

Injury Information

Recommended Reading on Injuries

- [Head Injury Information](#)
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Head Injury Information

This is medical follow-up advice for the athlete's health and safety. Often, signs of a head injury do not appear immediately after trauma, but hours after the injury itself. The purpose of this fact sheet is to alert athletes and their families to the symptoms of significant head injuries; symptoms that may occur several hours after leaving the training room. If the athlete experiences one or more of the following symptoms following a head injury, medical help should be sought.

1. Severe or an increase in headache
2. Unusual drowsiness or cannot be awakened
3. Nausea, or forceful and repeated vomiting
4. A seizure, convulsions or tremors
5. Clumsy walking: lack of coordination
6. Dizziness
7. Slurred speech
8. Double or blurred vision
9. Unequal pupils (some people have this naturally)
10. No pupil reaction to light
11. Bleeding from the ear or clear fluid dripping from nose.
12. Numbness or paralysis (partial or complete)
13. Persistent ringing in ears
14. Loss of emotional control or personality change
15. Slowing of pulse (remember athletes may have a slower pulse)
16. Weakness in either arm
17. Loss of appetite
18. Difficulty remembering recent events or meaningful facts
19. Stiffening of neck

Other Instructions

1. NO ALCOHOL OR DRUGS!! Many symptoms of alcohol and drug use may mask or mimic those of increasing severity of a head injury.
2. Check the athlete every two hours after the injury until he/she is eating and feeling well. Check breathing rate, heart rate and color in addition to other symptoms.
3. Do **NOT** take any medication unless directed to by a physician. This includes aspirin, ibuprofen. Tylenol is okay, take as directed on package.
4. If you are concerned about the athlete's condition, you can wake him/her several times during the night. Remember that most people act groggy when aroused from sleep.
5. The athlete should **NOT** return to activity until headaches and all other symptoms are completely absent at rest and with activity. This includes weight lifting. If the headache and/or other symptoms does return during activity, the athlete should discontinue participation for that day. Generally, the athlete must be symptom free for one week before returning to contact sports.

Athletes Remember: Your health depends on how much you care about proper medical attention. Any questions or concerns call Heidi at school after 12:00 P.M. at 650-330-2001 ext. 2249, or cell phone anytime at 650-799-4992. Make sure you see Heidi the following school day and check in with the school nurse in the morning.

Ankle Sprain Home Treatment

An ankle sprain is a ligament injury, usually one or all of the three ligaments on the outside of the ankle joint. An ankle sprain is usually as a result of rolling over the outside of the ankle. Often, there is a pop which is likely the ligament tearing.

There are three grades of ankle sprains. Grade I is a mild ankle sprain where there is a stretching of the ligaments, but no tearing. Grade II is a moderate sprain with partial tearing of the ligaments. Grade III is severe with a tearing of one or more of the ligaments.

Immediate treatment is important. The ligaments need to have time to heal in order for the player to get back on the court as healthy as possible.

REMEMBER: R.I.C.E.

1. REST: Get off the ankle. Don't try to walk it off.
2. ICE: ICE the ankle 20 minutes every hour.
3. COMPRESSSION: Wrap the ankle with an ace wrap or tape.
4. ELEVATION: Keep the ankle elevated at least above the waist, but best if above the heart.

The sports medicine staff will start a rehabilitation program the day after an ankle sprain.

The player with a history of ankle sprains are more susceptible to have another one. Forty percent of players experience chronic pain and athletic disability after a bad ankle sprain. These athletes should wear a brace or get taped before every practice and game.