

COMMUNITY SPORTS RELATED CONCUSSION GUIDELINES

QUICK REFERENCE GUIDE

WHAT TO DO FOLLOWING A SUSPECTED SPORTS RELATED CONCUSSION (SRC)

"IF IN DOUBT, SIT THEM OUT."

At the time of injury

- Any player with a suspected SRC must be immediately removed from the match or training session, however, if a suspected neck injury has occurred, the player **should not** be moved and their neck stabilised until assessed by qualified medical personnel for potential spinal injury.
- The player must not take further part in any activity, including training or matches or other sports on the day of injury, even if the player reports feeling recovered.
- Players with a suspected SRC should not be left alone, consume alcohol, take any pain medication or anti-inflammatories, and should not drive a motor vehicle.
- All players with a suspected SRC should be assessed by a medical practitioner with appropriate training in SRC management (e.g., a Sport & Exercise Physician, Neurologist, Sports Doctor) within 3-4 days of the SRC event.
- A player with a suspected SRC should have a minimum of 24-48 hours of relative *physical and cognitive* rest. (ie. minimise physical activity and screen time) before resuming (light) daily living activities.

Emergency medical assessment needs to be sought if any of the following signs or symptoms are observed or develop

- Worsening headache.
- Repeated vomiting.
- Excessive drowsiness or inability to be awakened.
- Seizures (arms and legs jerk uncontrollably).
- Inability to recognize people or places.
- Any behavioural change, increasing confusion, irritability.
- Slurred speech, double vision.
- Weakness or numbness in arms or legs.
- Unsteadiness on feet.
- Loss of consciousness at the time of injury.

Ongoing Rest and Recovery

- All players suffering multiple SRC in a season (>1 in 3 months) or across seasons (>2 in 12 months) need to be assessed by a specialist medical practitioner (i.e., Sport & Exercise Physician or Neurologist) experienced in SRC management.
- Players suffering multiple SRCs should not return to partial or full play (match or training) until
 extensive clinical assessment has been conducted. Only after extensive specialist medical practitioner
 consultation and clearance should players participate in training or matches.
- Following a period of initial relative rest (i.e., minimise activity and screen time), a graded return to school and/or work is advised, in addition to the Graded Return to Play Program.

<u>Please refer to the Adult or Child/Adolescent Graded Return to Play Program</u> – SRC Quick Reference Guide for further guidance.

This Quick Reference Guide should be considered in conjunction with Football Australia's Community Sports Related Concussion Guidelines. These guidelines are intended to assist in the management of sports related concussion and do not replace the need to seek medical assessment. This information should not be interpreted as a guideline for clinical practice or legal standard of care.

