

Concussion

IRB Regulation 10 provides as follows:

10.1.1 A Player who has suffered concussion shall not participate in any Match or training session for a minimum period of three weeks from the time of injury, and may then only do so when symptom free and declared fit after proper medical examination. Such declaration must be recorded in a written report prepared by the person who carried out the medical examination of the player.

10.1.2 Subject to sub-clause 10.1.3 below, the three week period may be reduced only if the player is symptom free and declared fit to play after appropriate assessment by a properly qualified and recognised neurological specialist.

Such declaration must be recorded in a written report prepared by the properly qualified and recognised neurological specialist who carried out the assessment of the Player.

10.1.3 In age grade Rugby, the three week minimum period shall be mandatory.

Without limiting the effects of the application of IRB Regulation 10 the following guidance may be of assistance in recognising concussion. It must be acknowledged however, that each incident must be assessed on its individual merits and characteristics and, as appropriate, medical advice sought.

Testing a player for the symptoms of concussion

The Sport Concussion Assessment Tool 2 (SCAT2)*, the text of which in abbreviated form (Pocket SCAT2) is set out below, is approved by the Fédération Internationale de Football Association (FIFA), its independent research body F-MARC (FIFA-Medical Assessment and Research Centre), the International Ice Hockey Federation (IIHF), the International Olympic Committee (IOC) and the International Rugby Board itself.

Pocket SCAT2



Concussion should be suspected in the presence of **any one or more** of the following: symptoms (such as headache), or physical signs (such as unsteadiness), or impaired brain function (e.g. confusion) or abnormal behaviour.

1. Symptoms

Presence of any of the following signs & symptoms may suggest a concussion.

- Loss of consciousness
- Seizure or convulsion
- Amnesia
- Headache
- "Pressure in head"
- Neck Pain
- Nausea or vomiting
- Dizziness
- Blurred vision
- Balance problems
- Sensitivity to light
- Sensitivity to noise
- Feeling slowed down
- Feeling like "in a fog"
- "Don't feel right"
- Difficulty concentrating
- Difficulty remembering
- Fatigue or low energy
- Confusion
- Drowsiness
- More emotional
- Irritability
- Sadness
- Nervous or anxious

2. Memory function

Failure to answer all questions correctly may suggest a concussion.

- "At 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?"

3. Balance testing

Instructions for tandem stance

*"Now stand heel-to-toe with your **non-dominant** foot in back. Your weight should be evenly distributed across both feet. You should try to maintain stability for 20 seconds with your hands on your hips and your eyes closed. I will be counting the number of times you move out of this position. If you stumble out of this position, open your eyes and return to the start position and continue balancing. I will start timing when you are set and have closed your eyes."*

Observe the athlete for 20 seconds. If they make more than 5 errors (such as lift their hands off their hips; open their eyes; lift their forefoot or heel; step, stumble, or fall; or remain out of the start position for more than 5 seconds) then this may suggest a concussion.

Any athlete with a suspected concussion should be IMMEDIATELY REMOVED FROM PLAY, urgently assessed medically, should not be left alone and should not drive a motor vehicle.

* Developed by a group of international experts at the 3rd International Consensus meeting on Concussion in Sport held in Zurich, Switzerland in November 2008. The full details of the conference outcomes and the authors of the tool are published in British Journal of Sports Medicine, 2009, volume 43, supplement 1.