



Mountain Land
PHYSICAL THERAPY

CONCUSSION TREATMENT

COLBY BULLOCK, PT, DPT, CSCS

CONCUSSION THERAPY

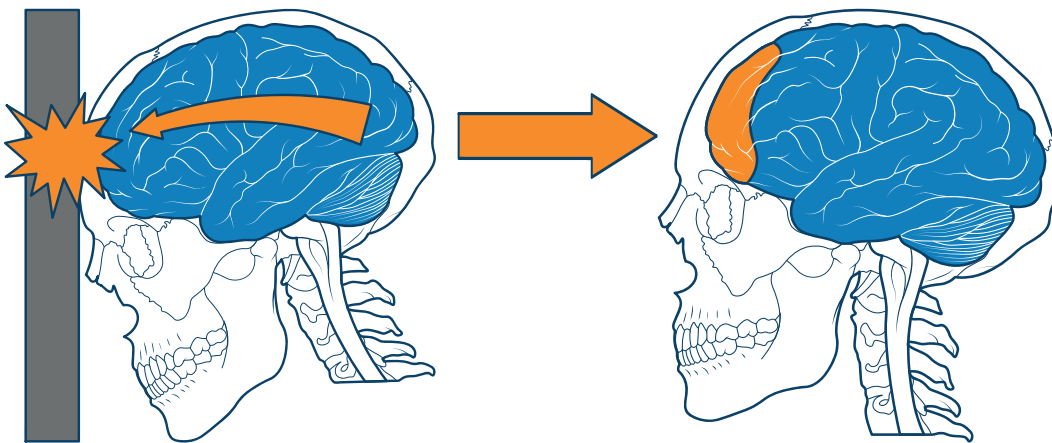
A concussion is defined as a type of traumatic brain injury (TBI) usually caused by a bump or blow to the head, neck, or body which causes the brain to move quickly back and forth inside the skull. Concussions can cause physical, cognitive, and emotional symptoms that can impact daily life. Headaches, visual deficits, fatigue, or concentration issues are only a few symptoms of concussions. These symptoms can take a toll on personal and professional relationships and get in the way of enjoying many activities. Symptoms can vary from person to person and may not appear immediately after a concussion. Recognizing the symptoms of a concussion is crucial, and seeking help can improve the quality of life and reduce the impact of concussions on personal and professional relationships. If you are still dealing with symptoms from a concussion 10 days after the original injury, or never fully recovered from an old concussion, we can help!

MOUNTAIN LAND PHYSICAL THERAPY MULTIMODAL APPROACH

- ✓ Balance therapy to improve postural stability and reduce dizziness or vertigo
- ✓ Coordination therapy to enhance motor function and reduce the risk of falls
- ✓ Vision therapy to address visual disturbances and promote efficient eye tracking and focusing
- ✓ Primitive reflex integration to retrain the brain's motor control and sensory processing

WHAT IS A CONCUSSION

A concussion is classified as a traumatic brain injury that alters the normal functioning of your brain.



MEET OUR CONCUSSION SPECIALIST



Colby Bullock, PT, DPT, CSCS Physical Therapist

Colby Bullock graduated from UVU in 2020 with a degree in Exercise Science. He further pursued his passion for helping others by obtaining his Doctorate of Physical Therapy from Texas Tech in 2023. Colby is a certified strength and conditioning specialist and plans to focus on scoliosis and concussion treatments.

Colby's therapy philosophy centers around the belief that long-term healing involves building strength and trust in one's own body. He strives to empower his patients to move safely and engage in activities that are meaningful to them, providing them with the necessary time and meaningful interventions. Colby lives by the motto "you can't go wrong with getting strong!" and aims to instill this mindset in his practice.

In his free time, Colby enjoys outdoor adventures with his wife Liz and their Brittany Spaniel, Rex. Colby has built his bike from the ground up, which he uses to go mountain biking.

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CONCUSSION SYMPTOM EDUCATION

PHYSICAL SYMPTOMS

- ✓ Blurred or double vision, as well as other visual disturbances
- ✓ Nausea and vomiting
- ✓ Sensitivity to noise or light, which can exacerbate other symptoms
- ✓ Headaches and/or nausea, which may be severe or persistent
- ✓ Dizziness and/or balance impairments, which can make it difficult to stand or walk

COGNITIVE SYMPTOMS

- ✓ Slowed reaction times or difficulty processing information
- ✓ New memory impairments, such as difficulty remembering recent events or new information
- ✓ Fogginess or confusion, including difficulty concentrating and poor memory
- ✓ Reduced attention span or difficulty multitasking
- ✓ Difficulty communicating or finding the right words to express thoughts

EMOTIONAL SYMPTOMS

- ✓ New emotional disturbances, such as anxiety, depression, anger, or irritability.
- ✓ Increased sensitivity to stress, anxiety or changes in mood.
- ✓ Difficulty sleeping or changes in sleep patterns including feeling tired, sluggish, difficulty staying awake and/or difficulty falling asleep

CONCUSSION TREATMENT PLAN

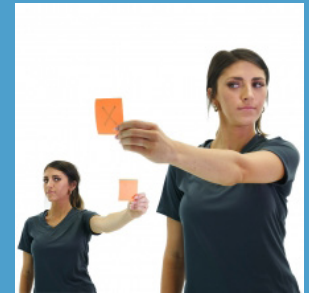
PRIMITIVE REFLEX EXERCISES

Moro Bridge / Duck on a Bike / Pigeon Carrying Pizza / Marching Zombie



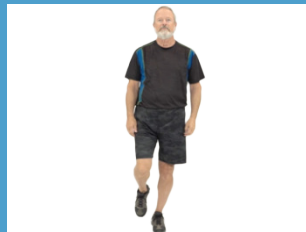
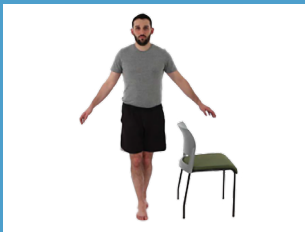
VISUAL TRAINING EXERCISES

Smooth Pursuits / Saccades / VOR



BALANCE TRAINING EXERCISES

Tandem Stance / SLS / Eyes Open/Closed



Return to Learn Protocol

Stage I:

Cognitive Rest (1-2days)

Stage II:

Trial of Cognitive Activity

Stage III:

Class with Maximum Modifications

Stage IV:

Class with Minimum Modifications

Stage V:

Class with No Modifications

Return to Play Protocol

Stage I:

Symptoms Limited Activity

Stage II:

Light Aerobic Activity

Stage III:

Sport Specific Activity

Stage IV:

Non-Contact Drills

Stage V:

Full Contact Drills

Stage VI:

Return to Play

Return to Work Protocol

Stage I:

Cognitive Rest (1-2 days)

Stage II:

Work with Modifications / Accommodations

Stage III:

Full Duty

POST-CONCUSSION SYMPTOM CHECKLIST

NAME: _____

DATE: _____

Please indicate how much each symptom has bothered you over the past 2 days.

	SYMPTOMS	NONE	MILD		MODERATE		SEVERE	
PHYSICAL	HEADACHE	0	1	2	3	4	5	6
	NAUSEA	0	1	2	3	4	5	6
	VOMITING	0	1	2	3	4	5	6
	BALANCE PROBLEM	0	1	2	3	4	5	6
	DIZZINESS	0	1	2	3	4	5	6
	BLURRY OR DOUBLE VISION	0	1	2	3	4	5	6
	SENSITIVITY TO LIGHT	0	1	2	3	4	5	6
	SENSITIVITY TO NOISE	0	1	2	3	4	5	6
	BALANCE PROBLEMS	0	1	2	3	4	5	6
	PAIN OTHER THAN HEADACHE	0	1	2	3	4	5	6
COGNITIVE	FEELING "IN A FOG"	0	1	2	3	4	5	6
	FEELING SLOWED DOWN	0	1	2	3	4	5	6
	DIFFICULTY CONCENTRATING	0	1	2	3	4	5	6
	DIFFICULTY REMEMBERING	0	1	2	3	4	5	6
SLEEP ISSUES	TROUBLE FALLING ASLEEP	0	1	2	3	4	5	6
	FATIGUE OR LOW ENERGY	0	1	2	3	4	5	6
	DROWSINESS	0	1	2	3	4	5	6
EMOTIONAL	FEELING MORE EMOTIONAL	0	1	2	3	4	5	6
	IRRITABILITY	0	1	2	3	4	5	6
	SADNESS	0	1	2	3	4	5	6
	NERVOUSNESS	0	1	2	3	4	5	6

Do symptoms worsen with physical activity? Yes ____ No ____ Not Applicable ____

Do symptoms worsen with thinking/cognitive activity? Yes ____ No ____ Not Applicable ____

Activity Level: Over the past two days, compared to what I would typically do, my level of activity has been _____% of what it would normally be.

Adapted from Oregon Concussion Awareness and Management Program (OCAMP) http://media.cbirt.org/uploads/files/sports_concussion_management_guide.pdf

FREQUENTLY ASKED QUESTIONS

Q: How common are concussions?

A: Concussions are the most common type of head injury. According to the CDC estimates, 1.6-3.8 million sports and recreation-related concussions occur each year in the U.S. 5 in 10 concussions go unreported or undetected. 2 in 10 high school athletes who play contact sports will get a concussion this year alone.



Q: What are the main causes of concussion?

A: Falls are the most common cause of concussion. It is estimated that around 47% of all concussions result from a fall. The next most common cause of a concussion is a head strike caused by sports or recreational injuries including football. It is estimated that around 15% of all concussions come from this type of injury and it is the most common cause of concussion in teens and adolescents. It is estimated that 14% of all concussions are caused by a motor vehicle accident.



Q: How long is the recovery time?

A: Typical recovery time is 14-30 days but can be shorter or longer depending on the nature of the injury and severity of symptoms. In some instances, an individual may have symptoms that persist for more than 3 to 4 weeks. This is called “post-concussion syndrome.” If untreated, this syndrome can lead to difficulties at work or school, considerable discomfort, and/or depression.



Q: If I've had a concussion, am I more likely to get another concussion?

A: Yes, someone who has already had a concussion is 1-2 times more likely to have a second concussion. Evidence shows that the brain is at heightened risk while recovering from a concussion. This means that a repeat injury while recovering from a prior concussion may occur with less force, take longer to resolve, and may have devastating long-term effects.



Q: What are primitive reflexes?

A: Primitive reflexes are present in early childhood and integrate with age. They help coordinate movements like walking, rolling, crawling, etc. After a concussion, these reflexes can resurface resulting in mood disturbances, balance issues, visual impairment, and difficulty with focus and concentration.



SCAN OR VISIT TO LEARN MORE



www.mlpt.com/concussion

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