

Concussion Protocols

Concussion Summary

- **Concussion - Is a Brain Injury** with complex neuropathology
- Caused by blow / hit/ biomechanical force to Head or Body, transmitted to Brain.
- May or May Not be associated with Loss of Consciousness
- Rapid (not Immediate >10 mins.) or delayed onset of symptoms and/or signs
- SYMPTOMS/Complaints (e.g. headache, dizziness) vary in type and in severity
- SIGNS / Observations may include Behavioural changes and Unsteadiness
- Usually short lived neurological / cognitive impairment Usually resolves with REST (? how long)
- **NB ----- May also indicate other serious Head or Brain Injuries**

Concussion Recognition

- Rider / injured person - **obviously** unconscious, dazed or disorientated
- OBSERVE and use Common Sense
- OBTAIN - History of Fall / Accident / Injury ... Ask Referee/Assistant Referee or Spectator
- SYMPTOMS or What does Faller complain of? (Not complaining or silent may also be indicative)
- SIGNS or What do you see? (Be aware of Behavioural change and Unsteadiness)
- ORDER -10 minute stand down period off course and REASSESS

Signs and Symptoms of Concussion

- Symptoms – (include) headache, nausea, confusion, amnesia, dizziness, loss of balance, blurred vision/ visual disturbance.... may vary in type and in severity
- Signs – (include) Loss of consciousness, confusion, disorientation, behavioural change, unsteadiness, convulsions, etc.

Concussion Management for Equestrian Athletes

- Sideline assessment – Remove from course or arena, ask Maddock's Questions, EXAMINATION General & Neurological, score symptoms and memory assessment
- Reassess after 10 minutes and 30 minutes. Is rider's condition improving, the same or worsening? If not improving, get Medical help or Refer to Hospital
- REST. Do NOT Ride. REASSESS. REST. Recovery. REST. **Only when an athlete has been assessed as symptom free may they return to riding.** This assessment to be done by qualified medical personnel or nominated first aid resource/referee and NOT by the rider
- If in doubt, SIT IT OUT!

Concussion Side-line Assessment Questions (Maddock's Qs, Modified for Equestrian Sport)

- Which event are we at?
- What is the name of the horse you are riding?
- Which competition is it?
- Which games race did you fall in?
- What event and where did you last compete?
- How did you get here today?

Instructions for Athlete Care (24 hours following concussion/head injury)

These instructions should be read to you and then given to a responsible adult who will be available to accompany you over the next 24 hours

For the next 24 hours:

DO NOT

- Do Not Ride a Horse or operate heavy machinery
- Do Not Drive a Motor car, Do Not Ride a Motor bike or bicycle,
 - Avoid excess visual stimulation Do NOT use a computer
 - Do Not drink Alcohol

DO

- Get plenty of rest
- Take prescribed medications or Paracetamol for Pain

RETURN to the Accident & Emergency Department IF YOU

- Have Severe HEADACHES
 - Are CONFUSED or Have Difficulty Concentrating
 - Start VOMITING
 - Have Blurred or Double VISION
- Have excessive DROWSINESS or Have a FIT or CONVULSION

Note: After a Head Injury, it is common to have mild headaches, difficulty with concentration, irritability or dizzy turns. If the above should persist more than a few days, you should visit your own GP or return to the Accident & Emergency Department.

Rehabilitation and Return to Riding Following Concussion

Follow the "Return to Play - Rehabilitation Plan" guidelines of FEI and Acquired Brain Injury Ireland

Note: Cognitive Judgement, Balance and Co-Ordination are impaired in concussion injury. A rider/athlete must not ride a horse in the first stages of recovery.

Levels / Stages of Return to riding

Note: Cognitive Judgement, Balance and Co-Ordination are impaired in Concussion injury.

A Rider/Athlete Must Not ride a horse in the first stages of recovery.

1. REST - No activity, complete cognitive and physical rest, Do NOT Ride a Horse. Once asymptomatic proceed to level 2.
2. Progress to light aerobic training (walking, jogging), no resistance training.
3. Progress to sports specific exercise, i.e. Riding - going out for a hack / flatwork
4. Non-contact training drills, i.e. work riding.
5. Full training after medical clearance including neuropsychological testing.
6. 6. Back to Equestrian competition.

If at any of these stages, the rider/athlete becomes symptomatic, they should revert to the first level of activity for 24 hours before attempting again to move on to the next level.

KEY PRINCIPLES FOR RETURN TO EQUESTRIAN SPORTS FOLLOWING CONCUSSION

1. REST. Riders/Athletes MUST NOT RIDE A HORSE the same day that their head injury occurred.
2. Riders/Athletes should NOT return to Riding if they still have ANY symptoms.
3. Riders/Athletes, MUST INFORM your coach and/or trainer of your Concussion injury, symptoms, and GIVE the contact information for the treating health care provider.

Document Approval

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