



## Concussion Policy

All clubs and members should understand that this document has been written as an “education and awareness” policy to ensure player safety. For those sports where concussion is a likely occurrence - AFL and Rugby etc, the policies set by the relevant State Sporting Organisation should be well understood and followed.

Concussion may be caused by either a direct or indirect blow to the head, face, neck or body, causing an impulsive force transmitted to the head. It is important that all first aid personnel are aware of how to recognise and safely manage concussion.

Any player suspected of having suffered a head injury/concussion or is knocked unconscious should be removed from the activity and symptoms of suspected concussion should be investigated. See ‘Pocket Concussion Recognition Tool below’, produced by 2013 Concussion in Sport Group and promoted by Sports Medicine Australia.

Any athlete with a suspected concussion should be **IMMEDIATELY REMOVED FROM PLAY** and not return to the activity until they are assessed medically by a doctor and given clearance to play.

Athletes with a suspected concussion should not be left alone, drive a vehicle or drink alcohol. In all cases, the basic first aid principles should be followed.

Seek **IMMEDIATE** medical attention if they:

- Are unconscious for more than 5 minutes
- Develop visual disturbance
- Are confused
- Develop nausea/vomiting

# Pocket CONCUSSION RECOGNITION TOOL



To help identify concussion in children, youth and adults



**FIFA®**



**FEI**

## RECOGNIZE & REMOVE

Concussion should be suspected **if one or more** of the following visible clues, signs, symptoms or errors in memory questions are present.

### 1. Visible clues of suspected concussion

Any one or more of the following visual clues can indicate a possible concussion:

- Loss of consciousness or responsiveness
- Lying motionless on ground / Slow to get up
- Unsteady on feet / Balance problems or falling over / Incoordination
- Grabbing / Clutching of head
- Dazed, blank or vacant look
- Confused / Not aware of plays or events

### 2. Signs and symptoms of suspected concussion

Presence of any one or more of the following signs & symptoms may suggest a concussion:

- |                         |                          |                            |
|-------------------------|--------------------------|----------------------------|
| • Loss of consciousness | • Headache               | • Seizure or convulsion    |
| • Dizziness             | • Balance problems       | • Confusion                |
| • Nausea or vomiting    | • Feeling slowed down    | • Drowsiness               |
| • "Pressure in head"    | • More emotional         | • Blurred vision           |
| • Irritability          | • Sensitivity to light   | • Sadness                  |
| • Amnesia               | • Fatigue or low energy  | • Feeling like "in a fog"  |
| • Nervous or anxious    | • Neck Pain              | • "Don't feel right"       |
| • Sensitivity to noise  | • Difficulty remembering | • Difficulty concentrating |

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### 3. Memory function

Failure to answer any of these questions correctly may suggest a concussion.

*"What venue are we at today?"*

*"Which half is it now?"*

*"Who scored last in this game?"*

*"What team did you play last week / game?"*

*"Did your team win the last game?"*

**Any athlete with a suspected concussion should be IMMEDIATELY REMOVED FROM PLAY, and should not be returned to activity until they are assessed medically. Athletes with a suspected concussion should not be left alone and should not drive a motor vehicle.**

It is recommended that, in all cases of suspected concussion, the player is referred to a medical professional for diagnosis and guidance as well as return to play decisions, even if the symptoms resolve.

#### **RED FLAGS**

**If ANY of the following are reported then the player should be safely and immediately removed from the field. If no qualified medical professional is available, consider transporting by ambulance for urgent medical assessment:**

- ▶ Athlete complains of neck pain
- ▶ Increasing confusion or irritability
- ▶ Repeated vomiting
- ▶ Seizure or convulsion
- ▶ Weakness or tingling / burning in arms or legs
- ▶ Deteriorating conscious state
- ▶ Severe or increasing headache
- ▶ Unusual behaviour change
- ▶ Double vision

#### **Remember:**

- In all cases, the basic principles of first aid (danger, response, airway, breathing, circulation) should be followed.
- Do not attempt to move the player (other than required for airway support) unless trained to do so.
- Do not remove helmet (if present) unless trained to do so.

from McCrory et. al, Consensus Statement on Concussion in Sport. Br J Sports Med 47 (5), 2013