

RETURN TO PLAY AFTER CONCUSSION

The majority (80-90%) of concussions resolve in a short (7-10 days) period. This may be longer in youth age groups and a more conservative approach should be taken with them. RFU Guidelines state that players suffering from concussion playing at U19 age group or below **MUST** abstain from any form of sporting / physical activity for a minimum of 2 weeks and be completely symptom free before seeing a doctor for an assessment before returning to training. They should then follow a graduated return to play programme (outlined below) prior to being assessed again and cleared to play by a doctor. Athletes must be completely symptom free during physical activity before they can return to full contact competitive play. The earliest return to play for U19 age groups and below is deemed by the RFU as being **23 days**.

Clearance by trained medical personnel (doctors) is advised for any individual suffering concussion, but is mandatory for children and adolescents.

Players should follow a graded return to activity and should **allow 48 hours** between each stage (each stage can be progressed when the player is symptom free and has been for the whole 48 hours after completing an individual stage):

- 1) No activity, complete rest (**for a minimum of 48 hours after all symptoms have cleared**). Progress to stage 2 when completely symptom free.
- 2) Light aerobic activity such as walking or gentle cycling on a static bike. No resistance exercise. Heart rate to be no greater than 70% maximum predicted heart rate.
- 3) Progressive sport specific exercise (e.g. running in rugby). Progressive introduction of resistance exercises. No head impact exercises
- 4) Non-contact training drills (e.g. passing drills, more complex movement patterns).
- 5) Full contact training (normal training activities).
- 6) Return to competitive play (**AFTER CLEARANCE BY A DOCTOR**).

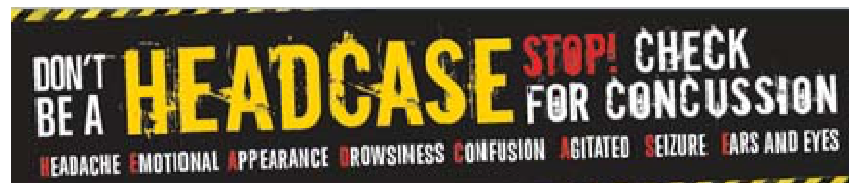
Players should return to stage 1 if there is any recurrence of symptoms at any stage.



This information has been compiled from guidance from the IRB, RFU and the mandatory training that the attending health professional will have undertaken.



JUNIOR (U19s and below) **HEAD INJURY ADVICE**



Player's Name: _____

Date / Time of Injury: _____

Brief Details of Injury: _____

Medical Professional Attending: _____

The player named above sustained a head injury during the match / training session. They have been treated at pitchside but should be observed closely for the next 48 hours by a responsible adult as head injury / concussion problems may not become apparent for some time after the original incident.

The advice in this booklet has been compiled from information from the IRB, RFU and several sports trauma management companies. The advice should be followed, but if there is any concern that this booklet has not addressed, the player should be taken immediately to A&E and their symptoms investigated.

CONCUSSION MUST BE TAKEN EXTREMELY SERIOUSLY

WHAT IS CONCUSSION?

Concussion is a temporary impairment of brain function usually caused by a blow that has shaken the brain within the skull. Symptoms can be short lasting, progressive, or delayed. A player can sustain a concussion without losing consciousness.

Returning too early to training and playing may delay the healing process, prolong the concussion symptoms, lead to long term health problems (e.g. psychological or degenerative brain disorders) or even worse, be **FATAL**.

SIGNS & SYMPTOMS OF CONCUSSION

The following are often experienced after a head injury / concussion.

- Mild headache, dizziness, “feeling in a fog”
- Nausea (feeling sick)
- Mood changes, irritability, nervousness, anxiety
- Loss of appetite
- Disturbed sleep, drowsiness
- Lack of concentration, forgetfulness, confusion, disorientation
- Slowed reaction times

These should settle down in the days following the incident and medical advice should be obtained from a General Practitioner or NHS Direct (0845 46 47) if the symptoms do not settle within a few days.

DO:

- Rest completely for at least 24 hours and have a responsible adult with you
- Eat, drink and sleep as normal

DO NOT:

- Operate machinery, drive or ride bikes if you feel unwell
- Make any legally-binding decisions
- Drink alcohol
- Take any sedatives or drugs, other than your normal medication
- Carry out any strenuous activities until the symptoms have passed

If any of the following are noted, the player should be taken to the nearest Accident & Emergency Department **immediately**:

- Unconsciousness, persistent drowsiness, difficulty waking, unusual sleep patterns
- Slurred speech, nonsense speech, difficulty speaking or understanding
- Vomiting
- Fits, convulsions, sudden collapse or fainting
- Blurred vision, double vision, or any other problems with eyesight
- Deafness, persistent noise, ringing or any other problems with hearing
- Severe headache
- Problems of balance, weakness, tingling or numbness in limbs
- Bleeding or discharge of clear fluid from ear or nose (not simple nosebleed)

NOTE TO RESPONSIBLE ADULT

Concussion does not necessarily warrant a visit to A&E. The medical professional attending at the time of the injury will have monitored the player over time after the event and will insist on a visit to A&E if their symptoms are *not improving or are deteriorating*. Some of the symptoms of concussion are worrying, but are quite normal and will clear with time. However, you know the player the best and will know if something is not right. Trust your instincts, and if you are in anyway still concerned after reading this information leaflet, take the player to see his / her GP or, if necessary, to A&E.

DROWSINESS

After a knock to the head, it is quite common for the player to want to sleep for a short while. This is normal and if they want to sleep, let them. If you are concerned about the level of drowsiness displayed, wake them up after an hour or so. They may be grumpy about being woken up, but this is reassuring. You can let them go back to sleep again. You can do this a few times during the night if there is particular concern. Check that the player is breathing correctly and make sure they are not in danger of choking should they vomit.