



Lower Hutt City AFC
Concussion/Head injury Policy
April 2017

This policy has been created to inform all club members and coaches with the necessary information to understand and recognise the signs of concussion

Concussion MUST be taken seriously

All club members should be able to recognise the signs of a concussion

Any player with a concussion must be removed IMMEDIATELY from training or the field of play and NOT return

All concussions must be medically assessed

Anyone with a concussion must not be left alone or allowed to drive

All concussions must be reported in the injury register located in the club gym

Signs and Symptoms of a Concussion

When faced with a potential concussion injury of a player it is very important that a quick and accurate assessment is made. A useful tool that can be used to assist you in the assessment process is The ACC Sideline Concussion Check card, which is available from the contacting clubmanager@lhcafc.org.nz. The card also details the processes that should be followed in the days following a suspected concussion.

Physical Signs (What you can see)

- Loss of consciousness
- Lying on ground, Slow to get back to their feet
- Poor balance/Coordination
- Confused/Disorientated
- Vomiting
- Visible Head or Facial Injuries
- Seizure

Clinical Signs (What the effected player may feel)

- Blurred vision
- Neck Pain
- Headache or feeling of “pressure” in head
- Vomiting /Nausea
- Issues with balance
- Dizziness
- Blurry or double vision
- Sensitive to light or noise
- Memory problems
- Feeling groggy or sluggish
- Confusion

10 Key questions to ask if there is a suspected concussion

1. Where is the match being played today?
2. Who are we playing against?
3. What position are you playing?
4. What half are we in?
5. How far into the half are we?
6. What team scored last?
7. Who did you play last week?
8. Did you win last week?
9. Count pre-determined number backwards
10. Months of the year in reverse

If a player fails to accurately answer any of the questions of the questions outlined above in partnership with ANY of the signs or symptoms explained, this indicates that they player has been concussed and must stop training or playing and removed from the field. The injured player should be accompanied at all times and taken as quickly as possible to a doctor or local emergency department for a professional assessment.

If the player is clearly unconscious then the initial priority is to clear and protect the airway and spine. Once it is safe to do so remove the player from the field. The player must be closely monitored until he/she regains consciousness. Be aware that convulsions may sometimes occur.

Management of a Concussed Player

If a player is suspected of having a concussion at training or during a match then the following must happen:

- The player MUST be immediately removed from the activity and MUST NOT return
- The player MUST NOT be left alone
- The player MUST NOT drive a vehicle
- The player MUST always be in the care of a responsible adult, who has been informed of the player's suspected concussion
- The player should receive a medical assessment as soon as possible

It is key to remember that the onset of symptoms may occur hours or even days after the initial injury. Therefore, each concussion should be treated individually and should not be related to any that have been treated prior. The foundation of managing a simple concussion is for the player to rest until ALL of the symptoms are resolved and then begin the graduated return to play protocol outlined within this document

Recovery

The majority (80-90%) of concussions resolve in a short (7-10 day) period. Some players will have more long-lasting symptoms. The recovery frame may be longer in children and adolescents. As a result, the return to play process should be more conservative for children and adolescents. It should be stressed that there is no arbitrary time for recovery and that decisions regarding a return to play need to be individualised.

Prior to embarking on a return to play an athlete must have no symptoms at rest and must have had a clearance from a medical doctor.

It is suggested that any player who has sustained multiple concussions, or who has symptoms which persist for more than four weeks, have a review from a clinician with expertise in managing sports-related concussion (for example a Sport and Exercise Medicine Physician, Neurologist, or Neurosurgeon) before returning to play.

Return to play protocol

Once the player has been cleared by a suitably qualified medical professional, he/she should begin a Graduated return to play program like the one outlined below. (Plan courtesy of New Zealand Football)

Rehabilitation Level	Functional exercise at each stage of rehabilitation	Objective of each stage
Level 1 No activity, minimum 24 hours following the injury where managed by a medical practitioner, otherwise minimum 14 days following the injury	Complete physical and cognitive rest without symptoms. Only proceed to level 2 once ALL symptoms have resolved.	Recovery
Level 2 Light aerobic exercise during 24-hour period	Walking, swimming or stationary cycling keeping intensity, <70% maximum predicted heart rate. No resistance training. Symptom free during full 24-hour period.	Increase heart rate
Level 3 Sport-specific exercise during 24-hour period	Running drills. No head impact activities. Symptom free during full 24-hour period.	Add movement
Level 4 Non-contact training drills during 24-hour period	Progression to more complex training drills, e.g. passing drills. May start progressive resistance training. Symptom free during full 24-hour period.	Exercise, coordination, and cognitive load
Level 5 Full Contact Practice	Following medical clearance participate in normal training activities	Restore confidence and assess functional skills by coaching staff
Level 6 After 24 hours return to play	Player rehabilitated	Recovered

In all cases once the player has been given clearance the Graduated return to play program provides for a minimum of 6 days before the injured player can play competitively again.

Clearance by a medical doctor is required before return to football.

Enforcement of policy

These guidelines reflect best practice in the management of concussion in a football context. It is everyone's responsibility to ensure that they are applied. Players, coaches, officials and clubs are encouraged to promote these guidelines and to ensure that they are applied appropriately.

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Concussion is everyone's responsibility to recognise
IF IN DOUBT SIT THEM OUT