

**PARENT/GUARDIAN ATHLETIC SIGN OFF PAGE**  
**Concussion and Substance Abuse Protocols**

Dear Parent/Guardian:

MA regulation 105 CMR 201.000 requires that parents/guardians of any student who plans on participating in extracurricular athletic activities complete a yearly course on concussion. No student is allowed to participate or compete until the parent/guardian has completed the concussion training and sign off sheet. In addition, parents/guardians of athletes must also indicate that they have received and read information about substance abuse and prevention of addiction. These **two** requirements can be met by:

Reading the attached concussion written materials, "CDC Concussion Information Sheet" and the "Stop the Addiction" information and signing this form indicating that you have read and understand the printed educational materials. Materials included in this packet may also be found at:

<https://www.cdc.gov/headsup/youthsports/parents.html>  
<http://www.mass.gov/stopaddiction>

Please complete the following and return to the Athletic Director prior to the start of the season.

I hereby state that I have read and understand the concussion and substance abuse materials provided or accessed on the two links above.

Student/Player Name: (Please Print) \_\_\_\_\_

Parent/Guardian Name :( Please Print) \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# CONCUSSION Information Sheet



This sheet has information to help protect your children or teens from concussion or other serious brain injury. Use this information at your children's or teens' games and practices to learn how to spot a concussion and what to do if a concussion occurs.

## What Is a Concussion?

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.

## How Can I Help Keep My Children or Teens Safe?

Sports are a great way for children and teens to stay healthy and can help them do well in school. To help lower your children's or teens' chances of getting a concussion or other serious brain injury, you should:

- Help create a culture of safety for the team.
  - › Work with their coach to teach ways to lower the chances of getting a concussion.
  - › Talk with your children or teens about concussion and ask if they have concerns about reporting a concussion. Talk with them about their concerns; emphasize the importance of reporting concussions and taking time to recover from one.
  - › Ensure that they follow their coach's rules for safety and the rules of the sport.
  - › Tell your children or teens that you expect them to practice good sportsmanship at all times.
- When appropriate for the sport or activity, teach your children or teens that they must wear a helmet to lower the chances of the most serious types of brain or head injury. However, there is no "concussion-proof" helmet. So, even with a helmet, it is important for children and teens to avoid hits to the head.



**Plan ahead.** What do you want your child or teen to know about concussion?

## How Can I Spot a Possible Concussion?

Children and teens who show or report one or more of the signs and symptoms listed below—or simply say they just "don't feel right" after a bump, blow, or jolt to the head or body—may have a concussion or other serious brain injury.

### Signs Observed by Parents or Coaches

- Appears dazed or stunned.
- Forgets an instruction, is confused about an assignment or position, or is unsure of the game, score, or opponent.
- Moves clumsily.
- Answers questions slowly.
- Loses consciousness (*even briefly*).
- Shows mood, behavior, or personality changes.
- Can't recall events *prior to* or *after* a hit or fall.

### Symptoms Reported by Children and Teens

- Headache or "pressure" in head.
- Nausea or vomiting.
- Balance problems or dizziness, or double or blurry vision.
- Bothered by light or noise.
- Feeling sluggish, hazy, foggy, or groggy.
- Confusion, or concentration or memory problems.
- Just not "feeling right," or "feeling down."

**Talk with your children and teens about concussion.** Tell them to report their concussion symptoms to you and their coach right away. Some children and teens think concussions aren't serious or worry that if they report a concussion they will lose their position on the team or look weak. Be sure to remind them that *it's better to miss one game than the whole season.*

To learn more, go to [www.cdc.gov/HEADSUP](http://www.cdc.gov/HEADSUP)



Centers for Disease  
Control and Prevention  
National Center for Injury  
Prevention and Control

**Concussions affect each child and teen differently.** While most children and teens with a concussion feel better within a couple of weeks, some will have symptoms for months or longer. Talk with your children's or teens' health care provider if their concussion symptoms do not go away or if they get worse after they return to their regular activities.



## What Are Some More Serious Danger Signs to Look Out For?

In rare cases, a dangerous collection of blood (hematoma) may form on the brain after a bump, blow, or jolt to the head or body and can squeeze the brain against the skull. Call 9-1-1 or take your child or teen to the emergency department right away if, after a bump, blow, or jolt to the head or body, he or she has one or more of these danger signs:

- One pupil larger than the other.
- Drowsiness or inability to wake up.
- A headache that gets worse and does not go away.
- Slurred speech, weakness, numbness, or decreased coordination.
- Repeated vomiting or nausea, convulsions or seizures (shaking or twitching).
- Unusual behavior, increased confusion, restlessness, or agitation.
- Loss of consciousness (passed out/knocked out). Even a brief loss of consciousness should be taken seriously.

Children and teens who continue to play while having concussion symptoms or who return to play too soon—while the brain is still healing—have a greater chance of getting another concussion. A repeat concussion that occurs while the brain is still healing from the first injury can be very serious and can affect a child or teen for a lifetime. It can even be fatal.

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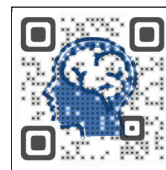
## What Should I Do If My Child or Teen Has a Possible Concussion?

As a parent, if you think your child or teen may have a concussion, you should:

1. Remove your child or teen from play.
2. Keep your child or teen out of play the day of the injury. Your child or teen should be seen by a health care provider and only return to play with permission from a health care provider who is experienced in evaluating for concussion.
3. Ask your child's or teen's health care provider for written instructions on helping your child or teen return to school. You can give the instructions to your child's or teen's school nurse and teacher(s) and return-to-play instructions to the coach and/or athletic trainer.

Do not try to judge the severity of the injury yourself. Only a health care provider should assess a child or teen for a possible concussion. Concussion signs and symptoms often show up soon after the injury. But you may not know how serious the concussion is at first, and some symptoms may not show up for hours or days.

The brain needs time to heal after a concussion. A child's or teen's return to school and sports should be a gradual process that is carefully managed and monitored by a health care provider.



To learn more, go to [www.cdc.gov/HEADSUP](http://www.cdc.gov/HEADSUP)

You can also download the CDC *HEADS UP* app to get concussion information at your fingertips. Just scan the QR code pictured at left with your smartphone.

**Discuss the risks of concussion and other serious brain injury with your child or teen and have each person sign below.**

*Detach the section below and keep this information sheet to use at your children's or teens' games and practices to help protect them from concussion or other serious brain injury.*

I learned about concussion and talked with my parent or coach about what to do if I have a concussion or other serious brain injury.

Athlete Name Printed: \_\_\_\_\_ Date: \_\_\_\_\_

Athlete Signature: \_\_\_\_\_

I have read this fact sheet for parents on concussion with my child or teen and talked about what to do if they have a concussion or other serious brain injury.

Parent or Legal Guardian Name Printed: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Legal Guardian Signature: \_\_\_\_\_

# We are facing an epidemic of opioid addiction and overdose deaths in Massachusetts.

For youth, opioid addiction may start when a clinician prescribes opioids following an injury; through having access to painkillers in the family medicine cabinet; or by borrowing from friends.

Opioids are powerful prescription painkillers. Examples of commonly prescribed opioids include **Oxycontin, Percocet, Vicodin and Fentanyl.**

Although these medications are effective when prescribed and taken appropriately, they can be misused and lead to significant negative consequences, including overdose and addiction. Some people who are addicted may even transition to heroin, which is less expensive and widely available.

## Get More Information

If you suspect your child is having a problem with prescription opioids or heroin, call the **MA Substance Abuse Information and Education Helpline** for free and confidential information about substance abuse, education and counseling resources for adolescents, families and adults.

With your help we can  
**Stop Addiction**  
In Its Tracks

### Call:

**1-800-327-5050**

TTY: Use MassRelay at 711  
or 1-800-720-3480

### Or Visit:

**[mass.gov/stopaddiction](http://mass.gov/stopaddiction)**

Tips for  
Protecting  
Your Kids from  
**Addiction**

# STOP

## Addiction IN ITS TRACKS



Some people who are addicted may even transition to heroin, which is less expensive and widely available.

## Parents: Prevent Opioid Prescription Abuse

- 1. Talk to your teen** and warn them about the potential dangers of taking medications that are not prescribed for them, including addiction and overdose.
- 2. Be clear with your expectations** about drug and alcohol use and follow through by supporting healthy decisions that they make.
- 3. If your son or daughter needs medications while at school**, request an 8-12 hour dose so you can administer them at home. If medications must be taken during school hours, give them to the school nurse.
- 4. Ask your doctor** if any medications prescribed for your family have a potential for abuse.
- 5. Take a regular inventory** of medications that are kept in your home that can be abused.
- 6. Keep medications in a secure location** away from your children. Consider purchasing a locked box at your local pharmacy to store medications that can be abused.

## Dispose of Unused Prescription Drugs:

- Bring unused medications to secure medication drop off boxes around the state. To find a drop box in your area, visit [www.mass.gov/DrugDropbox](http://www.mass.gov/DrugDropbox).
- Do not flush medicines down the drain unless the label or accompanying patient information specifically instructs you to do so.
- Remove medications from their containers, crush them and mix them with coffee grounds or kitty litter. Place the mixture in an unmarked container, like an empty can or sealable bag, and throw the container in the trash.

## Know the Signs

Many parents are often reluctant to believe that their children may misuse or develop an addiction to prescription opioids. But anyone who experiments with these powerful medications is at risk for negative consequences, including overdose and addiction.

### Signs your child may be abusing or misusing opioids:

- Pills or medication bottles are missing from your home
- Taking medication in excess of how it has been prescribed
- Abrupt changes in their finances
- Dramatic mood changes
- Lower grades, changes in friends, or changes in sleep or appetite
- Loss of concern about appearance
- Physical signs such as fatigue, confusion, weight loss, slurred speech, dizziness and changes in pupil size

