

HOW TO RECOGNIZE A CONCUSSION

If a player displays ANY of the following signs or symptoms post a head knock, he/she should be **immediately** removed for an off-field assessment which includes a SCAT5 or an equivalent assessment tool.

- Suspected / confirmed loss of consciousness
- Appears dazed
- Unable to stand or is staggering
- Headaches
- Dizziness
- Not their normal selves
- Confused/disoriented
- Memory impairment
- Seizure or convulsions

WHAT SHOULD AN ON-FIELD ASSESSMENT INCLUDE?

Check for:

- dizziness, headache
- · dazed appearance or a blank stare
- signs of concussions on video (if available)
- player balance

Talk to the player, to check if the player is able to:

- · respond appropriately
- resume after 3-4 minutes after the head knock.
- answer the modified Maddocks questions accurately.

If the doctor or physio notes any of the above, then the player should be taken off the field immediately for a SCAT5 assessment.

MODIFIED MADDOCKS QUESTIONS FOR CRICKET TRAINING OR MATCHES

For instance:

- · What venue are we at today?
- Which session of the game are we in?
- Which team is bowling/batting at the moment in this game?
- What team did you play in your last match?
- Who won your team's last match?
- Is it morning, afternoon or evening?
- What were you just doing bowling, batting, fielding (other if relevant)?

The assessing medical practitioner will need to know the answers to these questions for each player.

EMERGENCY CARE

Following a head knock, should a player develop signs of a more serious brain injury, the player must be urgently transferred to a hospital with a neurosurgical unit.

Signs of a possible serious structural brain injury include:

- · deteriorating conscious state
- · subsequent convulsion or seizure
- double vision
- · headache or vomiting
- focal neurological signs or symptoms in the limbs
- neck pain or tenderness
- increasing agitation, irritability or combativeness

CONCUSSION MANAGEMENT

If following an off-field assessment concussion is not diagnosed, the player:

- may return to the match/training
- should be observed and checked regularly for developing symptoms or signs of concussion.

If the diagnosis of concussion is made, the player should:

- be immediately and permanently removed from further participation;
- never be permitted to return on the day of the injury; and
- have formal medical clearance to return to training and play.

CLEAR & IMMEDIATE DIAGNOSIS OF CONCUSSION

Signs and symptoms visible



Stop play/training



Signs of structural head injury – URGENT hospital transfer



Concussion diagnosed



Remove from play/training

SUSPECTED CONCUSSION

Complains of symptoms consistent with concussion



Off-field assessment



SCAT5 & video review if available



Concussion diagnosed



Remove from play/training



Concussion excluded



Resume play/training

CONCUSSION NOT SUSPECTED

No signs or symptoms



Continue play/training



Checked every 4 or 5 hours for developing symptoms



Concussion excluded



Resume play/training

RESOURCES AVAILABLE ON THE ICC WEBSITE

- ICC Guidelines for Concussion Management
- ICC Concussion Awareness Poster
- ICC Concussion Awareness Video
- Pocket Concussion Recognition Tool (CRT)
- Sport Concussion Assessment Tool
 SCAT 5
- Child SCAT 5

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