**Brain Protocol**

A step-by-step gradual process for return to play

**Bike**
Increase heart rate with sustained effort while keeping the head as still as possible.

**Run**
Adds simple, repetitive movement.

**Agility**
Adds more explosive movement and asks the brain to do more complex function.

**In Red**
Adds usual drills and workouts while avoiding all physical contact.

(“In Red” refers to the red jersey players wear to signify that they are NOT to be hit.)

**No Restrictions**
A doctor must clear the athlete before this step.

- An athlete cannot start the protocol until there are no remaining symptoms.
- Athletes 18 years old or younger must wait at least 24 hours between each step, without symptoms.
- If the symptoms return, the protocol must stop. Once ALL symptoms are gone again, the process restarts by repeating the last step completed before symptoms returned.

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*C.S. Mott Children's Hospital Pediatric Trauma Program*
CONCUSSION FACTS

- Getting your bell rung IS a concussion
- Most concussions DO NOT involve being knocked out
  - only occurs in 1 of 10 cases
- Concussions DO NOT require a blow to the head
  - they can result from whiplash
- Every concussion is unique
  - they DIFFER by PERSON & INCIDENT

1 OR MORE OF THESE MAY = CONCUSSION:
May not appear for MINUTES, HOURS, DAYS or UNTIL CHALLENGED (physically OR mentally)

- Headache
- Pressure in the Head
- Nausea or Vomiting
- Sleep Changes
- Dizziness
- Vision Changes
- Sensitive to Light or Noise
- Feeling Sluggish or Groggy
- Confusion
- Difficulty Concentrating or Remembering
- Mood Changes
- Behavior or Personality Changes
- Being Knocked out (even briefly)
- Answers Questions Slowly
- Moves Clumsily

Keep CONCUSSIONS on the Sidelines!

DANGER SIGNS = IMMEDIATE MEDICAL ATTENTION:

- Symptoms Get Worse
- Decreasing Consciousness
- Increasing Sleepiness
- Seizure
- Vomiting
- Trouble Recognizing People or Places
- Neck Pain
- Weakness in Arms or Legs
- Slurred Speech

With proper recognition & management YOU can prevent permanent brain injury & death

MichiganNeuroSport.com | P: 734.936.9055
CONCUSSION PLEDGE FORM

This pledge form is designed to facilitate communication about concussions between coaches, youth athletes, and their parents.

THE COACH HAS PLEDGED TO:

RECOGNIZE the signs | REMOVE the athlete from play | REPORT to a parent

And ensure that the athlete RECOVERS completely before returning to play

STUDENT/ATHLETE

I, ____________________________, understand that concussions are serious injuries. I understand that if not handled properly, concussions may lead to permanent brain injury or death.

I pledge that if I RECOGNIZE symptoms of concussion in myself, or a teammate, I will REPORT it immediately to a coach, athletic trainer or parent.

I pledge to not play my sport again until I am cleared by a doctor and complete a graduated process (BRAIN protocol).

This will help ensure I RECOVER completely before returning to play.

_____________________________       ________________
Signature                        Date

PARENT/GUARDIAN

I, ____________________________, understand that concussions can be serious injuries. I understand that if not handled properly, concussions may lead to permanent brain injury or death.

I pledge that if I RECOGNIZE signs of concussion in my child, I will REPORT it to the coach or athletic trainer immediately.

I pledge to not allow my child to play again until they are cleared by a doctor and complete a graduated process (BRAIN protocol).

This will help ensure that my child RECOVERS completely before returning to play.

_____________________________       ________________
Signature                        Date

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