Judo Canada Removal-from-Sport Protocol

CONCUSSION

What to do if you suspect a concussion?

1. Ensure there is no injury to the neck or spine. If suspicion of a spinal injury, adhere to standard emergency management principles.
2. Immediately remove athlete from Tatami.
3. Go through a brief symptom checklist:
   - Headache (different between headache and pain at the impact site)
   - Nausea
   - Dizziness
   - Confusion
   - Light and noise sensitivity
   - Balance problems
   - Feeling “not right”
   - Please see the attached Concussion Recognition tool for more information
4. If athlete has any of these symptoms cease all activity immediately. Call parent of guardian to pick up the athlete and advise they should be taken to see a medical professional immediately for an assessment.
5. Remain with the athlete until discharged to a parent, guardian or other trusted adult or EMS. For athletes over 18 years of age, contact their emergency contact person;
6. Complete the Judo Canada Concussion Reporting Form
7. If athlete does not have any symptoms allow them to remain at the training but not actively engaged in the activity. Continue to monitor the athlete for symptoms every 10-15 minutes, as symptoms can set in gradually over time.
8. If the athlete has no symptoms at the end of the training session, inform the parent or guardian that an impact occurred and advise them to continue monitoring the athlete.

*If an athlete has a suspected concussion, it is the parent or guardian’s responsibility to take the athlete to see a licensed healthcare provider immediately. This includes family physician, pediatrician, emergency room physician, sports-medicine physician, neurologist or nurse practitioner. Documentation from all other sources will not be accepted.
CONCUSSION RECOGNITION TOOL 5 ©

To help identify concussion in children, adolescents and adults

RECOGNISE & REMOVE

Head impacts can be associated with excessive and potentially fatal brain injuries. The Concussion Recognition Tool 5 (CRT5) is to be used for the identification of suspected concussion. It is not designed to diagnose concussion.

STEP 1: RED FLAGS — CALL AN AMBULANCE

If there is concern after an injury including whether ANY of the following signs are present or complications are reported then the player should be safely and immediately removed from play/competition. An experienced healthcare professional is available, in all cases. The basic principle of first aid (care, response, assessment, evaluation, intervention) should be followed:

- Neck pain or tenderness
- Double vision
- Weakness or dizziness, swelling, bruising, or laceration
- Severe or increasing headache
- Seizure or loss of consciousness
- Deteriorating conscious state
- Vomiting
- Increasing/rapid respiration, apnea or change

Remember:
- In all cases, no basic principles of first aid (care, response, assessment, evaluation, intervention) should be followed
- Assessment for a severe head injury is critical
- Do not attempt to move the player (other than required to move support and help theemselves to safety)
- Do not remove a helmet or any other equipment unless trained to do so safely

STEP 2: OBSERVABLE SIGNS

Visual clues that suggest possible concussion include:

- Lying motionless on the playing surface
- Slow to get up after a direct or indirect hit to the head
- Disorientation or confusion, or an inability to respond appropriately to questions
- Blank or vacant look
- Balance, gait difficulties, motor incoordination, stumbling, slow, laboured movements
- Facial injury after head trauma

STEP 3: SYMPTOMS

- Headache
- "Pressure in head"
- Balance problems
- Nausea or vomiting
- Drowsiness
- Dizziness
- Blurred vision
- Sensitivity to light
- Sensitivity to noise
- Fatigue or low energy
- "Don't feel right"
- More emotional
- More irritable
- Sadness
- Irritated or emotional
- Neck Pain
- Difficulty concentrating
- Difficulty remembering
- Feeling slowed down
- Feeling like "in a fog"

STEP 4: MEMORY ASSESSMENT

(For athletes older than 13 years)

Failure to answer any of these questions (modified appropriately for each sport) correctly may suggest a concussion:

- "What are we at today?"
- "Which half is it now?"
- "Who scored last in this game?"
- "What team did you play last week/game?"
- "Did your team win the last game?"

Athletes with suspected concussion should:

- Not be left alone initially (at least for the first 1-2 hours)
- Not drink alcohol
- Not use recreational/prescription drugs
- Not be sent home by themselves. They need to be with a responsible adult
- Not drive a motor vehicle until cleared to do so by a healthcare professional

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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