UR Medicine provides comprehensive concussion care through Orthopaedics & Rehabilitation, Physical Medicine & Rehabilitation and Pediatric Neurology. A concussion is a serious brain injury that can cause a wide array of long-lasting symptoms that differ from person to person. If you suspect your child or student has a concussion, he or she should be held out of all sports and physical activities until being evaluated by a medical professional. Below are the most common physical and mental conditions caused by concussions.

Concussion Fact Sheet

Common Physical Symptoms:
- Headache/head pressure
- Difficulty maintaining balance
- Dizziness
- Sensitivity to light and sound
- Nausea/vomiting
- Lightheadedness
- Fatigue
- Forgetfulness (may ask the same question repeatedly)
- Slow cognitive response (may need more time than usual to process information or answer questions)

Common Emotional Symptoms:
- Changes in behavior or personality
- Slower reaction time
- Difficulty concentrating (particularly when doing school work)
- Irritability or difficulty managing anger
- Sadness, crying, depression, or “feeling down”
- Nervousness or anxiety

Warning Signs:
More serious concussions may cause the following symptoms. Individuals exhibiting these symptoms should be seen by a medical professional immediately.
- Loss of consciousness
- Inability to recognize familiar people or places
- Difference in eye pupil size
- Continually worsening headaches
- Seizures or slurred speech
- Vomiting
- Weakness in limbs or unsteady gait
- Drowsiness
- Facial drooping

*Severe concussions may cause additional symptoms not listed. Seek medical attention if symptoms continue to worsen, last longer than two weeks, or if you have a significant concern.

Concussion Fast Facts

- If you suspect your child or student has a concussion, he or she should be held out of all sports and physical activities, including gym class and recess.
- Driving is not recommended until concussion symptoms have improved.
- If a child or student has a concussion and symptoms aren’t improving, seek additional medical care.
- A concussion is not always tied to loss of consciousness. An individual can suffer a serious concussion without “blacking out.”
- There are no approved blood tests or head scans that can definitively diagnose a concussion, including CAT/CT scans and MRIs.
- If your child has suffered a concussion, you do not need to frequently wake him or her at night. Interrupting sleep can actually slow or impair the body’s natural healing process.
- Decreased stimulation is helpful for children within 24 to 48 hours after sustaining a concussion. However, placing a child in a dark room for long periods of time is no longer considered an appropriate treatment.
- Keeping students out of school for a long period of time is not recommended.
- Light physical activity can be helpful in concussion recovery. Walking or riding a stationary bike can release good chemicals in the brain, leading to improvement in headache, neck pain, and mood. Your child or student should only participate in physical activity if it is approved by his or her physician.

To learn more, call (585) 275-5321 or visit urmc.rochester.edu/concussion
Managing Symptoms

All concussions come with symptoms, but they will differ between individuals. Here are some tips to help you, your child, or student manage their symptoms:

- Avoid bright lights and use sunglasses in class to reduce strain.
- Do not participate in computer classes, band/chorus, or shop.
- Eat lunch in a quiet area away from the lunchroom and avoid places where loud noise is common.
- Allow students to take frequent breaks during the school day, including “screen breaks” from tablets, smartphones, computers, and smartboards.
- Spend time with peers to aid in the recovery process. If your child must stay out of school for any length of time, try to reduce his or her isolation by inviting over friends for some quiet fun.
- Be flexible with make-up work. Too much work too soon can slow the recovery process, or worsen symptoms.

Suggestions for Educators

Students will go through various stages of recovery. He or she may perform fine in one subject and struggle with others. This is completely normal. Here are some additional recommendations for teachers and school staff:

- Allow students to take shorter school days or limit days in attendance.
- Provide appropriate rest time for the student, and don’t wait for the child to request a break. Quiet reading is not cognitive rest; do not substitute reading time for a true break.
- Give students more time to complete tests or quizzes and consider oral, take-home, or open-book testing.
- Concussions can slow a student’s ability to process information, so complex sentences may need to be repeated and it may take longer for the student to answer.
- Prioritize make-up assignments and determine if the work missed could be made up using an alternative method.
- Provide the student with recorded lectures, pre-printed notes, a peer note taker, or reading partner who can take notes for him or her.
- Limit screen time in the classroom and increase font size on digital devices if they must be used for instruction.
- Offer written and verbal instruction, discussion-based learning, and alternative assignments, if possible. In subjects like math or reading, try to shorten the number of questions or assignments.
- Teachers can also help students by offering support and asking questions about their problem/symptoms (e.g., “I see you’re not paying attention, does your head hurt today?”)

In addition, educators should work with parents and healthcare professionals to develop a 504 Plan.

What is a 504 Plan?

A 504 Plan consists of curriculum modifications, environmental accommodations, and behavioral adaptations for students with an acute change in their classroom abilities. These are often temporary until students return to their pre-concussion classroom levels.

Suggestions for School Districts

We recommend that all school districts have a concussion/chronic illness management team consistent with the New York State Education Department concussion management guidelines. The concussion management team could include:

- Teachers
- Physicians/healthcare providers
- School nurses
- Physical therapists
- Occupational therapists
- Guidance counselor(s)
- Psychologists
- Mental health counselors
- School administrators
- Parents
- Older students
- Coaches

Each school district should also have standard concussion policies and procedures that are updated on a yearly basis.

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