



## RED FLAGS - Call and Ambulance

If any of the following signs are observed or complaints are reported after an impact to the head or body the athlete should be immediately removed from play/game/activity and transported for urgent medical care by a healthcare professional.

Player Name \_\_\_\_\_

Date \_\_\_\_\_ Location \_\_\_\_\_

### Assesment

Signs	Yes	No
Neck Pain or tenderness		
Seizure, fits, or convulsion		
Loss of vision or double vision		
Loss of consciousness		
Increased confusion or deteriorating conscious state becoming less responsive,		
Weakness or Numbness/tingling in more than one arm or leg		
Repeated vomiting		
Severe or increasing headaches		
Increasingly restless, agitated or combative		
Visible deformity of the skull		

### If there are not Red Flags, identification of possible concussion should proceed as follows:

Concussion should be suspected after an impact to the head or body when the athlete seems different than usual. Such changes include the presence of any one or more of the following: visible clues of concussion, signs and symptoms (such as headache or unsteadiness), impaired brain function (e.g. confusion), or unusual behaviour.



### Assesment

1: Visible Clues of Suspected Concussion visible clues that suggest concussion include:	Yes	No
Loss of consciousness or responsiveness		
Lying motionless on the playing surface		
Falling unprotected to the playing surface		
Disorientation or confusion, staring or limited responsiveness, or and inability to respond appropriately to questions		
Dazed, blank, or vacant look		
Seizure, fits or convulsions		
Slow to get up after a direct or indirect hit to the head.		
Unsteady on feet/balance problems or falling over/ poor coordination/wobbly		
Facial injury		

<b>2: Symptoms of Suspected Concussion</b>		
<b>Remember symptoms that develop over minutes or hours following a head injury</b>	<b>Yes</b>	<b>No</b>
Physical symptoms		
Headache		
Pressure in head		
Balance problems		
Nausea or vomiting		
Drowsiness		
Dizziness		
Blurred vision		
More sensitive to light		
More sensitive to noise		
Fatigue or low energy		
"Don't feel right"		
Neck Pain		
Physical symptoms		
More emotional		
More irritable		
Sadness		
Nervous or anxious		
Physical symptoms		
Difficulty concentrating		
Difficulty remembering		
Feeling slowed down		
Feeling like "in a fog"		

<b>3: Awareness</b>		
<b>(modify each question appropriately for each sport and age of athletes.)</b>	<b>Yes</b>	<b>No</b>
Failure to answer any of these questions correctly may suggest a concussion		
"Where are we today?"		
"What event were you doing?"		
"Who scored last in this game?"		
"What team did you play last week/game?"		
"Did your team win the last game?"		
Dizziness		

**Any athlete with a suspected concussion should be -IMMEDIATELY REMOVED FROM ALL PRACTICE OR PLAY and should NOT RETURN TO ANY ACTIVITY WITH RISK OF HEAD CONTACT, FALL OR COLLISION including SPORTING ACTIVITY until ASSESSED MEDICALLY, even if not symptoms resolve.**

Athlete with suspected concussion **should NOT:**

Be left alone initially (at least get the first 3 hours)

Be sent home by themselves. They need to be with a respective adult.

Drink alcohol, use recreational drug or drugs not prescribed by their HCP.

Drive a motor vehicle until cleared to do so by a HCP.