

RECOGNISING CONCUSSION

Priority is to **RECOGNISE & REMOVE** anyone with suspected concussion.

Concussion should be suspected if one or more of the following visible clues, signs, symptoms or errors in memory questions are present.

1 VISUAL CLUES OF SUSPECTED CONCUSSION:

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

2 SIGNS AND SYMPTOMS OF SUSPECTED CONCUSSION:

Presence of any one or more of the following signs & symptoms may suggest a 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"

3 MEMORY FUNCTION:

Failure to answer any of these questions correctly may suggest a concussion:

"What venue are we at today?"

"Which half is it now?"

"Who scored last in this game?"

"What team did you play last week/game?"

"Did your team win the last game?"

Any player with a suspected concussion should be **IMMEDIATELY REMOVED FROM PLAY**, and should not be returned to activity until they are assessed medically. Athletes with a suspected concussion should not be left alone and should not drive a motor vehicle.

It is recommended that, in all cases of suspected concussion, the player is referred to a medical professional for diagnosis and guidance as well as return to play decisions, even if the symptoms resolve.

4 FIRST AID:

Remember, in all cases, the basic principles of first aid should be followed:

- Safe approach
- Do not attempt to move the player (other than required for airway support) unless trained to do so as they may have a neck injury
- Check Airway, Breathing, Circulation, Disability, Environment
- Do not remove headgear (if present) unless trained to do so.



RED FLAGS – FOR POTENTIALLY MORE SERIOUS HEAD INJURY

If **ANY** of the following are reported or develop while under observation, then the player should be safely and immediately removed for assessment by a medical professional. If no qualified medical professional is available, consider calling an ambulance for urgent medical assessment:

- Deteriorating conscious state
- Increasing confusion or irritability
- Severe or increasing headache
- Repeated vomiting
- Unusual behaviour change
- Seizure or convulsion
- Double vision or deafness
- Weakness or tingling/burning in arms or legs



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RFU

DON'T BE A

HEAD

HEADACHE EMOTIONAL APPEARANCE DROWSINESS

CASE

CONFUSION AGITATED SEIZURE EARS AND EYES
STOP! CHECK FOR CONCUSSION