

CONCUSSION INFORMATION PACK (August 2023)

Concussion Information

All players with a suspected concussion must be removed from the pitch immediately and should not return to any physical activity that day.

Concussion can be recognised by:

Mechanism of injury

Head to head contact, head on ground, head on other body part, whiplashing of neck.

Signs (visible to bystander)

Dazed or looking blank, seizure (fits), loss of consciousness (or possible loss), unsteady on feet or balance problems, slow to get up after contact.

Unusual posturing on the ground, unaware of events or confused, clutching head, more emotional or irritable.

Symptoms (felt by player and reported)

Headache, pressure in head, neck pain, nausea or vomiting, dizziness, balance problems, sensitivity to light, sensitivity to noise, feeling like in a fog, feeling slowed down, "don't feel right", difficulty concentrating, difficulty remembering, fatigue or low energy, confusion, drowsiness, sadness, nervous or anxious, difficulty falling asleep and other sleep issues.

Players should be removed if there is a concern from anyone that a concussive episode may have occurred. If a player shows any signs or symptoms of concussion, no matter if only brief, the episode should be considered as concussion and managed as such. Diagnosis should be confirmed, if possible, by consulting a health care professional on site or by contacting NHS24 on 111.

All concussions must be logged as an injury on SCRUMS.

Remember that symptoms can take up to 72 hours to develop.

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Concussion graduated return to learning/work environment and playing



Stage 1

Relative rest for 24 to 48 hours. Reduce screen time as much as possible. Listen to your body and rest as needed. Its ok to do light activities around the house and move around the house but any activity shouldn't make your symptoms worse. Get outside for fresh air.

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Stage 2

Move to this stage after 48 hours even if symptomatic. Gradually build up thinking activities, increase screen time, reading, TV etc. Consider adding in school and work activities at home. Light physical activity is allowed such as going for a longer walk and work around the house and garden.

Symptoms shouldn't increase more than mildly with activity. If they do, rest briefly and restart next time at a lower intensity.

IF IN DOUBT, SIT THEM OUT.

Stage 3

When you can tolerate your normal level of daily activities it is possible to increase activities related to work or learning – it may be possible to return part time or with modifications at this point to work or learning environment.

Physical activity can be built up slowly at this point starting with short spells of aerobic activity such as jogging, static bike, swimming. Start with 15-minute bursts of exercise at an intensity that you are still able to speak in short sentences and build up steadily. High intensity exercise isn't allowed at this stage, Body weight resistance training is ok but not with weights.

Symptoms shouldn't increase more than mildly with activity. If they do, rest briefly and restart next time at a lower intensity.

Stage 4

When you are **symptom free at rest** from your concussion and you have managed to build up activity to around 70% of max effort, you can commence **non-contact** training. It's ok if mild symptoms return with exercise but they should be mild and settle quickly after stopping exercise. Build activity up to high intensity exercise and add weights to resistance training.

You should be back at work or your learning environment although may still need some modifications (extra breaks or avoiding highly complex tasks).

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Stage 5



When you have been **symptom free at rest for a minimum of 14 days** you can start **contact** training again. This is a good opportunity to ensure your tackle technique has been reviewed and improved if appropriate. Any symptoms that develop with activity should be mild and brief. Any symptoms, no matter how brief following head contact should result in stopping training and seek advice (call 111 or speak to health care professional on site if available).

You should be fully returned to work or learning at this stage.



Stage 6

Return to competition – this must **not be before day 21 post-concussion** at the very earliest. There should also have been no symptoms at rest from recent concussion for at least 14 days and player must be completely symptom free with exertion too.

IF IN DOUBT, SIT THEM OUT.

Concussion Red Flag Signs or Symptoms

Players require urgent medical assessment (call 999) if any of the following red flag signs or symptoms are present.



IF IN DOUBT, SIT THEM OUT.

Advice for players (and parents or responsible adults)

- Players with a suspected concussion should not be on their own for at least the first 24 hours but should have a responsible adult around to keep an eye on them.
- Players with a concussion shouldn't drive or operate machinery for at least 24 hours and while symptomatic.
- Players with a concussion should avoid using alcohol or psychoactive drugs while symptomatic.
- Sleep is important for recovery, rest, and nap as you need in the first 48 hours but then try and keep to a good sleep routine.
- Most brains will recover from a concussion in 2 to 4 weeks but seek medical advice if:
 - o Red flag symptoms present
 - o Symptoms not improving after 14 days
 - o Symptoms still present after 28 days
- Remember to share the fact you have been concussed with your school, club, work and other sports so you can be supported.
- Brief information on how to manage the staged return to activity is below.



More information can be on the Scottish Rugby Player Welfare Hub https://bit.ly/rugbyplayerwelfare



Scottish Rugby recommends that everyone involved in our game completes this e-learning course https://bit.ly/concussion-learning

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