

Concussion Policy

Concussion is a significant and complex health issue. This policy will enable all to know how to recognise and manage concussion at all levels of play.

What is Concussion?

Concussion is a disturbance in brain function rather than a structural injury to the brain. It is caused by direct or indirect force to the head, face, neck or elsewhere with the force transmitted to the head.

A player does not have to be knocked unconscious to have a concussion. Loss of consciousness is seen in only 10-15% of cases of concussion.

Concussion is difficult to diagnose and only medical doctors can definitively diagnose a concussion. However, recognising a suspected concussion at the time of injury is extremely important to ensure appropriate management and to prevent further injury.

Recovery from concussion varies from person to person, and injury to injury. If recognised and appropriately managed most people will recover from their symptoms.

Who Gets Concussion?

Concussions occurs in almost every sport or recreational physical activity. It is more common in sports and activities with full physical contact between players (like combat sports and martial arts).

The Three Most Important Steps of Concussion Management:

1. Recognise Recognise an injury has occurred

Although a medical practitioner should formally diagnose a concussion, all sport stakeholders including players, parents, coaches, officials, teachers and trainers are responsible for recognising and reporting players with visual signs of a head injury or who report concussion symptoms.

This is particularly important when a medical practitioner is not immediately available or observing a match.

Watch for when a player collides with:

- another player;
- a piece of equipment;
- the ground.

Visual Signs Players who sustain an impact to the head, face, neck, or body can demonstrate visual signs of a concussion such as:

- Lying motionless on the playing surface
- Getting up slowly after a direct or indirect blow to the head
- Being disoriented or unable to respond appropriately to questions
- Having a blank or vacant stare
- Having balance and coordination problems such as stumbling or slow laboured movements
- Having a face or head injury
- Symptoms**
- Headache
- Feeling "Pressure in the head"
- Balance problems
- Nausea or vomiting
- Drowsiness
- Dizziness
- Blurred vision
- Sensitivity to light
- Sensitivity to noise
- Fatigue or low energy
- "Don't feel right"
- Sadness
- Neck pain

An athlete may report symptoms of a concussion to a team mate, parent, teacher, official or coach. Symptoms that suggest a concussion include:

- Feeling more emotional than usual
- Being more irritable than usual
- Being nervous or anxious
- Difficulty concentrating
- Difficulty remembering
- Feeling slow
- Feeling like "in a fog"

A medical practitioner must be present at the Venue. They should assess the injured player. If they decide the player is concussed, the player must not resume participating on the same day, under any circumstances.

If the medical practitioner decides the player is not concussed, the player can resume participating as soon as they feel ready.

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2. Remove

Removal from Play & Immediate Management -

Initial management must adhere to first aid rules, including airway, breathing, circulation and spinal immobilisation.

Anyone with a suspected concussion must be removed from competition. This will enable the player to be properly assessed.

Anyone who has a suspected concussion must not be allowed to return to participation on the same day unless cleared by a medical practitioner.

NSKA will not be influenced by the player, coaching staff, trainers, parents or others suggesting that they should return to play.

Players with suspected concussion should:

- Be immediately removed from participation
- Not be left alone initially (at least for the first 1-2 hours)
- Not drink alcohol
- Not use recreational drugs
- Not take certain prescription medications including aspirin, anti-inflammatory medications, sedative medications or strong pain-relieving medications
- Not be sent home by themselves.
- Not drive a motor vehicle
- Be referred for appropriate medical assessment

3. Refer

Referral for Medical Assessment - All players with concussion or suspected concussion need a medical assessment by a medical practitioner.

The player should be referred to a local general practice or hospital emergency department.

Return to play:

Return to Play or Sport Managing concussion is a shared responsibility between the player, coach, sports trainer, parents and medical practitioner.

Open communication is essential and information should be shared.

Coaches, administrators and officials should provide players and their parents with information about the:

- immediate management of a suspected concussion;
- graduated return-to- participation protocol; and
- medical clearances needed to return to participation.

Always refer the player and, if they are a child, their parents, to a qualified medical practitioner with some expertise in the management of concussion.

A player who has suffered a concussion should return to sport gradually. They should increase their exercise progressively, as long as they remain symptom-free

Additionally:

Players should:

Report any potential concussion symptoms they experience, report if they suspect a team mate or fellow player has concussion, follow any medical advice they receive.

Parents should:

Watch carefully for immediate and delayed signs and symptoms of concussion, obtain proper care for their child, inform other stakeholders of their child's health.

NSKA Should:

Ensure all stakeholders are aware of the concussion policy, coordinate concussion education activities, ensure all stakeholders follow and practice concussion protocols, notify parents of concussed junior player's as quickly as possible and provide advice about further management of their child, ensure concussed players follow appropriate protocols and medical assessment when resuming participation