Cricket Leinster

Concussion Guidance for Non-Medical Persons

Introduction

The purpose of this document is to help non-medical people to recognise the early signs of concussion and respond in the immediate aftermath of recognising such an injury during a cricket match or practice session. It is not intended as detailed medical advice, but a short, easy to follow guide for players, coaches and umpires. If you suspect that you or someone in your care has sustained a concussion you should contact a medically qualified person.

What is Concussion?

Concussion is a temporary injury to the brain that cannot be seen on routine X-Ray or scan. Any blow to the head, face or neck, <u>or</u> a blow to the body that causes a sudden jarring of the head may cause a concussion. A player does not need to be knocked out (lose consciousness) to have a concussion.

Consequences of Concussion

In the vast majority of cases players will recover completely (if managed properly). However, it is extremely important to note that if concussion is not properly managed, especially in young players, serious and long term consequences may ensue.

Signs To Look For

When questioned, the Player:

- does not know the time, date, place, period of the game, opposing team or score in the game
- is suffering from general confusion
- cannot remember things that happened before and/or after the game
- is slow to answer questions or follow instructions
- seems easily distracted
- may have a blank stare

What a concussed player may complain of:

- headache
- dizziness
- dazed or stunned
- blurred vision, double vision or loss of vision
- ringing in the ears
- drowsiness
- nausea, vomiting or stomach ache
- slurred speech
- poor coordination
- poor balance
- agitation
- feeling generally unwell

What To Do: Recognise and Remove

It is <u>extremely important</u> that a player does <u>not</u> continue to play or train if he or she shows <u>any</u> of the signs of concussion.

He or she must be removed from the field of play immediately.

The player must be placed in the <u>care of a responsible adult</u> until examined by a medically qualified person.

They <u>must not</u> drive, operate machinery, engage in physical activity or drink alcohol until passed fit to do so.

Most cricket matches will <u>not</u> have a medically qualified person present and any player <u>suspected</u> of having concussion must be brought to a hospital emergency department <u>or</u> a G.P. clinic for assessment.

<u>Treatment</u>

The treatment for uncomplicated concussion is <u>REST</u>, from both physical <u>and</u> cognitive activity. This is especially important (and sometimes difficult) in an amateur sport where most players will want to return to work, college or school as soon as possible.

If all symptoms have disappeared a <u>graduated return to play</u> policy is initiated by a medically qualified person.

Graduated Return to Play (G.R.T.P.)

This is a period of gradual increase in the intensity of physical activity before returning to play or train normally.

Players <u>under 20 years of age</u> must not return to play for <u>23 days</u>. <u>Adults</u> must not return to play for <u>21 days</u>.

These periods include a minimum period of <u>14 days'</u> rest after the injury, followed by 7-9 days of graduated increase in physical activity. G.R.T.P. should always be managed by a medically qualified person.

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