CONCUSSION RECOGNITION TOOL 5®

To help identify concussion in children, adolescents and adults









RECOGNISE & REMOVE

Head impacts can be associated with serious 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 observed or complaints are teported then the player should be safely and immediately removed from play/game/activity. If no licensed healthcare professional is available, call an ambulance for urgent medical assessment.

- Neck pain or tenderness
- Seizure or convulsion
 Loss of consciousness Severe or increasing headache Weakness or tingling/ burning in arms or legs Double vision
- Increasingly restless, agitated or combative Deteriorating conscious state

In all cases, the basic principles of first aid (danger, response, airway, breathing, circulation) should be followed. Remember:

Do not attempt to move the player (other than required for airway support) unless trained to so do. Do not remove a helmet or any other equipment unless

any other equipment ur trained to do so safely.

Assessment for a spinal cord injury is critical. If there are no Red Flags, identification of possible concussion should proceed to the following steps:

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
- Balance, gait difficulties, motor incoordination, laboured movements stumbling, slow to respond appropriately to questions confusion, or an inability Disorientation or

Facial injury after head trauma Blank or vacant look

Concussion in Sport Group 2017

STEP 3: SYMPTOMS

Difficulty	concentrating	Difficulty remembering	Feeling slowed down	-eeling like	"in a fog"
	0				
· More emotional	More Irritable	Sadness	Nervous or anxious	Neck Pain	
Blurred vision	Sensitivity to light	Sensitivity to noise	Fatigue or	low energy	"Don't feel right"
Headache	"Pressure in head"	Balance problems	Nausea or vomiting	Drowsiness	Dizziness
•		7.		10	

STEP 4: MEMORY ASSESSMENT

(IN ATHLETES OLDER THAN 12 YEARS)

 "What team did you play last week/game?" 	"Did your team win	are last yallie!		
"What venue are we at today?"	"Which half is it now?"	"Who scored last in this game?"		
	0.00			
Failure to answer any of these questions (modified appropriately for each sport) correctly may suggest a concussion:				

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

The CRT5 may be freely copied in its current form for distribution to individuals, teams, groups and organisations. Any revision and any reproduction in a digital form requires approval by the Concussion in Sport Group. It should not be altered in any way, rebranded or sold for commercial gain.

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

Concussion in Sport Group 2017