"What team did you play last week/game?"

"Did your team win the last game?"

"Which half is it now?" "Who scored last

in this game?

"What venue are we at today?"

Failure to answer any of these questions (modified appropriately for each

suggest a concussion:

sport) correctly may

STEP 4: MEMORY ASSESSMENT

(IN ATHLETES OLDER THAN 12 YEARS)

Athletes with suspected concussion should: Not be left alone initially (at least for the first 1-2 hours).

# **CONCUSSION RECOGNITION TOOL 5®**

To help identify concussion in children, adolescents and adults







### II Y

Feeling slowed

Nervous or

anxious

Sadness

Sensitivity

Sensitivity to light

"Pressure in head" Balance problems

Blurred vision

STEP 3: SYMPTOMS

Feeling like

**Neck Pain** 

"Don't feel right"

low energy Fatigue or to noise

Drowsiness

Dizziness

Nausea or

vomiting

'in a fog"

remembering

Difficulty

concentrating

Difficulty

More emotional More Irritable

**RECOGNISE & REMOVE** 

Head impacts can be associated with serious and potentially fatal brain injuries. The Concussion Recognition Tool 5 (CRTS) is to be used for the identification of suspected concussion. It is not designed to diagnose concussion.

STEP 1: RED FLAGS — CALL AN AMBULANCE removed from play/game/activity. If no licensed h call an ambulance for urgent medical assessment:

Loss of consciousness Seizure or convulsion Severe or increasing headache Neck pain or tenderness • Weakness or tingling/ burning in arms or legs Do not attempt to move the player (other than required for airway support) unless trained to so do. Do not remove a helmet or any other equipment unless trained to do so safely. In all cases, the basic principles of first aid (danger, response, airway, breathing, circulation) should be followed. Assessment for a spinal cord injury is critical.

Remember:

If there are no Red Flags, identification of possible concussion should proceed to the following steps:

The CRT5 may be freely copied in its current form for distribution to individuals, iteams, groups and organisations. Any revision and any reproduction in a digital form requires approval by the Concussion in Sport Group. It should not be altered in any way, rebranded or sold for

commercial gain.

Not drive a motor vehicle until cleared to do so by a healthcare professional Not be sent home by themselves. They need to be with a responsible adult.

Not use recreational/ prescription drugs.

Not drink alcohol

### STEP 2: OBSERVABLE SIGNS

## Visual clues that suggest possible concussion include:

•	Lying motionless on		Disorientation or
	the playing surface		confusion, or an inabili
	,		to respond appropriate
•	Slow to get up after		to questions
	a direct or indirect		
	hit to the head	•	Blank or vacant look

ncussion in Sport Group 2017

Balance, gait difficulties, motor incoordination, laboured movements Facial injury after stumbling, slow head trauma ≥≥

ANY ATHLETE WITH A SUSPECTED CONCUSSION SHOULD BE IMMEDIATELY REMOVED FROM PRACTICE OR PLAY AND SHOULD NOT RETURN TO ACTIVITY UNTIL ASSESSED MEDICALLY, EVEN IF THE SYMPTOMS RESOLVE

on in Sport Group 2017

© Concussion in Sport Group 2017