

NRL - COMMUNITY HEAD INJURY RECOGNITION AND REFERRAL FORM



A. GENERAL INFORMATION

Player Name: Age: Club:

Examiner Name: Examiner qualifications:

Date: Time:

B. STRUCTURAL HEAD OR NECK INJURY (MUST be completed)

1. Are there clinical features of a potentially serious or structural head and/or neck injury, including prolonged loss of consciousness (>1 minute) requiring urgent and emergency hospital transfer?¹ Yes No

C. SIGNS OBSERVED (All fields MUST be completed)

Players MUST be removed from a game or training session if any of the following RED FLAGS are observed by anyone, including coaches, parents or other players and sent for immediate medical assessment.	YES Observed Directly	YES Reported	NO
2. Loss of consciousness (or prolonged loss of movement of > 1 – 2 seconds) or not responding appropriately to trainers, referees or other players	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. No protective action in fall to ground (not bracing for impact/ floppy or stiff)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Confusion or disorientation. Staring or limited responsiveness.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Dazed or blank/vacant stare or not their normal selves/not reacting appropriately to surroundings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Impact seizure/convulsion/fit (stiffening or shaking of arms and/or legs on impact)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Balance disturbance ² or Clumsy (loss of control over movements) or slow to get up following a possible head injury (10-15 seconds)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Unusual behaviour for the player	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Memory impairment (e.g. fails Awareness questions – refer to CRT6 ¹)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Player reports or displays any other concussion symptoms (refer to CRT6 ¹)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IMPORTANT TO REMEMBER

- Any player who is unconscious should be suspected of having a spinal cord injury and treated appropriately. This includes DRABCD (Danger, Response, Airway, Breathing, CPR, Defibrillation) and they should not be moved unless appropriately trained personnel are present.
- If the player has weakness or tingling/burning in the arms and/or legs, they should be treated as if they have a spinal injury and an ambulance called.
- A player with a **facial injury** after head trauma should be assessed for signs and symptoms of concussion.
- Players must be **HONEST** in reporting how they feel. Uncooperative behaviour by players should be considered a possible sign of concussion and result in their removal from play as a potential head injury.

¹ Refer to the NRL Concussion Management Guidelines on the Play NRL website: playrugbyleague.com/concussion and use the **Concussion Recognition Tool 6 (CRT6)** <https://bjsm.bmj.com/content/bjsports/57/11/692.full.pdf>

² NOTE: 'Balance disturbance' is defined as when a Player is unable to stand steadily unassisted or walk normally and steadily without support in the context of a possible head injury.

D. OUTCOME AND ACTION (MUST be completed)

- If 'Yes' is selected for question 1, an ambulance must be called for immediate transfer to hospital
- If 'Yes' is selected for any of questions 2-10, **immediate** removal from play and medical assessment are required

A PLAYER SUSPECTED OF HAVING SUSTAINED A CONCUSSION MUST NOT BE ALLOWED TO RETURN TO PLAY IN THE SAME GAME OR TRAINING (OR ANY GAME OR TRAINING) EVEN IF THE SYMPTOMS RESOLVE. THE PLAYER MUST BE SENT FOR MEDICAL ASSESSMENT IN THE CARE OF A RESPONSIBLE ADULT.

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Player Name:

Date:

E. SYMPTOM RECORD – complete **ALL FIELDS** below based on how the player feels **now**. (Helpful for medical follow up.)
A Parent should help answer these questions if the Player is 12 years old or younger.

Headache	0	1	2	3	4	5	6
“Pressure in head”	0	1	2	3	4	5	6
Neck pain	0	1	2	3	4	5	6
Nausea or vomiting	0	1	2	3	4	5	6
Dizziness	0	1	2	3	4	5	6
Blurred vision	0	1	2	3	4	5	6
Balance problems	0	1	2	3	4	5	6
Sensitivity to light	0	1	2	3	4	5	6
Sensitivity to noise	0	1	2	3	4	5	6
Feeling slowed down	0	1	2	3	4	5	6
Feeling like “in a fog”	0	1	2	3	4	5	6
“Don’t feel right”	0	1	2	3	4	5	6
Difficulty concentrating	0	1	2	3	4	5	6
Difficulty remembering	0	1	2	3	4	5	6
Fatigue or low energy	0	1	2	3	4	5	6
Confusion	0	1	2	3	4	5	6
Drowsiness	0	1	2	3	4	5	6
More emotional	0	1	2	3	4	5	6
Irritability	0	1	2	3	4	5	6
Sadness	0	1	2	3	4	5	6
Nervous or anxious	0	1	2	3	4	5	6
Trouble Falling Asleep (If applicable)	0	1	2	3	4	5	6

If you know the player (or ask parents/friends), how different is the player acting compared to his/her usual self?

No different	Very different	Unsure	N/A
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SIGNATURE OF FIRST RESPONDER

Signed:

Date:

Time completed:

The NRL require the injured player to be assessed by a **Doctor** as soon as possible after a head injury **PRIOR** to commencing a Return to Sport Strategy.

POST CONCUSSION INJURY ADVICE – for person monitoring the injured player

- Recovery time from concussion is variable and signs and symptoms can evolve over minutes or hours
- If the player displays ANY of the following: vomiting, neck pain, severe or worsening headache, double vision, excessive drowsiness, convulsions, change in behaviour, loss of consciousness or weakness/tingling/burning in arms or legs; then call an ambulance or contact your doctor or the nearest emergency department **immediately**
- Rest (physical and mental) - including any training until medically cleared (at least 24-48 hrs)
- **NO** alcohol until medically cleared
- **NO** driving until medically cleared
- **NO** medications such as sleeping pills, aspirin, anti-inflammatories or sedating/strong pain killers
- **You MUST take this completed form to your doctor to assist with the assessment** – it is recommended that you book a long consultation with your doctor

A **final** consultation by a doctor, to clear the player medically fit **before** unrestricted training and match play, **MUST** be undertaken.

It is preferable that the same doctor performs all the assessments (including initial and final clearance)