

# CONCUSSION MANAGEMENT IN AUSTRALIAN FOOTBALL



## 1. RECOGNISE AND REMOVE:

If a player displays concussion signs and/or reports symptoms after experiencing head trauma, the player should immediately be removed from the match or training session for assessment. The assessment should use the AFL-approved concussion management app HeadCheck, the Concussion Recognition Tool (CRT5) or an equivalent assessment tool.

## COMMON SYMPTOMS

include headache, dizziness or balance problems, feeling dinged or dazed, feeling like in a "fog" or slowed down, having trouble concentrating or remembering, or not feeling "quite right".

## COMMON SIGNS

include loss of responsiveness, lying motionless on the ground, unsteady on feet, dazed or blank look, confused or difficulty remembering, or the player is not their normal self.



## 2. REFER:

If there are any "red flags" e.g. confusion or incoherence, neck pain, double-vision, weakness or tingling/burning in the arms or legs, loss of consciousness, worsening headache or vomiting, an ambulance should be called and the player referred to hospital immediately.

Otherwise, the player should be referred to a medical doctor for assessment (at venue, local GP or hospital emergency department).



## 3. REVIEW:

The player (or parent) should provide the HeadCheck assessment to the medical doctor and as much information as possible to help the doctor to assess the player.

The doctor will review the player to confirm the diagnosis and decide on the best plan for management in the days after injury (including time off from driving, work, or school).



## 4. RETURN:

The player and Club should follow the advice provided by the medical doctor supported by the AFL Concussion return to play guidelines. The three phases of return are brief rest, recovery and a graded loading program. Players should not enter the loading program until they have fully recovered from their concussion. The minimum time to return to play is 12 days, but most cases will require longer with recovery varying by person and injury.

A conservative approach is particularly important in: children and adolescents, players with history of concussion, where there is a recurrence of symptoms or where there is any uncertainty about recovery.

Any concussed player must not be allowed to return to competitive contact sport (including full contact training sessions) before having a medical clearance.

For more details refer to "The Management of Sport-Related Concussion in Australian Football".

HeadCheck was developed in collaboration with the Murdoch Children's Research Institute and a panel of sport-related concussion experts led by Professor Vicki Anderson.

**DOWNLOAD THE AFL-APPROVED  
HEADCHECK APP TODAY**

