REMOVE THE PLAYER FROM 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.

- Apply first aid principles: DRSABC (Danger, Response, Send for help, Airway, Breathing, Circulation).
- Treat as though they have a **neck injury.**
- ONLY be moved by a medical professional trained in spinal immobilisation techniques.
- Do not remove helmet (if present) unless trained to do so.
- Call 111 if there is concern regarding the risk of structural head or neck injury.

REFER THEM TO A MEDICAL DOCTOR

Anyone with a suspected head injury needs to see and be assessed by a medical doctor.

Only a qualified medical doctor can assess and diagnose a concussion. This is essential to confirm the diagnosis of concussion and to assess the risk

for more serious injury.

It is useful to have a list of local medical doctors, concussion clinics and emergency departments

close to where the sport/activity is being played.

WHAT HAPPENS NEXT REST, RECOVER AND

It is unanimously agreed that no return to sport/ activity on the day of concussive injury should occur.

Rest until symptom-free.

Recover by following your medical doctor's advice and gradually becoming more active.

Return to the full demands of your sport when fully recovered & cleared by your medical doctor.

It is important to note that different sports have different rules and return to play guidelines. Before returning it is important to check with your sports



accsportsmart.co.nz/concussion

Based on the Concussion Recognition Tool™ produced by the 2013 Concussion in Sport Group.

<mark>WHAT</mark> YOU SHOULD DO

Recognise the signs and symptoms of concussion

Remove the player from play

Refer them to a medical doctor for assessment

RECOGNISE THE SIGNS AND SYMPTOMS OF CONCUSSION

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Concussion should be sus of the following visible cl	
or errors in memory que	
01 PHYSICAL SIGNS (\)	NHAT YOU SEE)
☐ Loss of consciousness or non-responsive	☐ Disorientation/ confusion
Lying on the ground not moving or slow to get up	□ Visible injury to face or head (especially in combination with any
Loss of balance/ co-ordination	other signs) Grabbing/clutching
□ Dazed or vacant look	of head
02 MEMORY (WHAT TI	HEY SAY)
Failure to answer any of the	
may suggest a concussion.	
"What venue are we at today?"	
"Which half/quarter is it now?"	
"Who scored last in this game?"	
"What team did you play last week/game?"	
"Did your team win the last game?"	
03 CLINICAL SYMPTOMS (WHAT THEY FEEL) If any of the following symptoms appear, concussion may be present.	
☐ Blurred vision	Irritability
□ Neck pain	Problems with
□ Nausea	memory
Dizziness	 Reduced ability to think/concentrate
□ Confusion	□ Difficulty sleeping
☐ Sensitivity to light &/ or noise	
□ Nervous or anxious	
☐ Fatigue	
☐ Headache/pressure in the head	
☐ Drowsiness/trouble sleeping	
☐ More emotional	
04 RED FLAGS (WHAT REQUIRES HOSPITALISATION)	
If no qualified medical prof consider transporting by ar medical assessment.	
□ Player complains of neck pain	Double visionUnusual behaviour
☐ Increasing confusion or irritability	change
□ Repeated vomiting	
☐ Seizure or convulsion	

 Weakness or tingling/burning in arms or legs
 Deteriorating conscious state
 Severe or increasing headache