

RECOGNISING CONCUSSION

Priority is to **RECOGNISE & REMOVE** anyone with suspected concussion.

Concussion should be suspected if one or more of the following observable signs, symptoms or errors on memory assessment are present.

1 OBSERVABLE SIGNS OF SUSPECTED CONCUSSION:

Any one of the following observable signs can indicate a possible concussion:

- Loss of consciousness or responsiveness
- Lying motionless on ground / Slow to get up
- Unsteady on feet / Balance problems or falling over / Incoordination
- Grabbing / Clutching of head
- Dazed, blank or vacant look
- Confused / Not aware of plays or events

2 SIGNS AND SYMPTOMS OF SUSPECTED CONCUSSION:

Presence of any one or more of the following signs & symptoms may suggest a concussion:

- Loss of consciousness
- Headache, or "Pressure in head"
- Seizure or convulsion
- Dizziness or balance problems
- Confusion
- Difficulty concentrating or feeling like "in a fog"
- Nausea or vomiting
- Drowsiness, feeling slowed down, fatigue or low energy
- More emotional or sadness
- Blurred vision, or sensitivity to light or noise
- Nervous, anxious or irritable
- Difficulty remembering or amnesia
- Neck Pain
- "Don't feel right"

3 MEMORY ASSESSMENT:

Failure to answer any of these question may also suggest a concussion:

"What venue are we at today?"

"Which half is it now?"

"Who scored last in this game?"

"What team did you play last week/game?"

"Did your team win the last game?"

The above questions are NOT to be used to clear a player to return to play

Any player with suspected concussion should be **IMMEDIATELY REMOVED FROM PLAY** and **NOT RETURN**.

It is recommended that, in all cases of suspected concussion, the player is referred to a medical professional for diagnosis and guidance as well as return to play decisions, even if the symptoms resolve.

4 FIRST AID:

Remember, in all cases, the basic principles of first aid should be followed:

- Safe approach
- Do not move the player until safe to do so
- Apply basic first aid principles first and check airway, breathing, and circulation.
- Assess for spinal injury
- Do not remove headgear if a neck injury is suspected unless trained to do so.
- If any danger signs DIAL 999 AND CALL AN AMBULANCE



RED FLAGS – FOR POTENTIALLY MORE SERIOUS HEAD INJURY

If **ANY** of the following are reported or develop while under observation, then the player should be safely and immediately removed for assessment by a medical professional. If no qualified medical professional is available, consider calling an ambulance for urgent medical assessment:

- ⦿ Deteriorating conscious state
- ⦿ Increasing confusion or irritability
- ⦿ Severe or increasing headache
- ⦿ Repeated vomiting
- ⦿ Unusual behaviour change
- ⦿ Seizure or convulsion
- ⦿ Double vision or deafness
- ⦿ Weakness or tingling/burning in arms or legs



Developed in collaboration with ISEH:



Rugby Football Union
Rugby House
Twickenham Stadium
200 Whitton Road
Twickenham
TW2 7BA

Email: rugbysafe@rfu.com

www.englandrugby.com/headcase

Rugby Football Union. The RFU Rose and the words 'England Rugby' are official registered trade marks of the Rugby Football Union.



DON'T BE A
HEAD CASE
HEADACHE EMOTIONAL APPEARANCE DROWSINESS
CONFUSION AGITATED SEIZURE EARS AND EYES
STOP! CHECK FOR CONCUSSION