

# If in doubt, SIT THEM OUT!

## **Concussion Guidance**





#### What is a concussion?

A concussion is a brain injury caused by a blow to the head, neck or face.

Symptoms may start immediately, but in some cases, can be delayed in onset for a few minutes up to hours after the trauma.

### Know the signs and symptoms

If these are present, a concussion should be suspected:

- Headache
- · Loss of consciousness
- Nausea or vomiting
- Dizziness
- Blurred vision
- Sensitivity to light and noise

- Confusion
- Drowsiness
- Seizure
- Feeling like in a fog
- · Balance problems
- · Difficulty concentrating

More severe "red flag" symptoms may include:

a worsening headache, seizures, repeated vomiting, increasing confusion, or unusual changes in behaviour.

## Immediate management of concussion

If an athlete has a suspected concussion, they should be removed from training/competition and **MUST NOT** resume training/competing on the same day.





# If the following have occurred or are present, the athlete should go to A&E:



- · Loss of consciousness.
- · Repeated vomiting.
- · Headache not going away with painkillers.
- · Change in behaviour.
- Memory loss.
- · Previous brain injury or brain surgery.
- · Blood clotting issues.
- · Crying more than usual in young children or babies.

## If any of the following occur or are present, you must call 999:

- 999
- · Unconsciousness has persisted.
- · Difficulty remaining awake.
- · Fits or seizure.
- · Vision or hearing problems.
- · Black eye without any eye injury.
- · Bleeding from ears.
- · Clear fluid coming from the ears or nose.
- · Numbness or weakness in part of the body.
- · Problems walking or with balance.
- · Head wound.
- · Has hit their head with force.

In all other instances, the athlete should be given the following advice:



- See a doctor for assessment of the injury.
  - Must remain supervised by a responsible adult for 24 hours post injury.
  - · Use an ice pack to reduce any swelling.
  - Rest and avoid any stress.



- Do not consume alcohol until at least 24 hours afterwards and then only if they are free of symptoms.
- Do not drive until medically cleared to do so or have no symptoms.
- Do not use aspirin or anti-inflammatory medication.
- · Do not use sleeping tablets.
- Do not train or exercise until given clearance by a doctor or symptoms have resolved.



In all cases of suspected concussion, the athlete should be advised to seek medical assessment even if the symptoms resolve quickly.



#### Return to training

Any suspected concussion should be assessed by an appropriately qualified medical practitioner who should guide return to sport.

After a minimum of 24-48 hours rest, a staged return to normal activities and then sport should be taken place under the guidance of a suitably qualified medical professional.

Each stage should be a minimum of 24 hours' duration and individuals should only progress if they are completely symptom free.

Athletes aged 18 or younger should spend a minimum of 48 hours at each stage and those under 13 should seek guidance from a doctor about how guickly to progress through the stages.

Standard return to training guidelines for mild concussion not requiring hospital treatment should include six basic steps:

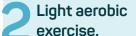
Initial rest period 24-48 hours minimum or until all symptoms resolved (seven days for divers under 18).



• Only progress if no symptoms after full return to school or work.



- · No diving or water polo.
- · Less than 15 minutes activity and less than 70 per cent max heart rate.
- · No resistance training or jumping.



- · Less than 80 per cent max heart rate for under 45 minutes.
- · Skills and drills.
- · Artistic swimming: Limit body and head movement.
- · No head impact activities or contact.
- · Water polo: Passing and drills.
- · Diving: Springboard bouncing only (max 50).



Non-contact

training drills.

- · Less than 90 per cent max heart rate and less than 60 minutes.
- · Water polo: Inrease intensity of training, shooting, passing.
- · Water polo: Avoid being hit by a water polo ball and no head impact activities.
- · Diving: Somersaults from the side to the feet.
- · Artistic swimming: Rotations and underwater started.



- · Open water: Training.
- · Water polo: Full activity.
- · Diving: Dive to hands from 5 metres maximum.
- · Diving: Platform line up, entries and skill chain-nil to feet.
- · Artistic swimming: Lifts and underwater increasing time.



· Diving: Platform to hands, springboard lead ups.

If any symptoms recur/occur during the return to training process, the athlete should be reviewed by a medical professional again and must return to the previous symptom free stage.

For the full guidance go to bit.ly/SEConcussionGuidance.









