleared by a qualified health professional. High risk activities include sports, physical education (PE), climbing, or riding a bike.
- It is hard to change from the normal routine. The injured person will need help from parents, teachers, coaches, and athletic trainers to help manage their activity level.

DO'S AND DON'TS

It's OK to take prescribed pain medicine & sleep. You don't need to wake up every hour.
Don't play sports or exercise!

<u>IT IS OK TO:</u>	<u>THERE IS NO NEED TO:</u>	<u>DONOT</u>
Take pain medicine as prescribed Use ice pack on head and neck for comfort Go to sleep Rest	Stay in bed Wake up every hour	Drive while you have symptoms Exercise or lift weights Drink alcohol Participate in sports or high-risk activities

RETURNING TO SCHOOL

If symptoms are severe (cannot concentrate for more than 30-45 minutes without symptoms worsening), staying home and resting may be indicated until symptoms improve. If symptoms are less severe, rest breaks during school can help recovery.

Please take these Instructions and the Return to School Form to your school.

- Inform the teacher(s), school nurse, school psychologist or counselor, and administrator(s) about your child/teenager's injury and symptoms. Accommodations should be put in place immediately.
- Students who experience symptoms of concussion often need extra help to perform school-related activities and may not perform at their best on classroom or standardized tests.
- As symptoms decrease, the extra supports (rest breaks during school) can be removed slowly.

SCHOOL PERSONNEL

School personnel should watch for indications of worsening symptoms, specifically:

- Increased problems paying attention, concentrating, remembering or learning new information
- Needing longer time to complete a task
- Increased irritability or less of an ability to cope with stress

RETURNING TO SPORTS AND RECREATION:

The injured person should NEVER return to sports or active recreation with ANY symptoms unless directed by a health professional. NO PE class, physical activity at recess, or sports practices or games.

- Tell the PE teacher and all coaches about the injury and its symptoms.
- When appropriate, have the student check in with a health care professional on the first day he/she returns.
- It is normal for the child/teenager to feel frustrated, sad, and even angry because they cannot return to sports or recreation right away. With an injury, a full recovery will lower the chances of getting hurt again. *It is better to miss one game than the whole season.*

STEPWISE RETURN TO ACTIVITY/PLAY:

Once the injured person's symptoms resolve at rest and a qualified healthcare professional clears the injured person to return to activity, increase physical and cognitive activity SLOWLY.

Pay attention to symptoms.

If symptoms return with increased activity, reduce the level of activity.

****The injured person should be evaluated and cleared by a qualified healthcare professional with training in concussion management before returning to contact sports.**

FOLLOW UP:

A follow up appointment should be scheduled with your primary care doctor.

- If the injured person is an athlete, has had significant or recurrent concussions, or the symptoms above persist beyond 10 days, evaluation by a specialist is recommended.
- Neuropsychological testing can be helpful to assist with return to academic and physical activity.

Physician's Signature _____ Date _____

Safe Concussion Outcome, Recovery & Education (SCORE) Program
Children's National Health System

www.childrensnational.org/score

Adapted by Gerard Gioia, PhD; Micky Collins, PhD; Shireen Atabaki, MD, MPH; Noel Zuckerbraun, MD, MPH

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Concussion

RECOGNITION & RESPONSE™

COACH & PARENT VERSION



"The focus of this app is entirely consistent with [recommendations from] the Centers for Disease Control and Prevention, which emphasize that when it comes to sport-related concussion, the non-medical person should focus on 'recognition' (not diagnosis) and 'response' (not treatment)...I feel strongly that the CRR app by PAR is a superior app for parents and coaches who may be in the position of recognizing and reporting a possible concussion."

Dr. Robert Stern

Professor of Neurology and Neurosurgery
Boston University School of Medicine



Requirements:

iPhone® or iPad®: iOS Version 5.0
Android™-based devices: Version 2.3



Scan with your PAR Assessment Toolkit!

The Concussion Recognition & Response app provides:

Quick Assessment

In less than 5 minutes, parents and coaches can determine the likelihood that an athlete has sustained a concussion, whether he or she is able to return to the field, and/or if medical attention is needed.

Instant Communication

Immediately e-mail a report of the athlete's symptoms to parents, doctors, or anyone else who may need the information — plus, use the "Dial 911" feature when you need to deal quickly with an emergency situation.

GPS Tracking

The CRR app records the exact GPS location where each incident took place.

Home Symptom Monitoring

Parents can observe and record the athlete's symptoms periodically during the hours, days, or weeks following the injury and e-mail this information to the athlete's health care provider.

An Activity Plan That Aids Recovery

Help protect athletes from further injury by following the progressive activity guidelines recommended to prepare the athlete to return to play. All return-to-play decisions should be made under the supervision of a trained medical professional.

A Post-Concussion Guide

The Acute Concussion Evaluation (ACE) Post-Concussion Home and School Instructions Care Guide lets parents or teachers know how best to help a young person recovering from a concussion.



Suspect a Concussion?

Recognize the signs and symptoms

With the Concussion Recognition & Response app, parents and coaches can quickly assess the likelihood that a young athlete may have suffered a concussion. Developed by concussion experts Gerard A. Gioia and Jason Mihalik and based on the CDC's Heads Up: Concussion in Youth Sports program, the app guides users through a checklist of signs and symptoms that will help them determine whether to remove the athlete from play and whether there is a need for further medical examination.

Comply with state concussion laws

In response to the recent increase in head injury awareness in the U.S., **49 states** (plus the District of Columbia and the city of Chicago) have adopted youth concussion laws (as of May 2012).* The legislation is designed to protect student-athletes who play contact sports. Typically, these laws comprise provisions that:

- require the immediate removal of a student-athlete with a suspected concussion from play;
- prevent a concussed student-athlete from returning to play without a physician's permission; and
- mandate education and training on concussion risks, recognition, and response—sometimes annually—for coaches, parents, and/or student-athletes.

Insurance companies can refuse to cover athletic programs that do not comply with their state's laws, and coaching permits can be revoked for noncompliance. Recognizing the importance of compliance with the law, the CRR app and its extensive FAQ section and ACE Post-Concussion Home and School Instructions Care Guide provide important educational tools for those who are required by law to know how to deal with possible concussions.

*Source: <http://nflhealthandsafety.com/zackery-lystedt-law/states/>

SUPPORTING AWARENESS

A portion of the proceeds from the sale of this app will be given directly to the Children's National Medical Center and the Matthew A. Gfeller Sport-Related Traumatic Brain Injury Research Center.

Our PARTners



Requirements:

iPhone® or iPad®: iOS Version 5.0
Android™-based devices: Version 2.3



Scan with your PAR Assessment Toolkit!