



## Concussion Management: Return to Play

### OVERVIEW

Sports-related concussions in youth athletes are underreported. Coaches, parents, and teachers often fail to recognize the signs of concussions in young athletes.

Proper management of concussions, including cognitive and physical rest, is imperative to ensure that the student athlete does not suffer long-lasting effects of injury.

A coalition of physicians organizations including AAP chapters, athletic trainers, youth sports associations, and professional sports teams have led efforts to pass state laws requiring that coaches, teachers, and athletic trainers have training in the identification of concussion in youth athletes and that athletes suspected of concussion be cleared to play by the child or adolescent athlete's pediatrician and medical team prior to returning to the field.

### AAP POSITION

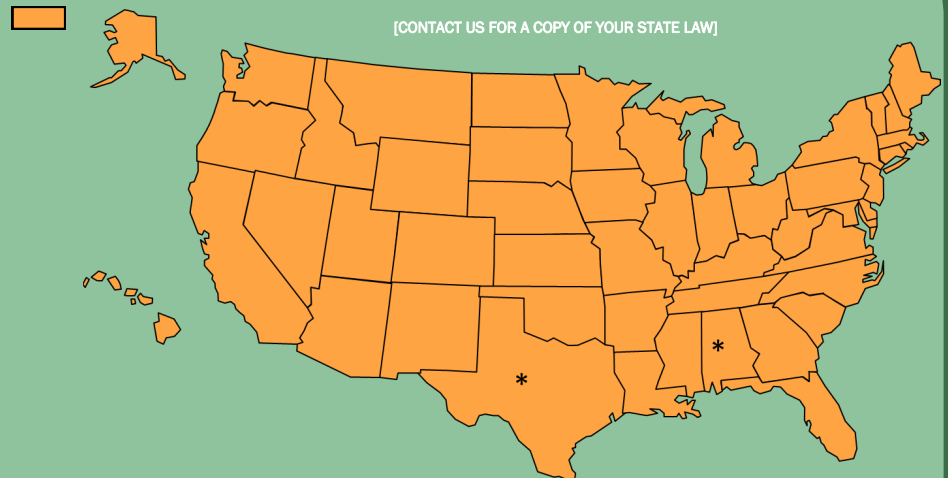
- Coaches and athletic trainers should be trained in the identification of concussions, and refer any student athlete suspected of sustaining a concussion to a licensed physician, such as a pediatrician, neurologist, primary care sports medicine specialist, or neurosurgeon with expanded knowledge and experience in pediatric concussion management for evaluation.
- Pediatricians and other physicians can be an important resource in educating coaches, athletic trainers, and other adults that work with young athletes in recognizing the signs of concussion injuries and when to seek medical attention for their athletes.
- A team approach consisting of the child or adolescent athlete's pediatrician and medical team, the school team, and the family team to assist the student in his or her return to learning is ideal.

## FACTS

- Almost 500,000 emergency department visits for traumatic brain injury are made annually by children ages 0 to 14 years.
- 40% of sports-related concussions involved children between the ages of 8 and 13 years.
- Although participation in organized sports has declined slightly, team-related concussions doubled between 1997 and 2007 in 8- to 13-year-olds and more than doubled in older teens.
- Concussions affect child athletes beyond impact sports like football and hockey; sports less commonly considered potential sources of head injury include volleyball, soccer, and cheerleading.
- Football has the highest rate of concussion in sports.
- Girls have higher concussion rates than boys in similar sports.

## PROGRESS

- 50 states—laws addressing concussion management: return to play



Pending Legislation:  
[2015 Statetrack Profile: Concussion/Return to Play](#)

*\*Alabama and Texas have return to play laws that requires a physician to provide clearance for return to play.*

## MORE

- [AAP Clinical Report—Sports-Related Concussion in Children and Adolescents](http://pediatrics.aappublications.org/content/126/3/597.full) –  
<http://pediatrics.aappublications.org/content/126/3/597.full>
- [AAP Clinical Report—Returning To Learning Following a Concussion](http://pediatrics.aappublications.org/content/132/5/948.full) –  
<http://pediatrics.aappublications.org/content/132/5/948.full>
- [American Medical Association \(AMA\) Policy—Return to Play After Suspected Concussion](https://ssl3.ama-assn.org/apps/ecomm/PolicyFinderForm.pl?site=www.ama-assn.org&uri=%2fresources%2fhtml%2fPolicyFinder%2fpolicyfiles%2fHnE%2fH-470.959.HTM) –  
<https://ssl3.ama-assn.org/apps/ecomm/PolicyFinderForm.pl?site=www.ama-assn.org&uri=%2fresources%2fhtml%2fPolicyFinder%2fpolicyfiles%2fHnE%2fH-470.959.HTM>