

CBC FREMANTLE Management of Concussion Guidelines

Concussion is a traumatic brain injury, induced by biomechanical forces to the head, or anywhere on the body which transmits an impulsive force to the head. It causes short-lived neurological impairment, and the symptoms may evolve over the hours or days following the injury.

Managing concussion is a shared responsibility between the student, teacher, parents, carers and medical practitioner. Open communication is essential, and information should be shared.

- For students who have been concussed outside of school activities, it is the responsibility of the parent or guardian to inform the school of the students' condition.
- CBC Fremantle will follow the "PHASES OF REST, RECOVERY AND RETURN TO PLAY FOLLOWING CONCUSSION GUIDELINES" for concussions, in school and out of school.
- Any boy who has received diagnosis of concussion from any activity, whether inside or outside of school, will be registered on the school's concussion register by Student Services and the Head of Sport, Head of Physical education and the students Head of House will be notified.

GUIDELINES

- Rest is recommended immediately following a concussion (24–48 hours).
 - Rest means not undertaking any activity that provokes symptoms.
 - Including school/learning, computer and phone use, television and gaming consoles.
- Once your son has been symptom free for 48 hours he can commence a gradual return to school, play and sporting activities as shown below.
- If your son remains symptom free, he can progress to the next stage; however, if he develops any symptoms he should move back one stage and try again after a further 24 hrs.

Clearance by a medical doctor is required before returning to full team training session and competitive contact sport.

Return to Play cannot occur until the 12th day after the day on which the concussion was suffered.



"PHASES OF REST, RECOVERY AND RETURN TO PLAY FOLLOWING CONCUSSION GUIDELINES"

Focus	Goal	Requirements to move to next stage
Rest		
Phase 1: Rest	Help speed up recovery	 Complete physical and cognitive rest in the first 24 – 48 hours
Phase 2: Light aerobic activity	Two days of activities that do not provoke symptoms	 No concussion-related symptoms at rest or with physical or brain activity for at least 1 day and the player has successfully returned to school
Phase 3: Sport specific exercise	 Light / moderate aerobic exercise (e.g. walking, jogging, cycling at slow to medium pace) No resistance training 	Remain completely free of any concussion-related symptoms
Clearance by a medical doctor is required before returning to full team training session and competitive		
contact sport		
Phase 4: Non- contact training drills	Return to full team training – non-contact except drills with incidental contact (incl. tackling)	
Phase 5: Full contact training	Full team training	 Remain completely free of any concussion-related symptoms Player confident to participate in a match
Stage 6: Return to Play		
(12th day after the day on which the concussion was suffered)		

A student who receives two concussions in a 12-month period must see a medical doctor experienced in concussion management to follow an individual management plan before he can return to playing sport. Return to learning, sport and play protocol for children 18 years of age and under.



MANAGEMENT OF CONCUSSION ON THE DAY OF INJURY

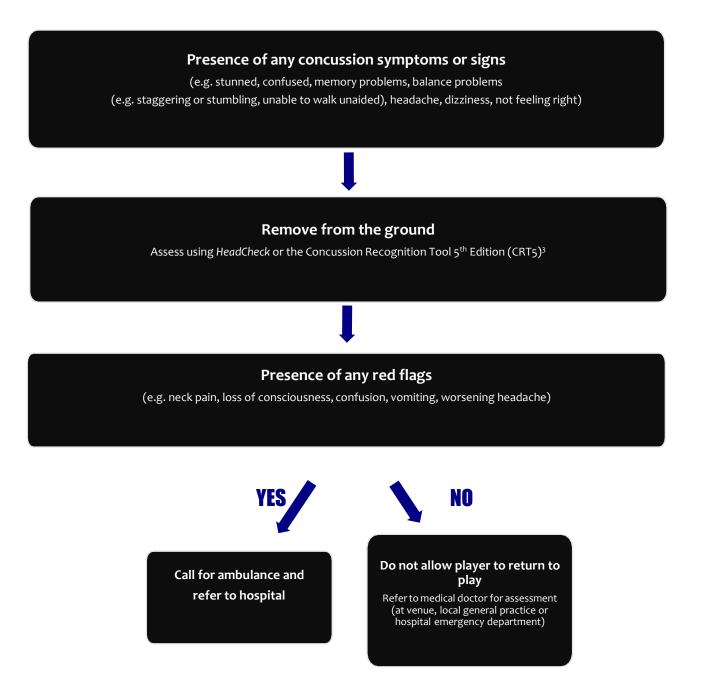


Figure 1. Summary of the management of concussion.

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. The unconscious player must not be moved by anyone other than a medical professional or ambulance officer. An ambulance should be called, and these players transported tohospital immediately for further assessment and management.

THE MANAGEMENT OF SPORT-RELATED CONCUSSION IN AUSTRALIAN FOOTBALL (afl.com.au)