

RED FLAGS

Reported or observed 'red flags' could indicate a potentially more serious head injury. They include:

- Loss of consciousness due to injury
- Deteriorating consciousness
- Increasing confusion or irritability
- Double vision
- Seizure or convulsion
- Repeated vomiting
- Severe neck pain

The full list of Red Flags are in the **Extended Guidelines** in the HEADCASE toolkit.



If ANY of the 'red flags' are present, the player should receive urgent medical assessment from an appropriate Healthcare Professional onsite or at an A&E Hospital Dept, via emergency ambulance transfer if necessary.

RECOVER & RETURN

Graduated Return to Activity & Sport (GRAS) programme

STAGE 1: Initial Relative Rest

24 - 48 hours following concussion

STAGE 2: Return to Daily Activities & Light Physical Activities

After the 24 - 48 hours initial rest period (min 24 hours after concussion event)

STAGE 3: Aerobic Exercise & Low Level Body Weight Resistance Training

When symptoms allow e.g. mild symptoms are not worsened by daily activities/light physical activities

STAGE 4: Rugby-Specific Non-Contact Training Drills & Weight Resistance Training

No earlier than Day 8

STAGE 5: Full Contact Practice

No earlier than Day 15

STAGE 6: Return to Play

No earlier than Day 21

RECOGNISE, REMOVE and

If in doubt, sit them

out!



HEADCASE

STOP!

Check for concussion



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RECOGNISING CONCUSSION

Priority is to **RECOGNISE & REMOVE** anyone with suspected concussion. Concussion should be suspected if one or more of the following visual clues and/or symptoms are present.

VISUAL CLUES & SIGNS (What you can see)

Any one of the following 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 / Uncoordinated
- Grabbing / Clutching of head
- Dazed, blank or vacant look
- Confused / Not aware of plays or events

SYMPTOMS OF CONCUSSION AT OR SHORTLY AFTER INJURY

(What the player might tell you / what you should ask about)

Presence of any one of the following can indicate a possible 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"

THE IMMEDIATE **DO** AND **DON'TS** FOLLOWING A SUSPECTED CONCUSSION

DO

- Be removed from play immediately.
- Get assessed by an appropriate Healthcare Professional onsite or access the NHS by calling 111 within 24 hours of the incident.
- Rest & sleep as needed for the first 24-48 hours – this is good for recovery. Easy activities of daily living and walking are also acceptable.
- Minimise smartphone, screen and computer use for at least the first 48 hours. Limiting screen-time has been shown to improve recovery.

DO NOT

- Be left alone in the first 24 hours.
- Consume alcohol in the first 24 hours and/or if symptoms persist.
- Drive a motor vehicle within the first 24 hours (Commercial drivers (HGV etc.) should seek review by an appropriate Healthcare Professional before driving).

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.

