

Ontario Blind Sports Association Concussion Policy

DEFINITIONS

1. The following terms have these meanings in this Policy:
 - a) “Association” – Ontario Blind Sports Association
 - b) “Concussion” – A concussion is a brain injury that can’t be seen on x-rays, CT or MRI scans. It affects the way an athlete thinks and can cause a variety of symptoms
 - c) “Medical Assessment” – *The evaluation of an individual by a licensed healthcare professional to determine the presence or absence of a medical condition or disorder, such as a concussion*
 - d) “Most Responsible Person (MRP)” – *An identified individual who is trained on the signs and symptoms of concussion and necessary assessment tools*

PURPOSE

2. The purpose of this policy is to help manage concussed and possibly-concussed athletes. The policy covers all of Ontario Blind Sports Association members in all of the Association’s events, competitions, and practices. This policy will be reviewed and amended if necessary every 4 years.

PROCEDURE

3. During all Association events, competitions, and practices, participants (which include coaches, athletes, officials, volunteers and other members) will use their best efforts to:
 - a) Be aware of incidents that may cause a concussion
 - b) Understand red flag, observable and general concussion symptoms that may result from a concussion according to the following:

| Figure 1: RED FLAGS SYMPTOMS (Call 911 immediately to go to nearest emergency department) ¹ | |
|--|--|
| Neck Pain or tenderness | Deteriorating conscious state |
| Double vision | Vomiting |
| Weakness or tingling/burning in arms or legs | Increasingly restless, agitated or combative |
| Severe or increasing headache | Loss of consciousness |
| Seizure or convulsion | |

| Figure 2: OBSERVABLE SIGNS – Visual clues that suggest possible concussion(immediate referral to medical doctor or nurse practitioner*) ² | | |
|--|--|--|
| Lying motionless on the playing surface | Disorientation or confusion, or an inability to respond appropriately to questions | Balance, gait difficulties, motor incoordination, stumbling, slow laboured movements |
| Slow to get up after a direct or indirect hit to the head | Blank or vacant look | Facial injury after head trauma |

| Figure 3: GENERAL CONCUSSION SYMPTOMS (immediate referral to medical doctor or nurse practitioner*) ³ | | |
|--|-----------------------|--------------------------|
| Headache | Blurred vision | Neck Pain |
| “Pressure in head” | Sensitivity to light | Difficulty concentrating |
| Balance problems | Sensitivity to noise | Difficulty remembering |
| Nausea or vomiting | Fatigue or low energy | Feeling slowed down |
| Drowsiness | “Don’t feel right” | Feeling like “in a fog” |
| Dizziness | More emotional | |
| | Nervous/anxious | |

^{1,2,3}Concussion in Sport Group 2017, Concussion Recognition Tool
5 retrieved from <http://bjsm.bmj.com/content/51/11/872>

- c) Identify athletes or other individuals who have been involved in any of the above incidents and/or exhibit any of the above symptoms

3.1 Athletes or other individuals who have been involved in an incident that may cause a concussion and who may exhibit symptoms of a concussion shall be identified and removed from the activity immediately for medical assessment by a medical doctor or nurse practitioner.

3.2 Following the athlete being removed from the activity, the athlete’s coach or other Most Responsible Person in charge of the athlete (if the athlete is a minor) or someone familiar to the athlete should:

- a) Call an emergency number (if Red Flag Symptom(s) are present, call 911)
- b) Notify the athlete’s parent or guardian (if the athlete is a minor) or someone close to the athlete (if the athlete is not a minor)
- c) Have a ride home arranged for the athlete
- d) Isolate the athlete into a dark room or area
- e) Eliminate external stimulus (noise, other people, etc)
- f) Remain with the athlete until he or she can be taken home
- g) Encourage and refer the athlete for Medical Assessment by a medical doctor or nurse practitioner

RETURN TO PLAY

4 Once the athlete’s immediate needs have been met, the athlete’s family or the athlete should be directed to the following:

4.1 An athlete who has been concussed should only return to the activity by following the steps outlined below and as directed by a medical doctor. Progression through the stages should only be done if symptom-free for at least 24-48 hours. If symptoms return at any time, revert back to the previous stage until symptom-free for at least 24-48 hours.

| RETURN-TO-PLAY STRATEGY | | |
|-------------------------|-----------------------------|---|
| Stage | Aim | Activity |
| 1. | Symptom-linked activity | Daily activities that do not provoke symptoms |
| 2. | Light aerobic exercise | 10-15 minutes of low intensity activity. |
| 3. | Sport-specific exercise | 30 minutes of low intensity participation. The athlete may also attempt basic balance drills. |
| 4. | Non-contact training drills | Regular warm-up with high intensity agility/coordination activities and monitored high intensity workout. |
| 5. | Full contact practice | Full practice once cleared by a physician. |
| 6. | Return to sport | Return to unrestricted training and competition |

MEDICAL CLEARANCE

5. This Policy requires the athlete to consult with a medical doctor throughout this process and the Association will comply with all directions provided by the physician which may supersede this policy.