



Vernon and District Minor Football Association – Concussion Policy

This document sets out the guiding principles and provides general advice regarding the management of concussion in football in Vernon and District Minor Football Association's activities.

These Guidelines are of a general nature only. Individual treatment will depend on the facts and circumstances specific to each individual case. These Guidelines are not intended as a standard of care and should not be interpreted as such.

DEFINITION

A Concussion is a brain injury and is defined as a complex pathophysiological process affecting the brain, induced by biomechanical forces. A concussion is a serious event, but you can recover fully from such an injury if the brain is given enough time to rest and recuperate. Returning to normal activities, including sport participation, is a step-wise process that requires patience, attention, and caution.

RECOVERY

The majority of concussions resolve in a short (7-10 day) period, although the recovery frame may be longer in children and adolescents.

SIGNS OF CONCUSSION

- a. Immediate visual indicators of concussion include:
- b. Loss of consciousness or responsiveness;
- c. Lying motionless on the ground/slow to get up;
- d. A dazed, blank or vacant expression;
- e. Appearing unsteady on feet, balance problems or falling over;
- f. Grabbing or clutching of the head
- g. Impact seizure or convulsion

Concussion can include one or more of the following symptoms:

- a. Symptoms: Headache, dizziness, "feeling in a fog".
- b. Behavioural changes: Inappropriate emotions, irritability, feeling nervous or anxious.
- c. Cognitive impairment: Slowed reaction times, confusion/disorientation- not aware of location or score, poor attention and concentration, loss of memory for events up to and/or after the concussion.

REMOVE FROM PLAY

Any athlete with a suspected concussion should be immediately removed from play, and should not be returned to activity until they are assessed by a qualified medical practitioner. Players with a suspected concussion should not be left alone.

Only qualified medical practitioners should diagnose whether a concussion has occurred, or provide advice as to whether the player can return to play. There should be no return to play on the day of a concussive injury.



MEDICAL ASSESSMENT

A qualified Medical Practitioner should:

- a. Diagnose whether a concussion has occurred – based on clinical judgement;
- b. Evaluate the injured player for concussion;
- c. Advise the player as to medical management;
- d. Advise the player as to when it is appropriate to begin a graduated **Return To Play** program.
- e. Clear the player to return to play following the graduated **RTP** program.

RETURN TO PLAY

Following clearance from a qualified Medical Practitioner for the player to return to play, the player should progress through a graduated **RTP** program. In all cases, the graduated **RTP** program provides for a minimum of 6 days before the player can play a competitive game. The RTP program is based on Football Canada's Safe Contact course. For more information go to:

<http://safecontact.footballcanada.com/>

****Medical Clearance by an appropriate physician is mandatory before return to play**

Step 1: No activity, only complete rest

Limit school, work and tasks requiring concentration. Refrain from physical activity until symptoms are gone. Once symptoms are gone, a physician, preferably one with experience managing concussions, should be consulted before beginning a step wise return to play process.

Step 2: Light aerobic exercise

Activities such as walking or stationary cycling. The player should be supervised by someone who can help monitor for symptoms and signs. No resistance training or weightlifting. The duration and intensity of the aerobic exercise can be gradually increased over time if no symptoms or signs return during the exercise or the next day.

Symptoms? - Return to rest until symptoms have resolved. If symptoms persist, consult a physician.

No Symptoms? - Proceed to Step 3 the next day.

Step 3: Sport specific activities

Activities such as skating or throwing can begin at step 3. There should be no body contact or other jarring motions such as high-speed stops or hitting a baseball with a bat.

Symptoms? - Return to rest until symptoms have resolved. If symptoms persist, consult a physician.

No Symptoms? - Proceed to Step 4 the next day.

Step 4: Begin drills without body contact.

Symptoms? - Return to rest until symptoms have resolved. If symptoms persist, consult a physician.

No Symptoms? - The time needed to progress from non-contact exercise will vary with the severity of the concussion and with the player. proceed to Step 5 only after medical clearance.



Step 5: Begin drills with body contact

Symptoms? - Return to rest until symptoms have resolved. If symptoms persist, consult a physician.

No Symptoms? - Proceed to Step 6 the next day.

Step 6: Game play

Never return to play if you still have symptoms!