WHAT IS IT?

A concussion is a brain injury that is associated with a temporary loss of brain function. The injury must be taken seriously to protect the long term welfare of all players. A concussion is caused by a direct or indirect hit to the player’s head or body.

SIGNS AND SYMPTOMS

Most concussion injuries occur without a loss of consciousness and so it is important to recognise the other signs and symptoms of concussion. Some symptoms develop immediately while other symptoms may appear gradually over time over a number of minutes or hours or even days. Presence of any one or more of the below signs and symptoms may suggest a concussion.

- Any Loss of consciousness
- Clutching Head
- Balance problems
- Drowsiness
- More emotional
- Irritability
- Sadness
- Fatigue or low energy
- Nervous or anxious
- “Don’t feel right”
- Difficulty remembering
- Headache
- Dizziness
- Feeling slowed down
- “Pressure in head”
- Blurred vision
- Sensitivity to light
- Feeling like “in a fog”
- Neck Pain
- Sensitivity to noise
- Difficulty concentrating

The following “red flag” symptoms mandate the urgent removal of a player to urgent medical attention/request for an ambulance:

<table>
<thead>
<tr>
<th>Prolonged Loss of Consciousness</th>
<th>Vomiting</th>
<th>Severe or increasing headache</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deteriorating conscious state</td>
<td>Double Vision</td>
<td>Disorientation /Confusion</td>
</tr>
<tr>
<td>Increasingly restless, agitated or combative</td>
<td>Abnormalities of balance, gait or coordination</td>
<td>Slurred or incoherent speech</td>
</tr>
<tr>
<td>Convulsions or Tonic Posturing</td>
<td>Weakness or tingling/burning in arms of legs</td>
<td>Possible neck or spine injuries</td>
</tr>
</tbody>
</table>

ACTION PLAN

Recognise – The signs and symptoms
Report – Don’t hide any symptoms
Rehab – Seek medical advice / Rest / Take time to recover fully
Return – Follow a step-wise GRTP and don’t return to full contact without your doctor’s clearance

If you suffer a potential concussion you should NEVER return to play on the day of injury. Return to play must follow a medically supervised stepwise approach and you MUST NEVER return to play whilst symptoms persist. Research has shown that when players are removed from play immediately following potentially concussive incident, this can reduce recovery time for a player versus those who play on.

DANGERS

A player’s brain needs time to heal after a concussion. When a player’s brain is still healing, it is more likely to receive another concussion. Repeat concussions can
increase the time it takes to recover and in rare cases, repeat concussions in young players can result in brain swelling or permanent damage to their brain. They can even be fatal.

**COPING WITH CONCUSSION**

The following are tips for coping with a concussion:

- Alcohol should be avoided as it may delay recovery and put you at increased risk for further injury.
- Minimise exposure to Screens (TVs, Phones etc) and avoid exposure 2 hrs. prior to sleep.
- Napping is not recommended. It is best to maintain normal sleep patterns to aid recovery. (20 mins max).
- Keep hydrated and eat well. Dehydration can exacerbate and prolong symptoms.
- When dealing with persistent symptoms, it is essential that you only take medications prescribed by your doctor.
- Recovery from concussion should not be rushed nor pressure applied to players to resume playing until recovery is complete. The risk of re injury is high and may lead to recurrent concussion injuries which can cause long term damage. It is better to have missed 1 game rather than the whole season.

**RETURN TO PLAY**

1. There should be an initial period of 24-48 hours rest after a concussion
2. RTP Protocols following concussion follow a stepwise approach. **If at any stage, activity does worsen or, bring on further, symptoms return to the previous stage.**
3. Written clearance from a medical doctor is required prior to return to full contact sports.
4. Adult players should take at least 7 days before returning to full contact practice. Again, if any post-concussion symptoms return or bring on further symptoms once a player has returned to full contact practice the player should return to the previous stage.

<table>
<thead>
<tr>
<th>Rehabilitation Stage</th>
<th>Functional exercise at stage</th>
<th>Objective of stage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. No Activity (24-48 Hours)</td>
<td>Physical and Cognitive Rest</td>
<td>Recovery</td>
</tr>
<tr>
<td>2. Light Activity (At least 1 day)</td>
<td>Walking, swimming, cycling, keeping intensity &lt;70% maximum permitted heart rate</td>
<td>Increase HR</td>
</tr>
<tr>
<td>3. Sports Specific Exercise (At least 1 day)</td>
<td>Running drills,</td>
<td>Add Movement</td>
</tr>
<tr>
<td>4. No Contact Training Drills (At least 1 day)</td>
<td>Progress to more complex training drills - passing drills, progressive resistance training</td>
<td>Exercise, coordination and cognitive load</td>
</tr>
<tr>
<td>5. Full Contact Practice (At least 1 day)</td>
<td>Following written medical clearance, participate in normal training activities.</td>
<td>Restore confidence and assess functional skills by coaching staff</td>
</tr>
<tr>
<td>6. Return to play (Minimum of 7 days since diagnosis)</td>
<td>Normal game play</td>
<td>Return to competitive action</td>
</tr>
</tbody>
</table>