



## Concussion / Suspected Concussion

### Information and Advice for all Players UNDER 19 years\*

\*Any player under 19 years of age the day prior to the commencement of league season/tournament

Players Name \_\_\_\_\_ Date of injury : \_\_\_\_\_ Time: \_\_\_\_\_

To the parent or guardian: The above-named player has sustained a head injury today. I am satisfied that at this time their injury does not appear to be serious. However, the player has had a traumatic brain injury, so there is a small risk of developing complications. As such they should be assessed a doctor on the same day. When returning home, it is important that they are supervised by a responsible adult until their symptoms resolve.

If they experience any of the following symptoms in the next few days they **should be taken to A&E** as soon as possible, and take this advice sheet with you:

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| • <b>Loss of consciousness</b>                             | • <b>Increasing disorientation</b>                                       |
| • <b>New deafness in one or both ears</b>                  | • <b>Problems understanding or speaking</b>                              |
| • <b>Loss of balance or problems walking</b>               | • <b>Blurred or double vision</b>  |
| • <b>Any weakness in one or both arms or legs</b>          | • <b>Severe headache not relieved by painkillers such as paracetamol</b> |
| • <b>Any vomiting</b>                                      | • <b>Bleeding from one or both ears</b>                                  |
| • <b>Clear fluid coming out of the ears or nose</b>        | • <b>Any fits (collapsing or passing out suddenly)</b>                   |
| • <b>Drowsiness when they would normally be wide awake</b> | • <b>Inability to be woken</b>   |

**Remember CONCUSSION is a Traumatic BRAIN INJURY.**

Do not be confused between normal sleep and unconsciousness – someone who is unconscious cannot be woken up – you need to be satisfied that they are reacting normally to you.

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#### **DOS and DON'TS**

- DO** make sure they stay within reach of a responsible adult and medical help in the next few days
- DO** have plenty of rest and avoid stressful situations
- DO** show this factsheet to other family members and school staff who can keep an eye on their condition
- DO** give mild painkillers such as paracetamol for headaches
- DON'T** leave unsupervised until at least 48 hours have passed, or until symptoms have cleared
- DON'T** allow any alcohol intake
- DON'T** give aspirin or sleeping tablets without consulting a doctor
- DON'T** return to full studies until symptoms have cleared
- DON'T** play any contact sport until they have completed graduated return to play (details page 2)
- DON'T** allow them to drive until you feel they have fully recovered.

**If in doubt consult your doctor**

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Children and adolescents may take longer to recover and while symptoms may have resolved, the brain takes a longer time to recover fully. Please see a doctor if symptoms persist. Players will not be allowed to return to contact sport until they have been assessed and deemed fit to resume contact training by a Specialist Doctor experienced in Concussion Management. They must also have fully completed the graduated return to play protocols (see page 2) and be symptom free.

See reverse page for the Graduated Return to Play(GTRP) programme for all players U19 years of age

Signed: \_\_\_\_\_ Print name : \_\_\_\_\_ Contact Number: \_\_\_\_\_

Doctor / Physiotherapist / Trainer/Coach with \_\_\_\_\_ Team



## Protocols for Management of Minor Head Injury / Concussion / Suspected Concussion

### For all players UNDER 19 years of age

The full SRU Graduated Return To Play (G RTP) programme must be completed for **ALL** players diagnosed with a concussion by an appropriately qualified person and for **ALL** players **suspected** of having concussion during a game or training at which there is no appropriately qualified person (Dr or Health Care Professional) present to do an assessment. The G RTP includes:

- ☐ A minimum initial period of 24 hours of both relative physical rest and cognitive rest before beginning Stage 2a of the G RTP (Graduated Return to Play)
- ☐ Rest from sport specific activities for a **minimum of 14 days** (stage 2b) following cessation of symptoms for children and adolescents (U 19's) before starting Stage 3 G RTP.
- ☐ A doctor trained in concussion management **MUST** review the player and confirm that the player can take part in full contact training to start Stage 5.

World Rugby recommends that a medical practitioner or approved healthcare professional supervises the G RTP.

### GRADUATED RETURN to PLAY (G RTP)\*

Stage	Aim	Activity Allowed	Goal of each step
1	Rest (Physical and Cognitive) within symptom tolerance <b>Minimum 24 hrs</b>	No exercise or driving. <b>Consider time off or adaption of study or work</b>	Recovery with gradual reintroduction of work/school activities
2 a	Symptom limited activities <b>Min 24 hrs</b>	Initially activities of daily living that do not provoke symptoms	Return to normal activities (as symptoms permit) A return to learning must be achieved before returning to sport
2 b	Light aerobic exercise <b>Minimum of 14 days</b>	Walking or stationary cycling at slow to medium pace 10-15 mins. No resistance training.	Increase heart rate <b>Must be symptom stable post activity during the full 48 hrs period.</b>
3	Sport-specific exercise	Running drills. No head impact activities	Add movement/directional change
4	Non-contact training drills	Harder training drills, e.g. passing drills. May start progressive resistance training	Exercise, coordination and increased thinking (cognitive loading)
	<b>After Medical Clearance</b>	by a doctor with concussion management experience	
5	<b>Full contact practice</b>	Participate in normal training activities	Restore confidence and assess functional skills by coaching staff
6	Return to sport	Normal game play	Return to sport

### \*NOTES on G RTP

- ☐ There should be at least 48 hours (or longer if any symptoms recur) for each step of the progression from stage 3– 6
- ☐ If any symptoms worsen during exercise, the player rests until symptoms cleared, then they should go back to the previous stage
- ☐ Resistance training should be added only in the later stages (stage 4 at the earliest).
- ☐ If symptoms are persistent the player should be referred to a doctor who is an expert in the management of concussion.
- ☐ For further information please refer to <https://www.world.rugby/the-game/player-welfare/medical/concussion/concussion-guidelines>