

Hockey New South Wales

Head Injury Guidelines

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Part 1: Guidelines Statement

Head Injuries

- Any significant head injury that is sustained by a player must be treated as serious until proven otherwise by a doctor
- Great care is needed in the initial assessment and management, especially if any degree of concussion or a decreased level of consciousness is evident.
- All unconscious players must be managed by the attending Sports Trainer or Team Officials, and an Ambulance called immediately.
- The possibility of spinal injury must also be considered with any head injury.
- The player should be referred to a doctor for medical evaluation. The Doctor should have a history or know the players previous health status regarding head injury.
- Under no circumstance should the player be allowed to neither continue playing nor return to play during the same game. This will eliminate any potential second hit syndrome (and potential liability).
- A certificate should also be obtained from the doctor before the player resumes training or playing.
- The player should at no time be left alone and under no circumstance be allowed to drive a motor vehicle.

Two types of head injury

Head injuries are classified as:

- **Open:** with bleeding wounds to the face or head
- **Closed:** no visible signs of injury to the face or head.

Symptoms of a head injury

Remember that blood is not a reliable indicator of the seriousness of the head injury. Apart from wounds, other symptoms of a serious head injury can include:

- **Altered consciousness** – for example, the person may lose consciousness for short or longer periods or may be conscious again but confused or drowsy. They may also change by improving for a while and deteriorating again later.
- **Skull deformities** – compressions or deformities are signs of fractures.
- **Clear fluid from the ears or nose** – a skull fracture, especially a fracture to the base of the skull, can allow cerebrospinal fluid to leak from the ears or nose.
- **Black eyes and bruised skin behind the ears** – this indicates that the force of the blow was sufficient to rupture blood vessels around the eyes and ears.
- **Vision changes** – the pupils of the eyes may be dilated (enlarged) too different sizes in a person with a serious head injury. The person may complain of double or blurred vision.
- **Nausea and vomiting** – these are common side effects of serious head injury.

Head Injury Notification

- If a player sustains an injury to the head and does not display the signs and symptoms of concussion immediately, it is advisable to provide the player's parents, relatives or another person who will be with the player for at least 24 hours of the following:

Name, Age, What venue the player sustained the injury, the date and the time.

Important Warning

The injured player must be taken to a hospital or doctor immediately if they

- Are nauseous (feels sick)
- Vomits
- Develops a headache that could increase in severity
- Becomes restless/irritable or irrational
- Becomes dizzy, drowsy or cannot be roused
- Develops visual disturbance (e.g. double or blurred vision)
- Has a fit
- Becomes confused or disoriented
- Anything else unusual occurs

If any of the above occur, it is advisable to call an Ambulance.

For 24 hours the player should

- Rest quietly
- Not consume alcohol
- Not consume stimulants e.g. tea, coffee, cola drinks
- Not consumer pain killers e.g. Aspirin etc.
- Not drive a vehicle
- Not be left alone

The player should not resume training without a medical clearance by a doctor.

First Aid for Head Injury

In cases where there is a serious head injury, always call an ambulance.

If the injured person is **conscious**, encourage them to minimise any movement of their head or neck. Control any significant blood loss from any head wounds with direct pressure and a dressing. Scalp injuries can bleed profusely. Avoid disturbing blood clots forming in the hair to examine the wound. Reassure the person and try to keep them calm.

If **unconscious**, the person should not be moved unless they are in immediate danger. Any unnecessary movement may cause greater complications to the head injury itself, the spine or other associated injuries. Your role is to protect the injured person from any potential dangers at the scene. You should also monitor their airway and breathing until the arrival of an ambulance.

If the person's breathing becomes impaired due to a problem with their airway, you may need to very carefully tilt their head back (and support it) until normal breathing returns.

If the person stops breathing or has no pulse, cardiopulmonary resuscitation (CPR) may be required.

Concussion - Important information

What is a concussion?

A concussion is an injury to the brain. A blow to the head usually causes it, most of the time it doesn't involve a loss of consciousness.

What are the signs of concussion?

The presence of the following signs and symptoms can suggest the possible chance of concussion

- Headache
- Dizziness
- Confusion and drowsiness
- Ringing ears
- Nausea or vomiting
- Vision disturbance
- Loss of balance
- Memory loss (amnesia)
- Difficulty concentrating and remembering
- Loss of consciousness
- Seizure or Convulsion
- Headache
- Pressure in head
- Neck pain
- Sensitivity to light and noise
- Fatigue or low energy
- Nervous or anxious

What should I watch out for?

- Stiff neck
- Severe headache
- Repeated vomiting
- Confusion that gets worse
- Difficulty walking, speaking or using your arms
- Convulsions
- Unusual sleepiness

Memory Function

Failure to answer these questions correctly may suggest a concussion

- What venue are you playing at today?
- Which half is it now?
- Who has scored last in this game?
- Who is in the lead at this moment in time?
- What team did you play last game?
- Did your team win the last game you played?

Balance testing

Instructions for the tandem stance can help determine and suggest a concussion

- Instructions are as follows:
 1. Get the player to stand heel-to-toe with their non-dominant foot at the back. Their weight should be evenly distributed across both feet
 2. The player must try to maintain stability for 20 seconds with their hands placed on their hips and their eyes closed.
 3. The number of times that the player moves out of this position will be monitored and counted.
 4. If the player stumbles out of this position, opens their eyes, returns to the start position and continues to balance. Timing will continue when the player is set and have closed their eyes again.
 5. You must observe the athlete for 20 seconds. If they make more than 5 errors (E.g. Lift their hands off their hips, open their eyes, lift their forefoot or heel, step, stumble, or fall, or remain out of the start position for more than 5 seconds) then this may suggest a concussion.

When can I return to sports?

You should never return to play while you have any signs of concussion, like headache or dizziness. If your concussion was very mild, you may be allowed to return to play after 15 or 20 minutes, only on advice of a doctor. If you had memory loss or loss of consciousness, you may not be able to return to play for one to two weeks. After a severe concussion, you may not be able to return to play for a month. If this wasn't your first concussion, your return to play may take even longer. The doctor is the only person who will determine when you are allowed to return to training or playing.

What are the risks of returning to play?

A player returning too early could suffer from "second impact syndrome", which may be fatal. This problem is caused by a loss of the automatic control of blood vessels to the brain. Never return to a sports activity until you are cleared by a doctor.

Are there any lasting effects to a concussion?

Most people get better after a concussion without any permanent damage. People have signs of concussion for weeks to months. Repeated concussions could cause permanent damage. After several concussions or less, your doctor may talk with you about changing sports.

Please note:

- With any form of concussion, whether the player has lost consciousness or not, the possibility of spinal injury must be taken into account and assessed thoroughly.
- The misconception that headgear will prevent concussion occurring is false.
- Any form of concussion is serious and must be managed with great care.