

DON'T BE A

# HEADCASE

STOP! CHECK FOR CONCUSSION



ENGLANDRUGBY.COM  
/HEADCASE

## WHAT IS CONCUSSION?

Concussion is a traumatic brain injury typically resulting from a blow to the head or body which results in forces being transmitted to the brain. The symptoms can present immediately and be short-lived or the onset of symptoms may be delayed and start to occur sometime after the initial injury.

## CONCUSSION – WHAT YOU NEED TO KNOW?

**Concussion must be taken extremely seriously to safeguard the safety and long-term health of players.**

The majority (80-90%) of concussion symptoms resolve in around 7-10 days, with symptoms resolving within 1 - 2 days in around a third of cases.

Loss of consciousness occurs in only 10-15% of concussions.

Head guards, gum shields and other protective equipment don't protect against concussions.

The Activate Injury Prevention Exercise can improve functional conditioning and activation of muscles, all of which improve playing performance, prepare players for the physical demands of the game and reduce the risk of injury including concussion.

Concussion can occur in a **game or at training**.

The onset of the effects of concussion may be **delayed** for up to 24-48 hours.

## RECOGNISE & REMOVE

**A player should stop playing/training and not return if:**

They have one or more of the following observable signs:

- Loss of consciousness or responsiveness
- Slow to get up
- Unsteady on feet
- Incoordination
- Clutching of head
- Blank or vacant look
- Dazed/ Confused

One or more of the following symptoms are present:

- Headache
- Seizure or convulsion
- Dizziness or balance problems
- Confusion
- Difficulty concentrating
- Nausea or vomiting
- Drowsiness / fatigue
- More emotional or sadness
- Blurred vision, sensitivity to light
- Irritable
- Difficulty remembering or amnesia
- Neck Pain
- "Don't feel right"



**REMEMBER  
IF IN DOUBT,  
SIT THEM OUT!**

## RED FLAGS

If ANY of the following are reported or develop, medical attention should be sought as a priority (e.g., consider calling an ambulance)

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



**PLAYERS SUSPECTED OF HAVING CONCUSSION SHOULD BE REMOVED FROM PLAY AND SHOULD NOT PARTICIPATE ANY FURTHER IN THE MATCH OR TRAINING SESSION**

**ALL PLAYERS SUSPECTED OF HAVING CONCUSSION SHOULD BE ASSESSED BY A HEALTHCARE PROFESSIONAL.**

## THE IMMEDIATE DO'S AND DON'TS FOLLOWING A SUSPECTED CONCUSSION:

### DO ✓

Remove from play immediately.

Get assessed by a health care professional within 24 hours of the incident to ensure that there are no significant underlying medical issues.

Rest & Sleep – this is good for recovery.

### DO NOT ✗

Be left alone in the first 24 hours.

Consume alcohol in the 24 hours and/or until symptom free.

Drive a motor vehicle in the first hours and/or until symptom free.

## FOLLOWING A SUSPECTED CONCUSSION WHAT'S YOUR ROLE?



### COACHES

- Safely remove player from the field of play.
- Observe or assign responsible adult to monitor player.
- If player is U19 and below, contact parent to inform of injury.
- Ensure player gets home safely.
- Ensure there is someone to monitor the player over the next 24-48 hours (e.g. parent or family member).
- Ensure an injury report form is completed and stored by the club appropriately.
- Follow the appropriate GRTP (Adult or U19 and below).



### PLAYERS

- Stop playing / training immediately if you experience any of the symptoms of concussion.
- Be honest with how you feel and report to coach or parent.
- Inform your school / work.
- Follow the appropriate GRTP (Adult or U19 and below).

During training and matches always look out for teammates and encourage them to be honest and report if they experience any concussion symptoms.



### PARENTS & FAMILY

- Ensure you have full details of the incident.
- Get the player medically assessed.
- Monitor player for signs and symptoms of concussion for 24-48 hours.
- Encourage initial rest (both body and mind) for the first 24-48.
- Inform school / work / other sports of the suspected concussion.
- Support the player to follow the appropriate GRTP (Adult or U19 and below).

# RECOVER & RETURN

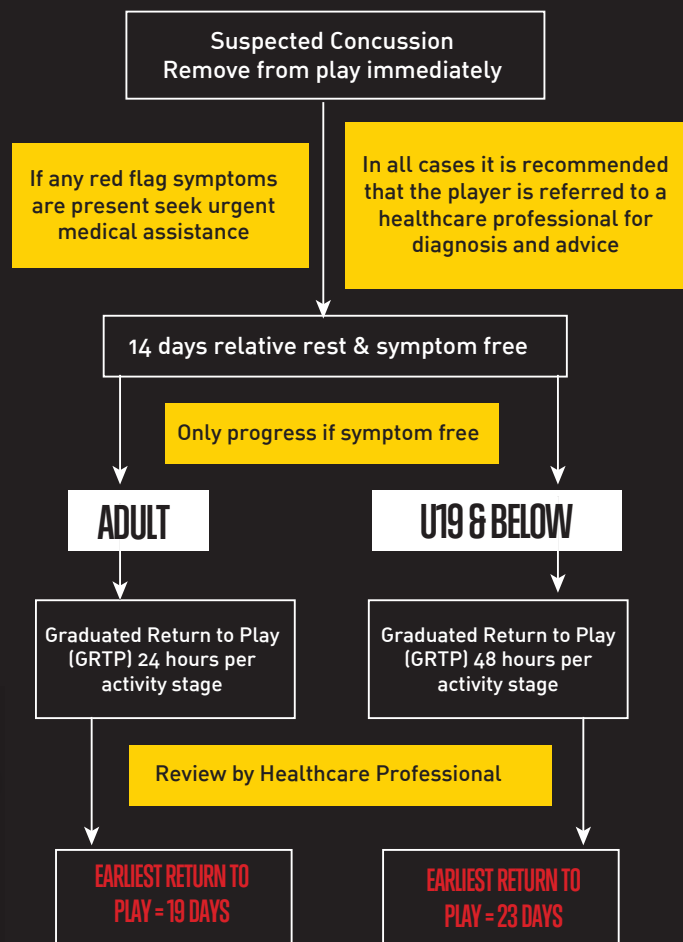
- Players suspected of having concussion or diagnosed with concussion should go through a Graduated Return to Play programme (GRTP).
- The brain is more vulnerable to further injury if it hasn't had time to fully recover.
- It is important that players are open and honest about how they are feeling, any on-going symptoms and their recovery.
- Players should be not forced/pressured to return to play until they have no on-going symptoms, have fully recovered and have completed the GRTP.

PLAYERS SHOULD BE REVIEWED BY A HEALTHCARE PROFESSIONAL BEFORE RETURNING TO PLAY.



# RETURN TO PLAY GUIDE

CLICK HERE TO SEE THE FULL GRADUATED RETURN TO PLAY PROGRAMME



STAGE	STAGE 1	STAGE 2A	STAGE 2B	STAGE 3	STAGE 4	STAGE 5	STAGE 6
OBJECTIVE	Initial Rest (Study & Rest)	Relative Rest (Symptoms limited activities)	Light Aerobic Exercise	Sport-Specific Exercise	Non-contact Training	Full Contact Practice	Return to Play
RECOVERY	Recovery	Return to normal activities (See symptoms period)	Return to normal activities (See symptoms period)	Return to normal activities (See symptoms period)	Return to normal activities (See symptoms period)	Return to normal activities (See symptoms period)	Return to normal activities (See symptoms period)
EXERCISE/ACTIVITY ALLOWED	No driving or motor use. Moderate physical activity. Consider time off or adaptation of study/work.	Light daily activities that do not provoke symptoms. Consider time off or adaptation of study/work.	Light jogging for 10-15 minutes, increasing to maximum of 30 minutes. No heavy lifting or running.	Light jogging for 10-15 minutes, increasing to maximum of 30 minutes. No heavy lifting or running.	Light jogging for 10-15 minutes, increasing to maximum of 30 minutes. No heavy lifting or running.	Light jogging for 10-15 minutes, increasing to maximum of 30 minutes. No heavy lifting or running.	Light jogging for 10-15 minutes, increasing to maximum of 30 minutes. No heavy lifting or running.
EXERCISE/ACTIVITY ALLOWED	No Training	No Training	Less than 20 mins	Less than 40 mins	Less than 60 mins	Less than 80 mins	Normal game play
MAX HEART RATE	No Training	No Training	Less than 70%	Less than 80%	Less than 90%	Less than 90%	Less than 90%
ADULT	14-48 hours	14 days (incl. Stage 1)	Minimum 24 hours	Minimum 24 hours	Minimum 24 hours	Minimum 24 hours	Minimum 24 hours
U19 & BELOW	24-48 hours	14 days (incl. Stage 1)	Minimum 48 hours	Minimum 48 hours	Minimum 48 hours	Minimum 48 hours	Minimum 48 hours

FOR MORE INFORMATION INCLUDING THE HEADCASE EXTENDED GUIDANCE DOCUMENT, ONLINE AWARENESS MODULE, DOWNLOADABLE VISIT THE HEADCASE HOMEPAGE.

ENGLANDRUGBY.COM /HEADCASE