



**Leslie Frost Public School**  
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**Darin Parish, Principal**

**Julie White, Head Secretary**

**Faye Clarke, Assistant Secretary**

## **Bumped Heads Program**

October 2, 2023

Dear Parents and Guardians,

During a child's day, accidents may happen. We deal with a variety of injuries in the office on a daily basis, many of which are easily attended to with a band aid or ice.

Of special concern are any injuries to a child's head. New legislation has come into effect recently which is designed to protect and provide education regarding the dangers of head injuries and concussions.

The Bumped Head Bracelets program silently alerts adults in the building and parents/caregivers at home that the student has bumped their head and should be monitored for any indications of concussion.

If a student reports that they have bumped their head, the following steps take place at school:

- student is sent to the office;
- school staff will assess the injury;
- a phone call to parent/emergency contact will be made to inform of the incident;
- parents may make the decision to pick their child up from school;
- if the student remains at school, they will wear a yellow bracelet for the remainder of the day.

Parents are responsible for reporting any head bumps that take place outside of school hours to the school office for staff to monitor. In all instances of a head bump, students should be monitored closely. Daily communication will take place between the school and home.

Please see the information on the back of this letter to let you know what symptoms of concussion are and what you should watch for.

Sincerely,

Darin Parish  
Principal



## Signs and Symptoms of Suspected Concussion

Possible <u>Signs</u> Observed	Possible <u>Symptoms</u> Observed
<i>A sign is something that is <u>observed</u> by another person.</i>	<i>A symptom is something the student will <u>feel/report</u>.</i>
<p><b>Physical</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Vomiting</li> <li><input type="checkbox"/> Slurred speech</li> <li><input type="checkbox"/> Slowed reaction time</li> <li><input type="checkbox"/> Poor coordination or balance</li> <li><input type="checkbox"/> Blank stare/glassy-eyed/dazed or vacant look</li> <li><input type="checkbox"/> Decreased playing ability</li> <li><input type="checkbox"/> Loss of consciousness or lack of responsiveness</li> <li><input type="checkbox"/> Lying motionless on the ground or slow to get up</li> <li><input type="checkbox"/> Amnesia</li> <li><input type="checkbox"/> Seizure or convulsion</li> <li><input type="checkbox"/> Grabbing or clutching head</li> </ul>	<p><b>Physical</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Headache</li> <li><input type="checkbox"/> Pressure in head</li> <li><input type="checkbox"/> Neck pain</li> <li><input type="checkbox"/> Feeling off/not right</li> <li><input type="checkbox"/> Ringing in the ears</li> <li><input type="checkbox"/> Seeing double or blurry/loss of vision</li> <li><input type="checkbox"/> Seeing stars, flashing lights</li> <li><input type="checkbox"/> Pain at physical site of injury</li> <li><input type="checkbox"/> nausea/stomach ache/pain</li> <li><input type="checkbox"/> Balance problems or dizziness</li> <li><input type="checkbox"/> Fatigue or feeling tired</li> <li><input type="checkbox"/> Sensitivity to light or noise</li> </ul>
<p><b>Cognitive</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Difficulty concentrating</li> <li><input type="checkbox"/> Easily distracted</li> <li><input type="checkbox"/> General confusion</li> <li><input type="checkbox"/> Cannot remember things that happened before and after the injury</li> <li><input type="checkbox"/> Does not know time, date, place, class, type of activity in which they were participating</li> <li><input type="checkbox"/> Slowed reaction time (e.g., answering questions or following directions)</li> </ul>	<p><b>Cognitive</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Difficulty concentrating or remembering</li> <li><input type="checkbox"/> Slowed down, fatigue or lower energy</li> <li><input type="checkbox"/> Dazed or in a fog</li> </ul>
<p><b>Emotional/Behavioural</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Strange or inappropriate emotions (e.g., laughing, crying, getting angry easily)</li> </ul>	<p><b>Emotional/Behavioural</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Irritable, sad, more emotional than usual</li> <li><input type="checkbox"/> Nervous, anxious, depressed</li> </ul>
<p><b>Other</b></p> <p><input type="checkbox"/> _____</p>	<p><b>Other</b></p> <p><input type="checkbox"/> _____</p>