What is a concussion?
A concussion is an injury to the brain caused by a direct or indirect blow to the head or caused by the head striking something else such as the ground. A concussion typically causes the rapid onset of short lived impairment of brain function that resolves spontaneously with time. However, occasionally there can be a more significant problem, and it is important that symptoms from every concussion are monitored by your athletic trainers (ATC) and team physicians (MD). Concussions usually do not cause structural damage to the brain. A concussion can occur whether or not a person is “knocked out.” When you suffer a concussion, you may have problems with concentration and memory, notice an inability to focus, feel fatigued, have a headache (HA) or feel nauseated. Bright lights and loud noises may bother you. You may feel irritable, be more emotional or have other symptoms. It may be difficult to study, attend class, or use the computer.

What should I watch for?
After evaluation by your athletic trainer / team physician, it may be determined that you are safe to go home. Otherwise, you may be sent to the UHS infirmary, or to the hospital. If you are sent home, you should have a responsible adult present, follow the instructions below and follow up as recommended. The initial treatment of concussion is both relative physical and cognitive rest, so avoiding texting, video games, homework and/or excessive computer use is important. Symptoms from your concussion may persist when you are sent home but should not worsen, nor should new symptoms develop. You should watch for symptoms including:

- Increasing headache
- Increasing nausea or vomiting
- Increasing confusion
- Garbled speech
- Unusual sleepiness or difficulty being awakened
- Trouble using your arms or legs
- Convulsions or seizure

If you notice any of these problems or have any other problem that appears worse as compared to how you felt at the time you left the ATC / team MD, immediately call public safety (609)-258-3333. If you are off campus, dial 911. Please also call your ATC / MD and / or UHS (#’s below)

Is it okay to go to sleep?
Concussion many times makes a player feel drowsy or tired. As long as you are not getting worse, as noted above, it is all right for you to sleep. We do prefer a responsible adult to be at home with you in case any problems arise.

Do I need a CT scan or MRI examination?
If the ATC / team MD has determined that you are able to go home, these types of diagnostic tests are not necessary. If you are sent to the hospital with a concern for a more complicated injury (e.g. skull fracture, or intracranial bleeding) a CT scan or MRI examination may be considered. If your symptoms linger for several days these studies may be considered. Neuropsychological (NP) testing post injury is a component of the PUAM Concussion protocol.

May I take something for pain?
Do not take any medication unless your ATC / team MD has told you to do so. Normally, we do not advise anything stronger than Tylenol and ask you to avoid aspirin, Ibuprofen (Advil), Naproxen (Aleve), or other anti-inflammatory medications that you may have been taking. We also ask that you avoid alcohol and caffeine and any other stimulants or supplements. The team physician will determine when you can restart medications and supplements.

May I eat after the practice or game?
It is fine for you to eat if you are hungry. Remember, some athletes do have a sense of nausea and fatigue, and often find that their appetite is decreased immediately after a concussion. Do not force yourself to eat.

How long will I be observed?
You will be asked to follow up in the training room after your concussion. You will be assessed by the ATC / team MD and, if necessary, consultants. Your symptoms and difficulty with academics will be monitored and assessed.

When can I return to class / schoolwork?: “Return to Learn”: You should refrain from any significant cognitive work as well as physical exertion until released to do so by the medical staff. Initial cognitive rest includes avoiding texting, video games
and excessive computer work as well as homework and/or class activities. Depending on your situation, you can consider trying to work or focus for short periods of time and attending class. The increase in cognitive activity should be progressive and individualized. The team MD can determine if school activities need to be modified; this decision is enhanced by communication between the team MD and your Dean / Director of Studies.

Who should I contact if I’ve been diagnosed with a concussion? What other support is available?
- Contact the Dean or Director of Studies in your residential college by email. (all “name” @princeton.edu)
- Copy your evaluating physician on the e-mail as well as the Assistant Dean of the College, James Alexander (Alec) Dun PhD: jamesdun@exchange.princeton.edu. Inform your Dean / DOS that you have been diagnosed with a concussion, want them to be aware of your situation, and may need time to recover.

What steps are necessary to be considered for post-concussive academic support?
You have options for receiving additional support: (1) short-term adjustments or (2) extended accommodations through the Office of Disability Services (ODS). These options usually involve disclosing some information about your medical condition to University offices and/or personnel.

- **For short-term adjustments:** If you need a short-term adjustment in your academic course work (e.g., an extension on a paper or test), your Dean or DOS will help you manage your course load and assist you in communicating with your instructors.

- **For extended accommodations:** Depending on the severity of your injury, you may be eligible for additional support and/or accommodations (e.g., help with note-taking or test accommodations) via the ODS. Your Dean / DOS can help you explore this option and should be contacted prior to contacting ODS directly (ods@princeton.edu or 609-258-8840).

When can I “Return to Play (RTP)”?: You should refrain from any physical exertion including strength conditioning until released to do so by the medical staff. Additional testing will be performed (e.g. NP testing) and this will be explained to you during your follow up visit. **The RTP decision is an individualized one made by the team MD**, which incorporates a progressive increase in both the level of exertion as well as intensity of activity and takes into account individual modifiers (e.g. history of concussion, HA, learning disability, mood disorder). This typically includes a period of rest followed by light exertion, sport-specific activities, practice and finally full play.

**Important Academic Contact Information:**

<table>
<thead>
<tr>
<th>Butler</th>
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<th>Rockefeller</th>
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<td>Dean</td>
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<td>Contact</td>
<td>David Stirk</td>
<td>Patrick Caddeau</td>
<td>Steve Lestition</td>
<td>Oliver Avens</td>
<td>Anne Caswell-Klein</td>
</tr>
<tr>
<td>info</td>
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<td>caddeau@</td>
<td>steveles@</td>
<td>avens@</td>
<td>acaswell@</td>
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<tr>
<td></td>
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<td>609-258-5229</td>
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<td>609-258-5313</td>
<td>609-258-6496</td>
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<tr>
<th>DOS</th>
<th>Matthew Lazen</th>
<th>Rashidah Andrews</th>
<th>Cecily Swanson</th>
<th>Justine Levine</th>
<th>Jaclyn Schwalm</th>
<th>Jack Axcelson</th>
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<tbody>
<tr>
<td>Contact</td>
<td>mlazen@</td>
<td>rashidah@</td>
<td>eccelyswanson@</td>
<td>justinel@</td>
<td>jschwalm@</td>
<td>axcelson@</td>
</tr>
<tr>
<td>info</td>
<td>609-258-7140</td>
<td>609-258-7193</td>
<td>609-258-7223</td>
<td>609-258-7245</td>
<td>609-258-9448</td>
<td>609-258-1929</td>
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I have been provided with the above information, and will follow up as recommended on: ________________________

____________________________________________________________________________________________________

Printed Name             Signature of Student Athlete               Date

MP 6/2018