

Tenpin Bowling Association of Western Australia

Concussion Policy



Document Control



Concussion Policy

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TBAWA Concussion Policy

1.0 Our Commitment

Tenpin Bowling WA Concussion Policy has been developed to serve the best interests of its members. Although rare in tenpin bowling, concussion has increasingly become a significant public health issue, particularly relevant to sport. The primary purpose of the policy is at all times to protect the welfare of our athletes. Accurate diagnosis and management is needed to ensure that a concussed player is appropriately treated.

2.0 Policy Principle

Concussion refers to a disturbance in brain function that results from trauma to the brain. Usually the changes are temporary and the majority of athletes recover completely if managed correctly. Either a direct or indirect blow to the head can cause this injury. They may be caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly. In other words, even a "ding" or a bump on the head can be serious. You can't see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. The effect that this has on the player can vary from person to person, depending on which part of the brain is affected. The impact can cause concussion signs visible to those who witnessed the collision.

This document is prepared specifically for the tenpin bowling public and is not a medical document.

3.0 Management Plan

The Six "R" Management Plan

The management of concussion involves sequentially following steps.

Each must be followed and completed before moving to the next step.

- RECOGNISE
- REMOVE
- REFER
- REST
- RECOVER
- RETURN

RECOGNISE

Concussion must be suspected or recognised if a player has any of the following signs, symptoms or fails to answer any of the memory questions after a head or body collision.

Signs (what you may see)	Symptoms (player may report)	Memory (questions to ask)
Loss of consciousness	Headache	What is your score ?
Dazed, blank or vacant look	Mental clouding, confusion, or feeling slowed down	"What venue are we at today?"
Slow to get up	Dizziness	What game are you on ?
Unsteady on feet / balance problems	Drowsiness / feeling like "in a fog"	What team did you play last week / game?
Confused / Not aware of plays or events	Pressure in head"	Did your team win the last game?"
Grabbing / clutching of head	Sensitivity to light or noise	
Seizure (fits)	Visual problems	
More emotional / irritable	Difficulty concentrating	

REMOVE

- Any player with a suspected or recognised concussion must be removed from the players area immediately.

- The player must not take further part in any training or games for the day
- Any player with a head injury may also have a neck injury.

IF IN DOUBT, SIT THEM OUT

REFER

- All players with suspected or recognised concussion must be referred to a medical doctor or emergency department as soon as possible.
- This referral must happen even if symptoms or signs have disappeared.
- Ideally, the medical doctor who reviews the player should have experience in the diagnosis and management of sports concussion.
- The player must at all times:
 - be in the care of a responsible adult
 - not consume alcohol
 - not drive a motor vehicle

If any of the following warning signs of head injury appear, the player must be taken to the closest hospital Emergency Department immediately or a responsible adult must call an ambulance (000):

Remember:

- In all cases, the basic principles of first aid (danger, response, airway, breathing, circulation) should be followed.
- Do not attempt to move the player (other than required for airway support) unless trained to do so.
- Do not remove helmet (if present) unless trained to do so.

REST

- REST IS THE CORNERSTONE OF CONCUSSION MANAGEMENT.
- The player should rest completely until all symptoms and signs of concussion have disappeared.

What does complete rest mean?

- Resting quietly at home until symptoms and signs are settled

- Limit any physical exercise to short periods of low level activities
- The brain needs to rest: limit any tasks that require prolonged or focused memory and/or concentration.
- Avoid excessive TV, use of mobile devices, electronic games, computers and phones as these can aggravate symptoms.

How long should the player rest completely?

- Players must rest until all their signs and symptoms have disappeared AND they have stopped all medication required for treatment for their concussion symptoms (e.g. pain killers for headaches)
- The minimum complete rest period is 24 hours for adults
- Children and adolescents need a longer complete rest period
- The required period of complete rest varies from player to player so a medical doctor will specify the minimum time of complete rest for each case.

RECOVER

- Once symptoms and signs are settled and medications are stopped, the player then returns to activities of normal daily living (school, study or work)
- The player must not perform any exercise or any organised sport
- If any symptoms re-occur during recovery, the player may need more complete rest time
- If symptoms re-occur they should be reviewed by their medical doctor.

RETURN

- Exercise can only start after a player has returned to activities of normal daily living without signs or symptoms of concussion and does not require medication for their symptoms.

An athlete cannot come back to play unless we have received a written clearance for them to return to play from a health care provider.