VALLEY MEDICAL GROUP
Prevention & Medical Care To Help You Live Better, Longer.

Pediatric Pearl *Date: 11/3/22*

Concussion Update/Review:

Myths:
1) Helmets prevent concussions. - FALSE. BUT, they DO prevent more serious head injury like skull fractures and intracranial/subarachnoid hemorrhage.

2) Concussions are graded as mild, mod, severe- FALSE.
We do not really use those anymore. But identifying the major domains that are affected CAN help guide treatment- ie Cognitive, Vestibular, Ocular, Mood, HA's, Sleep, Cervical(neck pain). Eg- if significant vestibular symptoms, would refer to a vestibular therapist earlier.

3) Strict Brain and Physical rest are very important.--SORT OF. 24-48 hours of rest is recommended. BUT after that, prolonged rest ***delays*** recovery. Early, light, exercise *decrease*s time to recovery.

4) Imaging is needed in most concussions- FALSE. Neuroimaging is not typically needed but should be done in cases of **Prolonged LOC(>1 min)**, **Seizures, Persistent Altered Mental Status, Worsening HA, Repeated Vomiting.**

"Return to Learn". And RTP(Return to Play):

Return to Learn:
Can start with short conversations, light screen use(supervised phone use(a few minutes at a time), NO video games!. Work at home- eg- reading 5 pages. May return to CLASS when pt can concentrate for 30-45 consecutive minutes.
Return to class often requires accommodations. Can use a pre-printed school note from UptoDate or from The Head's Up ACE form. Examples of accommodations are longer time for tests, half days, shorter homework(like doing only every other problem in math), rest /breaks, note taker, avoidance of cafeteria(noise).

Return to Play:
Can assess the following.
1) Patient's symptoms
2) Ballance (BESS) BESS BALANCE TEST!
3) Vestibular and oculomotor testing (assessed by the VOMS- see 10 min video on Uptodate https://www.uptodate.com/contents/search?search=voms%20&sp=0&searchType=PLAIN_TEXT&source=USER_INPUT&searchControl=TOP_PULLDOWN&searchOffset=1&autoComplete=false&language=en&max=10&index=&autoCompleteTerm=

4) Cognitive testing (like ImPact) - many High Schools and Colleges do this pre-season and also **after** head trauma.

Advancing Activities- Athletes/Students can start with doing activities at the “nose-breathing” level- like walking, stretching. Then activity advances by steps- usually 5 steps or so at no faster than 24 hours per step. So most younger athletes take 5-6 days at least to get to playing in contact situations. (Usually at least a week). If at any point symptoms are worse, the student steps down to the prior phase. .

For symptoms that persist, (esp over a month) a team approach is advised.

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For the Pediatric Committee