



# **Coaches & Concussion**

**What is expected of you?**

# Concussion

- **A mild brain injury caused by trauma that results in temporary dysfunction of the brain.**
  - Trauma can be direct (blow to the head) or indirect (whiplash).
  - Generally causes symptoms and temporary loss of brain skills (memory, thinking abilities)

# Concussion Symptoms & Signs

## Symptoms

- ✓ Headache
- ✓ Nausea, vomiting and abdominal pain
- ✓ Dizziness
- ✓ Altered or lost vision
- ✓ Fatigue
- ✓ Ringing in the ears
- ✓ Memory disturbance
- ✓ Loss of consciousness

## Signs

- Loss of balance
- Irritability
- Pale complexion
- Poor concentration
- Slow or altered verbal skills
- Inappropriate behaviour
- Mental confusion and memory loss
- Not feeling your usual self!

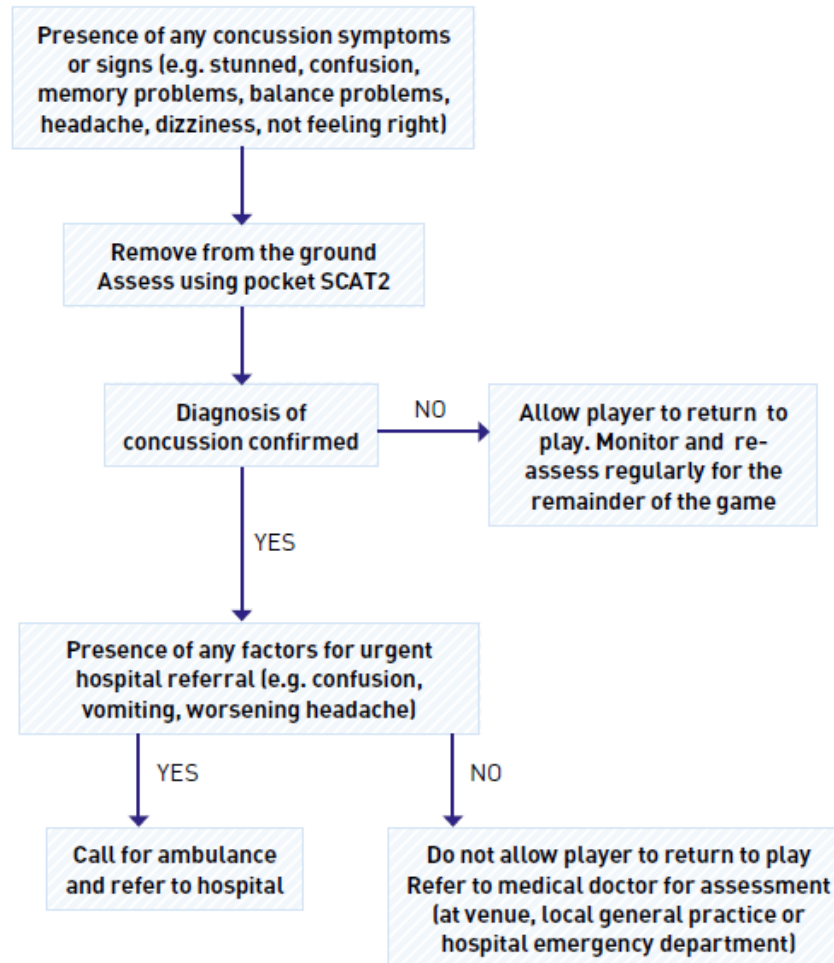
# Concussion Management

## **Player welfare is the critical element**

- Suspect concussion in any player with one or more of the symptoms after a knock to the head
- Refer the player for medical evaluation
- Ensure the player has received medical clearance before allowing them to return to the game or a graded training program

# Management guidelines

An outline of the overall management approach is summarised in figure 1 below.



**Figure 1. Summary of the management of concussion in Australian football.**

\*Note: for any player with loss of consciousness, basic first aid principles should be used (i.e. Airways, Breathing, CPR...). Care must also be taken with the player's neck, which may have also been injured in the collision. An ambulance should be called, and these players transported to hospital immediately for further assessment and management.

# Pocket SCAT2

Sport Concussion Assessment Tool 2



FIFA®



Concussion should be suspected in the presence of **any one or more** of the following: symptoms (such as headache), or physical signs (such as unsteadiness), or impaired brain function (e.g. confusion) or abnormal behaviour.

## 1. SYMPTOMS

Presence of any of the following signs & symptoms may suggest a concussion.

- » Loss of consciousness
- » Seizure or convulsion
- » Amnesia
- » Headache
- » "Pressure in head"
- » Neck Pain
- » Nausea or vomiting
- » Dizziness
- » Blurred vision
- » Balance problems
- » Sensitivity to light
- » Sensitivity to noise
- » Feeling slowed down
- » Feeling like "in a fog"
- » Don't feel right"
- » Difficulty concentrating
- » Difficulty remembering
- » Fatigue or low energy
- » Confusion
- » Drowsiness
- » More emotional
- » Irritability
- » Sadness
- » Nervous or anxious

## 2. MEMORY FUNCTION

Failure to answer all questions correctly may 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?"*

## 3. BALANCE TESTING

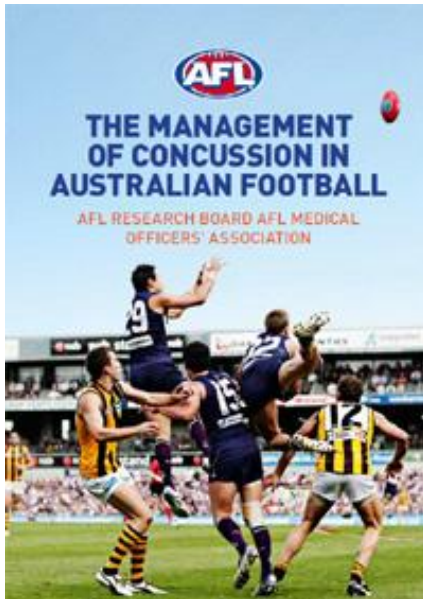
### Instructions for tandem stance

*"Now stand heel-to-toe with your non-dominant foot in back. Your weight should be evenly distributed across both feet. You should try to maintain stability for 20 seconds with your hands on your hips and your eyes closed. I will be counting the number of times you move out of this position. If you stumble out of this position, open your eyes and return to the start position and continue balancing. I will start timing when you are set and have closed your eyes."*

Observe the athlete for 20 seconds. If they make more than 5 errors (such as lift their hands off their hips; open their eyes; lift their forefoot or heel; step, stumble, or fall; or remain out of the start position for more than 5 seconds) then this may suggest a concussion.

**Any athlete with a suspected concussion should be IMMEDIATELY REMOVED FROM PLAY, urgently assessed medically, should not be left alone and should not drive a motor vehicle.**

# Concussion Resources



## Pocket SCAT2



Concussion should be suspected in the presence of **any one or more** of the following: symptoms (such as headache), or physical signs (such as unsteadiness), or impaired brain function (e.g. confusion) or abnormal behaviour.

### 1. Symptoms

Presence of any of the following signs & symptoms may suggest a concussion.

- Loss of consciousness
- Seizure or convulsion
- Amnesia
- Headache
- "Pressure in head"
- Neck Pain
- Nausea or vomiting
- Dizziness
- Blurred vision
- Balance problems
- Sensitivity to light
- Sensitivity to noise
- Feeling slowed down
- Feeling like "in a fog"
- "Don't feel right"
- Difficulty concentrating
- Difficulty remembering
- Fatigue or low energy
- Confusion
- Drowsiness
- More emotional
- Irritability
- Sadness
- Nervous or anxious

## THE MANAGEMENT OF CONCUSSION IN AUSTRALIAN FOOTBALL

- » In the best practice management of concussion in sport, the critical element remains the welfare of the player, both in the short and long term.
- » Concussion refers to a disturbance in brain function that results from trauma to the brain. The changes are temporary and the majority of players recover completely if managed correctly.
- » Complications can occur if the player is returned to play before they have recovered from their concussion. This is why any player with suspected concussion must be withdrawn from playing or training immediately. Furthermore, no player with concussion should be returned to play in the same game.
- » Management of head injury is difficult for non-medical personnel. 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.
- » Therefore, ALL players with concussion or suspected of concussion need an urgent medical assessment.
- » In the days or weeks following concussion, a player should not be allowed to return to play or train until they have had a formal medical clearance.
- » The key components of management of concussion include:
  - a) Suspecting the diagnosis in any player with symptoms such as confusion or headache after a knock to the head;
  - b) Referring the player for medical evaluation; and
  - c) Ensuring the player has received medical clearance before allowing them to return to a graded training program.



AFL Research Board  
AFL Medical Officers Association



### Concussion Recognition & Management Guidelines for PARENTS

Concussion is a mild brain injury, caused by trauma that results in temporary dysfunction of the brain. When it occurs a child may experience symptoms and temporary loss of brain skills such as memory and thinking abilities. It is important for parents of young athletes to be aware of possible signs of concussion which are often subtle.

The trauma causing concussion can sometimes be obvious, but at other times may be very subtle and hardly noticed. Ask your child or an adult who were present whether they were unconscious, dazed or confused at the time of the incident if they have some symptoms or signs. If a child with concussion returns to sport while still symptomatic, there is an increased risk of further injury to the child. Therefore, no player who has concussion, or is suspected of having concussion, should return to their sporting activity (training or playing) until cleared by a doctor.

#### Some of the possible symptoms of concussion:

- Headache
- Dizziness
- Fatigue
- Memory disturbance
- Nausea, vomiting and abdominal pain
- Altered or lost vision
- Ringing in the ears

#### Some of the signs you may observe:

- Loss of balance
- Pale complexion
- Slow or altered verbal skills
- Mental confusion and memory loss
- Irritability
- Poor concentration
- Inappropriate behaviour

You might think that your child is just not themselves! Think of concussion:

- if you observe any of these symptoms or signs in your child see a doctor as soon as possible.
- if you observe deterioration in these symptoms or signs go immediately to an accident and emergency department at your nearest hospital.

#### Progression and Management

As a temporary brain dysfunction, concussion will resolve with time. This may vary from an hour or so to several days. Occasionally the brain will recover even more slowly.

The best treatment is rest from physical activity and school. The child should be seen by a doctor who will monitor the symptoms, signs and brain functioning. The doctor must clear your child to return to sporting activity and this will usually involve a stepped approach with a gradual increase in activities over a few days.

The doctor may arrange a specialist opinion (if the concussion is slow to resolve) or cognitive testing (brain functioning).

If at any stage your child's symptoms or signs are getting worse seek urgent medical attention.

#### Key Messages

1. Concussion is a temporary dysfunction of the brain following trauma
2. Suspect concussion if your child is irritable, complains of a headache, is sick, excessively fatigued or just not themselves
3. Seek medical attention – urgently if the symptoms or signs are getting worse
4. Rest is the best treatment followed by a gradual return to physical activity and school-work

For more detailed information refer to the AFL brochure Management of Concussion in Australian Football and the Coaches/Injury Management sector of the AFL's Community Development website [www.aflcommunityclub.com.au](http://www.aflcommunityclub.com.au).

# Coaches' Responsibilities

- A major responsibility is a duty of care to players (both teams) and their welfare
- In accordance with the AFL Coaches' Code of Conduct, coaches must not put undue pressure on medical staff, trainers or players in regards to returning to play
- Be familiar with and follow the AFL's Concussion Management Guidelines



# Positive Steps for Coaches

- Coach your players to play within the “Spirit of the Game”
- Familiarise yourself with and follow the AFL’s Guidelines
- Ensure your club has supplies of AFL Resources
- Ensure all relevant match personnel have the same understanding
- Display the AFL Concussion Poster in clubrooms
- All medical support staff have SCAT2 cards
- Educate players and parents about concussion and other safety policies
- Provide player/parent handouts on match day