

Athlete \_\_\_\_\_

Date of injury \_\_\_\_\_ Sport \_\_\_\_\_

Parent/guardian name \_\_\_\_\_ Home Phone \_\_\_\_\_



**Howard  
County**

RECREATION & PARKS

**Notification of Suspected Concussion or Other Head Injury and Return to Play Requirements**

**Dear Parent:**

**It is important to recognize that blows to the head can cause a variety of injuries other than concussions (e.g., neck injuries, other serious brain injuries). Please be sure to see your doctor as soon as possible for any other medical concerns.**

Based on the Incident/Participant Injury Form submitted, we suspect that your son/daughter may have sustained a concussion while participating in Hero's Summer Lacrosse League. It is important that you seek a physician's care for your child as soon as possible.

**When a child sustains a suspected concussion or other head injury and has been removed from play, State law prohibits the child's return to play until the child has obtained written clearance from a licensed health care provider trained in the evaluation and management of concussions. Please be advised that your son/daughter will not be allowed to return to play or participate in any Howard County sport program until he/she provides a copy of the required written clearance from an authorized health care provider (physician, neuropsychologist, nurse practitioner, physician's assistant).**

**It is your responsibility as a parent to notify the appropriate representative for all other sport programs in which your child participates of this Notification of Suspected Concussion or Other Head Injury. The failure of a parent or guardian to abide by the written clearance requirement may be grounds for disqualification of the child for future sport programs.**

**Description of Incident/Injury:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**When to Seek Care Urgently:** If you observe any of the following signs, call your doctor or go to your emergency department immediately.

Headaches that worsen	Very drowsy, can't be awakened	Can't recognize people or places
Seizures	Repeated vomiting	Increasing confusion
Neck pain	Slurred speech	Weakness/numbness in arms/legs
Unusual behavior change	Significant irritability	Less responsive than usual

**Common Signs & Symptoms:** It is common for a student with a concussion to have one or many symptoms.

Physical		Cognitive	Emotional	Sleep
Headache	Visual Problems	Feeling mentally foggy	Irritability	Drowsiness
Nausea/Vomiting	Fatigue/ Feeling tired	Feeling slowed down	Sadness	Sleeping less than usual
Dizziness	Sensitivity to light/ noise	Difficulty remembering	More emotional	Sleeping more than usual
Balance Problems	Numbness/Tingling	Difficulty concentrating	Nervousness	Trouble falling asleep

Please feel free to contact me if you have any questions. I can be reached at: \_\_\_\_\_

\_\_\_\_\_  
Employee Name and Title

\_\_\_\_\_  
Date

**Distribution: White – Parent; Yellow –Program Supervisor / Coordinator; Pink - Community Sports Manager**