

POCKET CONCUSSION RECOGNITION TOOL

To help identify concussion in children, youths and adults.

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



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:

- * Neck pain. * Deteriorating conscious state.
 - * Increasing confusion or irritability.
 - * Severe or increasing headache. * Repeated vomiting.
 - * Unusual behaviour change. * Seizure or convulsion.
 - * Double vision. * Weakness or tingling / burning in arms or legs.
- If no qualified medical professional is available, consider transporting by ambulance for urgent medical assessment.**

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.

If in doubt sit them out.

A HEAD INJURY CARD IS TO BE COMPLETED AND GIVEN TO THE PLAYERS'S PARENT/CARER AFTER ANY INCIDENT AND A CLUB ACCIDENT REPORTING FORM COMPLETED

A concussion is an injury to the brain



While injury to the brain can be fatal, most concussions recover completely with correct management

Loss of consciousness does not occur in the majority of concussions



All concussions should be regarded as potentially serious and should be managed in accordance with the appropriate guidelines

Incorrect management of concussion can lead to further injury

Anyone with any concussion symptoms following a head injury **must** be removed from playing or training



There must be no return to play on the day of any suspected concussion



Return to education or work must take priority over return to play