

CONCUSSION GUIDELINES

HOW CONCUSSIONS HAPPEN

Blow to the head, face, jaw or even elsewhere on the body. May also result from whiplash effect to the head or neck. A Player can sustain a concussion **WITHOUT** losing consciousness.

SUMMARY PRINCIPLES

- Concussion must be taken extremely seriously to safeguard the long-term welfare of players.
- Players suspected of having concussion must be removed from play and must not resume play in the match.
- Players suspected of having a concussion **MUST** be medically assessed.
- Players suspected of having concussion or diagnosed with concussion must go through a graduated return to play protocol (GRTP).
- Players must receive medical clearance before returning back to play.

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 be referred to a medical professional for diagnosis and guidance, as well as return to play decisions, even if symptoms resolve.

RED FLAGS

If **ANY** of the following are reported then the player should be safely and immediately removed from the field. If a qualified medical professional is not available, consider transporting by ambulance for urgent medical assessment:

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

REMEMBER

In all cases, the basic principles of first aid are:

- Identification of Danger
- Call for Emergency Response
- Airway, breathing & circulation
- Do not attempt to move the player (other than required for airway support) unless trained to do so especially in cases of suspected neck/spinal injury.
- Do not remove Protective head or shoulder equipment (if present) unless trained to do so

SIGNS AND SYMPTOMS OF A SUSPECTED CONCUSSION

- There is widespread variation in the initial effects of concussion and the symptoms may arise in any combination.
- If a player shows **ANY** of the symptoms described below as a result of a direct blow to the head, face, neck or elsewhere on the body with a force being transmitted to the head, they have suspected concussion.
 - Loss of consciousness
 - Seizure or convulsion
 - Balance problems
 - Nausea or vomiting
 - Drowsiness
 - More emotional
 - Irritability
 - Sadness
 - Fatigue or low energy
 - Nervous or anxious
 - "Don't feel right"
 - Difficulty remembering
 - Headache
 - Dizziness
 - Confusion
 - Feeling slowed down
 - "Pressure in head"
 - Blurred vision
 - Sensitivity to light
 - Amnesia
 - Feeling like "in a fog"
 - Neck Pain
 - Sensitivity to noise
 - Difficulty concentrating



For further information on concussions, visit irbplayerwelfare.com

MEMORY FUNCTION

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

- "At what venue are we at today?"
- "Which half is it now?"
- "Who scored last in the game?"
- "What team did you play last week/game?"
- "Did your team win the last game?"



HYDRATION

Water has a number of roles within the body.

- The circulation of nutrients, Removal of waste products, Maintaining body temperature

The single largest contributor to fatigue during performance is dehydration. Fluid losses of up to 2% of your body weight have shown decreases in sporting performance. When you are dehydrated your temperature and heart rate increase significantly more than during normal exercise causing standards.

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AM I HYDRATED?

Hydration is easily monitored through checking the colour and quantity of your urine. Clear or straw coloured urine reflects an adequate fluid intake, while a darker colour indicates that you need to step up your fluid consumption.

HOW DO I REHYDRATE?

- Daily:** Drink 35-45ml/kg.
- Before Exercise:** Drink 5-7mls/kg at least 4 hours prior.
- During Exercise:** 150-250mls every 15-20min.
- After Exercise:** 1.5lts for every 1kg lost.