

School of Sport Education NT Head Injury Recognition and Referral Form

General Information

Player Name: _____ Date of Birth: _____
 Date: _____ Time: _____
 Club/School: _____ Sport: _____

The injury occurred due to;

- Direct head blow or knock
- Indirect injury to the head (i.e. Whip lash)
- No Specific injury observed

Any Red Flags, as outlined in the Concussion Recognition Tool 5, or potentially serious structural head and/or neck injury call an ambulance.

Removal from Play

If any of the following are observed or reported, the player must be immediately removed from play/training and referred for assessment by a medical Doctor. Players are not to return to training/playing that same day.	Yes	No
Lying motionless on the playing surface		
Slow to get up after a direct or indirect hit to the head		
Disorientation or confusion		
Blank or vacant look		
Balance Disturbance		
Unusual behavior change for the player		
Facial injury after head trauma		
Memory Impairment (i.e. Memory assessment CRT5)		
Player reports or displays any other concussion symptoms (refer to CRT5) List: _____		

If player reports no to all of the above, give them the Heady Injury factsheet and advise that they still need to be monitored for 24-48 hours as signs and symptoms may emerge up to 48 hours after the impact.

Competition Contact Name: _____

Contact Number: _____

Medical Assessment and Clearance - To be completed by a Medical Doctor

Dear Doctor,

This player has been referred to you with suspected concussion. It is the School of Sport Education NT's policy that all players with a suspected concussion or head injury must be assessed by a Medical Doctor as soon as possible after the impact before returning to learn/play. Please refer to the Concussion in Sport Guidelines <https://concussioninsport.gov.au/resources>

Any player diagnosed showing signs and/or symptoms of concussion must follow a Graduated Return to Play (GRTP) program, with further medical assessment if symptoms return.

If the Sporting Body has no mandatory period of time that the player must be withheld from play, the exclusion is based on the individual's recovery as managed by their medical practitioner. Following Sport Medicine Australia's concussion guidelines regarding a more conservative approach to Children and Adolescents, the School of Sport Education NT recommends **an initial 48 hours cognitive and physical rest** prior to graduated return to learning/play activities. They should be able to attend school **symptom free before commencing GRTP and the protocol should be extended so that the player does not return to collision/contact activities less than 14 days from the resolution of all symptoms.**

Initial Assessment

I have assessed the player and understand the information provided and approve them to begin a graduated return to play.

Practitioner Name:

Signed:

Date:

Clearance Approval

Once the player has completed the first 4 stages of GRTP without any recurrence of the symptoms, a second consultation is required to clear the player for full training/match play. (Particularly relevant for Basketball, Rugby (all codes), Australian Football, Football (Soccer), Netball, Cricket).

I have assessed _____ (player's name) following the head injury sustained on the __/__/____ and approve them to return to full contact training and, if no recurrence to symptoms, they may return to match play as of __/__/_____.

Practitioner Name:

Medical Practice Stamp

Signed:

Date: