



CONCUSSION MANAGEMENT POLICY

Table Tennis NSW

Concussion refers to a disturbance in brain function that results from trauma to the brain. Usually the changes are temporary and the majority of players recover completely if managed correctly.

Table Tennis NSW will encourage all members to adopt the following practices to prevent, recognise and manage concussion.

- This policy will be distributed to all current and new members.
- All club members, staff and officials will be given the opportunity to attend approved training and accreditation courses in concussion management.
- Appropriate first aid equipment will be made available at all training and competition sessions.
- Appropriate first aid trained personnel will be in attendance at all training and competition sessions.
- A Pocket Concussion Recognition Tool will be included in all first aid kits.
- A pre-game checklist will be provided to all coaching and support staff involved in the match day care of players (and kept with the Pocket Concussion Recognition Tool). This checklist should include contact details for the local general practices, local hospital emergency departments and ambulance services.
- The club will utilise all available Concussion Management Resources including the Concussion Poster and the Guidelines for Players/Parents.
- All players will complete a pre-season medical history form and injury records will be maintained throughout the season.
- All players assessed to have a concussion registered medical doctor must present a return to play clearance form to your nominated club official.
- This Concussion Policy will be reviewed and updated as required every 12 months.

CONCUSSION MANAGEMENT POLICY CONTINUED

Game Day Management

The most important steps in the initial management of concussion include:

1. **Recognising the injury**
2. **Removing the player from the game**
3. **Referring the player to a medical doctor for assessment.**

1. Recognising the injury

Any one or more of the following can indicate a possible concussion:

- Loss of consciousness
- Dazed, blank or vacant look
- Headache, blurred vision, dizziness
- Confused/not aware of plays or events
- Balance problems (unsteadiness)
- Lying motionless on ground/slow to get up
- Grabbing or clutching head

Tool such as the Pocket Concussion Recognition Tool can be used to help recognise concussion.

It is important to note however that brief sideline evaluation tools are designed to recognise a concussion but they cannot replace a comprehensive medical assessment.

2. Removing the player from the game

Initial management must adhere to the first aid rules, including airway, breathing, circulation and spinal immobilisation.

Any player with a suspected concussion must be removed from the game. (see section below for management of the unconscious player).

Removing the player from the game allows the opportunity to properly evaluate the player.

Any player who has suffered a concussion must not be allowed to return to play in the same game.

It is important not to be influenced by the player, coaching staff, trainers, parents or any others suggesting that they return to play. **If there is any doubt, sit them out!**

With unconscious players, the player must only be moved (onto the stretcher) by qualified health professionals, trained in spinal immobilisation techniques. If no qualified health professional is on site, then do not move the player – call and await arrival of the ambulance.

3. Refer the player

All players with concussion or a suspected concussion need a medical assessment by a registered medical doctor.

If a doctor is not present at your event then the player should be sent to a local general practice or local hospital emergency department.

Urgent transfer to hospital is required if the player displays any of the following symptoms:

- Loss of consciousness or seizures
- Confusion
- Deterioration following their injury (eg vomiting, increased headaches or drowsiness)
- Neck pain or spinal cord symptoms (eg numbness, tingling or weakness)

If there is any doubt on the player's condition they should be referred to hospital.

Follow Up Management

4. Rest

Rest is very important after a concussion because it helps the brain to heal. Concussions affect people differently. While most athletes with a concussion recover quickly and fully, some will have symptoms that last for days or even weeks. A more serious concussion can last for months or longer. 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.

5. Return

A concussed athlete must not be allowed to return to school or play before having a medical clearance. In every case, the decision regarding the timing of return to school or play should be made by a medical doctor with experience in managing concussion.

Players should not return to play until they have returned to school.

Players should be returned to sport in a graduated manner that should be supervised by their medical practitioner.

For example:

- Rest until all symptoms resolve
- Light aerobic activity 24 hours after symptoms resolve
- Light non contact training (eg ball work)
- Non contact training drills
- Full contact training
- Return to play

It is important to note there should be approximately 24 hours between stages.

If a player becomes symptomatic at any stage they should drop back to the previous symptom free level and try to progress again after 24 hours.

If a player continues to be symptomatic for more than 10 days they should be reviewed again by a medical practitioner.