5. Terms

i. Medical Practitioner

An individual who is registered under National Law to practise a health profession, other than as a student.

ii. Contact Training

Contact training in sport refers to the specific phase of training or athletic preparation where athletes engage in practice sessions / activities that involve physical contact with teammates or opponents and simulation of game-like scenarios. This type of training is common in team sports where contact is a fundamental aspect of gameplay.

Sports include, but are not limited to:

- Basketball
- Australian Rules Football
- Cricket
- Hockey
- Netball
- Touch Football
- Soccer
- Softball
- Rugby

iii. Contact Sport

Any athletic activity or game where physical contact between players is an integral part of the game's strategy or execution and where physical interaction between players is a fundamental aspect of gameplay. It often involves tackling, blocking, or other forms of bodily contact. Contact

7. Training for Staff

To ensure the School meets its duty of care as set out in the Concussion Policy appropriate training will be provided to relevant staff. In particular sports coaches will be required to complete an annual e-learning module and Induction.

This includes information regarding:

what is concussion; causes of concussion; common signs and symptoms; steps to reduce the risk of concussion; procedures if a student has suspected concussion or head injury; and return to school and sport medical clearance requirements.

8. Policy Implementation

Concussion

Concussion is a complex process caused by trauma that transmits force to the brain either directly or indirectly and results in temporary disturbance or impairment of brain function. It can happen from an impact that is not directly to the head, and concussion does not always cause loss of consciousness.

Most commonly, it causes temporary impairment, and the symptoms may develop over the hours or days following the injury. This means that it may be difficult to determine, by either staff, parents or medical practitioners, immediately after the injury whether a person is concussed and should be assessed by a doctor if there is a suspected concussion. Cognitive functions in children and adolescents typically take up to 4 weeks to recover. Concussion occurs most often in sports which involve body contact, collision or high speed.

Information

Designation

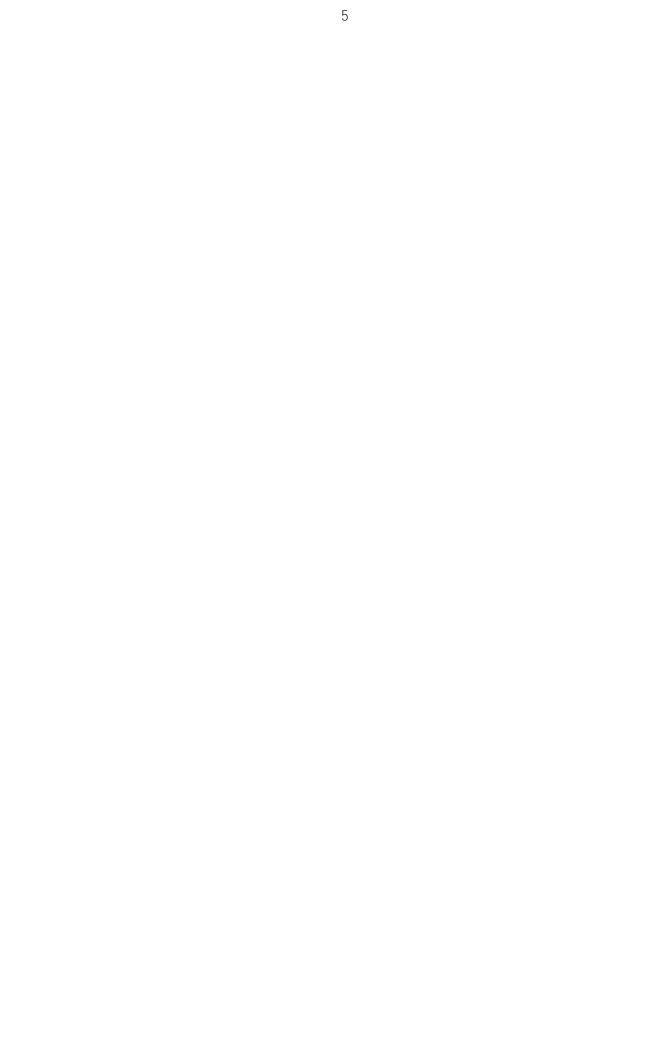
Concussion in Children and Adolescents

The management of SRC in children (aged 5 to 12 years) and adolescents (aged 13 to 18 years) requires unique considerations suitable for the developing child. Children have physical and developmental differences, including less developed neck muscles, increased head to neck ratio, and brain cells and pathways that are still developing. Children and adolescents may have greater susceptibility to concussion. They may also take longer to recover and they may be at risk of severe consequences such as second impact syndrome. Managing concussion in children and adolescents therefore requires different standards and a more conservative approach.

Guidelines: Match Day Procedures

In the early stages of injury, it is often not clear whether you are dealing with a concussion or there is a more severe underlying structural head injury. For this reason, the most important steps in initial management and beyond include:

- 1. Recognise recognising a suspected concussion.
- 2. Remove –



Step 4: Memory

Where players are older than 12 years, they may be asked a number of questions to recognise suspected concussion. If a player fails to answer any of the following questions (modified as required) correctly, this may suggest a concussion:

What venue/location are we at today? What day is it? What month are we in? What year is it?



encouraged to become gradually and progressively more active as long as they do not experience any symptoms.

It is important that athletes do not ignore their symptoms and in general a more conservative approach be used in cases where there is any uncertainty.

References

7 # \ https://www.concussioninsport.gov.au/ data/assets/pdf_file/0003/1133994/37382_Concussion-Guidelines-for-community-and-youth-FA-acc.pdf

Return to sport Diagram

<u>https://www.concussioninsport.gov.au/__data/assets/pdf_file/0003/1133994/37382_Concussion-</u> <u>Guidelines-for-community-and-youth-FA-acc.pdf</u> Your child may have received a possible concussion/head injury, and they will require a medical assessment and diagnosis. They must follow the Schools and AGSV's Concussion Management Policy.

The following steps are to be followed and will guide you through the process:

STEP 1 – You (the parent / carer) have hopefully received a copy of the Medical Diagnosis Form –

Medical Diagnosis Form - Concussion referral

SECTION 1 - INITIAL CONSULTATION / DETAILS OF INJURED PERSON (VISIT 1)	
Name of Student:	Date of Birth:
School:	Sport:
MEDICAL PRACTITIONER WOULD IDEALLY SEE THE INJURED PERSON WITHIN 72 HOURS OF THE INCIDENT	

Dear Medical Practitioner,

This person has presented to you today because they were injured on _____ (day & date of injury) in a (game or training session) {circle}, and suffered a potential head injury or concussion.

Section 1A	School staff /Team official/ First aider, to complete at the time / on the day of the
injury, before presenting to medical practitioner reviewing the student	
	1.

Medical Clearance Form

SECTION 2 PROTOCOLS FOR RETURN TO SPORT & CLEARANCE APPROVAL (VISIT 2)

have

reviewed (students name) ______ and based upon the evidence presented to me, by them and their family / support person, their history, and a medical examination, I can confirm:

I have reviewed SECTION 1 of this form, specifically the mechanism of injury and subsequent signs and symptoms,

The student / parents/carers confirm they have followed the **Mentone Grammar's Concussion Management Policy**,

The student / parent/carer have confirmed they have returned to normal school / study normally and have no symptoms related to this activity,

At the time of this visit, the student / parent/carer confirm they have been symptom-free for at least 14 days from the date of the original incident,

The student / parent/carer acknowledges they must **not** return to competitive contact sport for a minimum of 21 days, symptom-free, from the time of concussion occurred.

Based on my clinical assessment, I therefore approve that this person may return to full contact training and if they successfully complete contact training without recurrence of symptoms, the

Appendix B Parent Letter – Mild Concussion/Head injury

Dear Parent/Carer,

Your child received a possible head injury / concussion whilst at school today.

Head injuries are classified as mild, moderate, or severe. Many head injuries are mild, and simply result in a small lump or bruise. But if your child has received a moderate or severe injury to the head, they need to see a doctor for review.

Children who have had a head injury may develop symptoms at various times therefore please