COMMUNITY FOOTBALL HEAD INJURY ASSESSMENT



Yes

No

A. GENERAL INFORMATION

Player Name:		Club:	:	
Examiner Name		Date		
Quarter:	Approximate Tim	ne in Quarter	r:	

B. STRUCTURAL HEAD OR NECK INJURY

1. Are there clinical features of a serious or structural head and/or neck injury requiring urgent and emergency hospital transfer?1

C. REMOVAL FROM PLAY

The player must be removed from play with any of the following clinical features² observed directly, reported by others or from video review (if available): YES NO

	Observed	Reported	Video	
	Directly		Review	
Loss of consciousness or prolonged immobility (> 2 seconds)				
3. No protective action in fall to ground (not bracing for impact)				
4. Impact seizure (stiffening arms or legs on impact)				
5. Balance disturbance (loss of control over movements)				
6. Dazed, blank/vacant stare or not their normal selves				
7. Unusual behaviour change for the player				
8. Confusion or disorientation				
9. Memory impairment (e.g. fails Maddocks questions ¹)				
10. Player reports concussion symptoms ¹				

¹ Refer to the AFL Concussion Management Guidelines available on the AFL Community website: <u>http://www.aflcommunityclub.com.au/</u>. ² Example videos of each clinical feature are available on the AFL Community website.

D. OUTCOME AND ACTION

⁵ A player who is removed from play for concussion or possible concussion must not return to play until cleared by a doctor. ⁴ A player cleared to play requires regular checks at least every 30 minutes and removal from play with any deterioration.

E. SIGNATURE OF EXAMINER

Signed:	Date:		Time complete	d:
F. MEDICA	L CLEARANCE – <u>TO BE COMPLE</u>	ETED BY A MEDICA	L PRACTITIONE	R
I have examined: train and play.		following the abo	ove head injury ar	nd declared him/her medically fit ⁵ to
Practitioner Name:		Medical Pra	ctice Stamp:	
Signed:				
Date:			L	

⁵ Please refer to the medical check list over the page when assessing the player and determining his medical fitness to train and play.

NOTES FOR THE EXAMINING MEDICAL PRACTITIONER

Please refer to the AFL Concussion Management Guidelines available via the following website: http://www.aflcommunityclub.com.au/

A concussed footballer requires a medical clearance to return to training or competition.

In accordance with the current Concussion Guidelines, there is no mandatory period of time that an Australian Football player must be withheld from play following a concussion. The duration of exclusion from play is based on an individual's recovery as managed by a medical practitioner. It would not be unreasonable to clear the player to return to structured training with a second consultation to clear the player for full training/match play.

The minimum standard is that a player must be symptom free at rest and with exertion, determined to have returned to baseline level of cognitive performance, and is confident and comfortable to return to play.

Screening computerised cognitive tests provide a practical method for the assessment of cognitive recovery. A number of screening computerised cognitive test batteries have been validated for use following concussion in sport and are readily available (e.g. CogState Sport, ImPACT). Conventional imaging (e.g. CT or MRI) should be considered in cases where there is concern regarding an underlying structural injury.

The following is a guide to the medical examination of a concussed player:

- Are there any neurological symptoms on questioning or signs on examination?
- Is the player experiencing ongoing symptoms suggestive of concussion?
- Does the player experience concussion type symptoms when undertaking physical activity?
- Has the player not returned to their usual work or education?

If the answer to any of the above questions is 'Yes', the player requires further observation or a referral for specialist assessment.

If the player clears the above tests, ensure as per the AFL Community Concussion Guidelines the player complies with a graduated return to train and play protocol, with instructions for further medical assessment if the symptoms return.

Difficult or complicated cases (e.g. prolonged recovery or recurrent concussion) should be referred to a clinician or neurologist with expertise in concussion.