The Management of Concussion in Australian Football, with specific provisions for children aged 5-17 years

To properly implement this Policy, all AGSV staff must ensure that they abide by this Policy and
the Guidelines and assist AGSV in the implementation of the Policy and Guidelines; and

AGSV Member schools will appoint a Concussion Officer to oversee the concussion policy and procedures within their School.

These guidelines have been created to assist members of the AGSV in the management of concussion. Sport Related Concussion is a growing health concern in Australia. It affects athletes at all levels of sport, from the part-time recreational athlete to the full-time professional. Concerns about the incidence, and possible health ramifications for athletes, have led to an increased focus on the importance of diagnosing and managing the condition safely agtime professional. to asional. 3

AGSV Member Schools should conduct an annual process to educate staff members involved in sport about concussion. This should include information regarding:

what is concussion;
causes of concussion;
common signs and symptoms;
steps to reduce the risk of concussion;
procedures if a student has suspected concussion or head injury; and
return to school and sport medical clearance requirements.

AGSV Member Schools should also maintain information regarding students' concussion history to help identify players who fit into a high-risk category. Such information (refer APPENDIX A) should be handled and treated confidentially and in accordance with the School's relevant privacy policy.

Prior to any event or match, AGSV Member Schools should ensure that all relevant staff are provided with information regarding local health services in the event of an incident, including:

any onsite first aid responders or medical services; local doctors or medical centres; registered medical practitioner; local hospital emergency departments; and ambulance services.

It is not the role of coaches or school staff members to diagnose concussion. Following any possible concussion, students should be removed from the competition until a medical practitioner has had the

In the early stages of injury, it is often not clear whether you are dealing with a concussion or there is a more severe underlying structural head injury. For this reason, the most important steps in initial management and beyond include:

- 1. recognising a suspected concussion.
- 2. removing the person from the game or activity -
- 3. referring the person (parents/guardian) to a qualified medical practitioner for assessment.
- 4. returning to either training or games.

Any player who has suffered a concussion or is suspected of having a concussion must be medically assessed as soon as possible after the injury and must NOT be allowed to return to play on the same day.

Recognising concussion can be difficult. The signs and symptoms vary, are not always specific, may be subtle and may be delayed. Onlookers should suspect concussion when an injury results in a knock to the head or body that transmits a force to the head. A hard knock is not required concussion can occur from minor knocks. Watch for when a player collides with another player, a piece of equipment, or the ground.

All individuals including other staff members, parents and other students should report any suspected concussion.

The following steps should be used as a guide to help the identification of concussion. However, these guidelines only provide brief sideline evaluations of concussion and it is still imperative that a comprehensive medical assessment is conducted by an appropriately experienced medical practitioner.

If there is concern after an injury, including whether <u>any</u> of the following signs are observed or complaints are reported, then the player should safely be removed from the game or activity. If no licensed healthcare professional is available, call an ambulance for urgent medical assessment:

Sometimes there will be clear signs that a player has sustained a concussion. If they display any of the following clinical features, immediately remove the player from sport:

Any player suspected of having concussion must be removed from the game/training and should have no further involvement. Do not be swayed by the opinion of the player, trainers, coaching staff, parents or others regarding the return of the student to play. Always adopt a conservative approach

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Even where medical clearance has been obtained, the school/staff member must not allow the player to return to, or continue training or competing if their condition deteriorates, or if the student advises that they are feeling any symptoms or showing any signs of concussion. During the first training session or game following a concussion, staff members are to closely monitor the player. Where there is uncertainty about a student's recovery, in all cases the staff member will adopt a more conservative approach,

and remove them from the activity and follow the protocols and procedures outlined above. The clearance process is to be re-assessed.

Managing concussion is a shared responsibility between the player, coach, sports trainer/medic, parents, medical practitioner,
essential, and information should be shared. A player who has suffered a concussion should return to sport gradually. They should increase their exercise progressively, as long as they remain symptom-free.

Children require a different approach from adults because their brains are developing, and they need to continue learning and acquiring knowledge. Cognitive stimulation such as screens, reading and undertaking learning activities should be gradually introduced after 48 hours of the concussion.

The priority when managing concussion in children should be returning to school and learning, ahead of returning to sport. Concussion symptoms can interfere with memory and information processing. This can make it hard for children to learn in the classroom.

Parents should discuss an appropriate return-to-school strategy with their medical practitioner school.

Rest is very important after a concussion because it helps the brain to heal. Concussions affect people differently. While most athletes with a concussion recover fully, some will have symptoms that last for days or even weeks. A more serious concussion can last for months or longer.

Current medical advice suggests that most people will recover from a concussion within 10 to 14 days. Children and adolescents often take longer to recover from a concussion than adults, and it is not abnormal for symptoms to last up to 4 weeks for children or adolescents.

For children and adolescents, it is suggested the graduated return to play protocol should be extended such that a child does not return to competitive contact activities until at least 14 days from the resolution of all symptoms and not return to competitive contact sport prior to 21 days from the time of suffering concussion.

Rest is recommended immediately following a concussion (24 48 hours). Rest means not undertaking any activity that provokes symptoms. However, anyone who has suffered a concussion should be encouraged to become gradually and progressively more active as long as they do not experience any symptoms.

It is important that athletes do not ignore their symptoms and in general a more conservative approach be used in cases where there is any uncertainty.

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http://www.aflcommunityclub.com.au/fileadmin/user_upload/Health_Fitness/2017_Community_Concussion_Guidelines.pdf

Concussion in Sport Australia Position Statement

An initiative of the Australian Institute of Sport, Australian Medical Association, Australasian College of Sport and Exercise Physicians and Sports Medicine Australia

Dr Lisa Elkington, Dr Silvia Manzanero and Dr David Hughes - AIS

https://www.concussioninsport.gov.au/home#position_statement

Concussion in Sport Policy, Issued by Sports Medicine Australia v1.0 January 2018 https://sma.org.au/resources-advice/concussion/

Guidelines for the Management of Concussion in Rugby League, National Rugby League https://www.playrugbyleague.com/media/3102/guidelines-for-the-management-of-concussion-in-rugby-league_final_v20.pdf

Pocket Concussion Recognition Tool

http://www.aflcommunityclub.com.au/fileadmin/user_upload/Coach_AFL/Injury_Management/2013_Pock_et_Concussion_Recognition_Tool_CRT_.pdf

Role of Helmets and Mouthquards in Australian Football -

http://www.aflcommunityclub.com.au/fileadmin/user_upload/Health_Fitness/Role_of_helmets_and_mouthgaurds.pdf

Concussion Education Training

Concussion Management AIS (ausport.gov.au)

AIS

INITIAL CONSULTATION / DETAILS OF INJURED PERSON							
SCHOOL STAFF / TEAM OFFICIAL TO COMPLETE; (MANAGER, COACH OR FIRST AID /							
HEALTH PRACTITIONER) AT THE TIME / ON THE DAY OF THE INJURY, BEFORE							
PRESENTING TO MEDICAL PRACTITIONER REVIEW ING THE PLAYER							
Name of Player:	Date of Birth:						
Sport:	School:						
Dear Medical Practitioner, This person has presented to you today because they w	ere injured on						
This person has presented to you today because they w							
·	na						
This person has presented to you today because they w (day & date of injury) ir	na						
This person has presented to you today because they w (day & date of injury) ir (game or training session)	n a and suffered a potential head injury or						

I (insert name) consent to							
information to my School regarding the head injury / concussion and confirm the information I have provided the medical practitioner has been complete and accurate.							
Name:	Signature:		Date:				
- INITI	AL CONSULTATION	1	(continued)				
2. Please note, any person who has been diagnosed showing signs and symptoms of concussion MUST follow the (https://www.agsvsport.com.au/wp-content/uploads/AGSV-Concussion-Policy-Procedures.pdf) 3. The student has been informed that they must be referred to a medical practitioner. Your role as this medical practitioner is to assess the person and to guide their progress through the protocol steps outlined in the 4.							
I have read and understood the in	formation above and	I have as	sessed the person.				
Confirmation of Concussion: Y / N							
Signed:		Date:					
FAMILY RETURNS	ТО						