

# A Player & Coaches Guide For the Recognition & Response to Head Injuries

(Massachusetts Hockey On-Line)

January 04, 2002

NEW YORK (AP) - New York Rangers center Eric Lindros, sidelined with the seventh concussion of his NHL career, took part in an optional skate Friday and remains day-to-day. Lindros, who has missed four games after leaving a game against San Jose on Dec. 28, was placed on injured reserve Wednesday after being examined by a neurologist. The Rangers are at Pittsburg on Saturday, and return home to face Los Angeles on Wednesday night.

Lindros, traded by Philadelphia to New York in August after missing all of last season, had six documented concussions between March 8, 1998 and May 26, 2000.

## CONCUSSION

Head injury (CONCUSSION) is separated into three (3) distinctive categories known as **grades**.

### **GRADE I**

Confusion without Amnesia  
No loss of Consciousness  
**REMOVE FROM EVENT**  
**PERFORM BENCH EVALUATION**

### **GRADE II**

Confusion with Amnesia.  
No loss of Consciousness.  
**REMOVE FROM EVENT**  
**PERFORM BENCH EVALUATION**

### **GRADE III**

Loss of Consciousness.  
**REMOVE FROM EVENT**  
**TRANSPORT TO APPROPRIATE**  
**MEDICAL FACILITY IMMEDIATELY!!**

If a player receives head trauma, a coach should perform a bench evaluation to determine Concussion. If symptoms are prevalent, seek medical attention immediately. It is not macho to send or allow that player back into the game without a

doctor's permission. It is just plain stupid and dangerous. Head injuries (Concussion) can be fatal if not treated properly.

### **What you don't know about Head Injuries** **(CONCUSSIONS)** **Can KILL you!!**

Head trauma outside the sports setting, e.g. motor vehicle accident, should be considered in "Return to Play" section for each grade of Concussion.

### **COACHES SHOULD READ AND FOLLOW THESE SECTIONS RELIGIOUSLY**

### **GRADE I**

This is the most common yet most difficult form of concussion to recognize. The athlete is not rendered unconscious and suffers only momentary confusion. The majority of concussions in sports are this type. Players commonly refer to it as having their "Bell rung". A player should never return to play until they are asymptomatic (without symptoms) at rest or exertion for a period of one week. Player must receive doctors permission before returning to play.

### **GRADE II**

With a grade 2 concussion, the athlete is not rendered unconscious and has amnesia for the events following the impact (post-traumatic amnesia). Player must receive doctor's permission before returning to play.

### **GRADE III**

It is usually quite easy to recognize a Grade 3 concussion. This level of head injury applies to any athlete who is rendered unconscious for any period of time. Player

must receive doctor's permission before returning to play.

**IN ALL INSTANCES, PLAYERS SHOULD  
RECEIVE MEDICAL  
ATTENTION IMMEDIATELY**

**PLAYERS MUST RECEIVE DOCTOR'S  
PERMISSION BEFORE  
RETURNING TO PLAY**

## **BENCH EVALUATION**

All coaches should familiarize themselves with this simple evaluation technique.

### **Mental Status Testing:**

#### **Orientation:**

Time, Place, Person and situation  
(circumstances of injury)

#### **Concentration:**

Digits backwards

10 - 9 - 8 - 7 - 6

Months of the year in reverse order

#### **Memory:**

Names of teams in prior contest, President, Governor, Mayor

Recent newsworth events, 3 words and 3 objects at 0 and 5 minutes

Details of contest (plays, moves, strategies, etc)

#### **Symptoms:**

Any appearance of associated symptoms is abnormal, e.g., headache, dizziness, nausea, unsteadiness, impaired orientation, blurred or double vision, mental status changes and confusion with or without amnesia.

#### **Neurological Tests:**

Finger to Nose

Finger to Nose with eyes closed.

Finger from Nose to Examiner's finger  
(Examiner moves finger around and injured player touches finger to nose to finger)

Check Pupil reaction

Check Motor Skills (Hand strenght, foot strength, leg strength)