

<b>TITLE:</b>	EA NATIONAL CONCUSSION IN SPORT - Education and Training		
<b>Ref. No:</b>	EA-HSMS-ET-01	<b>Issue Date:</b>	02/2021
<b>Next review due:</b>	01/2023	<b>Version No:</b>	V1.3
<b>Applies to:</b>	EA State Branches, NDCs, ACs, Members, Coaches, Officials, Athletes, and relevant others		
<b>Authorized by:</b>	Andrew Hamilton, General Manager		

**Related State Legislation / Guidance Material /Sport Rules / Regulations:**

1. Australian Federal and State Regulations
2. Australian Institute of Sport and Sports Australia
3. Australian Government Department of Health
4. World Health Organisation
5. Fédération Equestre Internationale (FEI)

1. EA Concussion Education and Training (ET) Aims
2. Concussion Stats and Facts
3. EA National Approach to Concussion
4. What is Concussion?
5. Why Concussion is Serious
6. Health Effects of Concussion
7. Concussion Signs and Symptoms
8. Children and Concussion
9. Identifying Concussion: Roles
10. Key Messages
11. EA Concussion Process and Reporting Protocols
12. EA Member Role
13. Official/OC/Club Role
14. Coach Role
15. MyEA Concussion Cases
16. Resources and References

Signed by:



Date: 01/02/2021

.....  
Andrew Hamilton, General Manager

## 1. Concussion ET Aims

Education and training on concussion provides a consistent learning platform for all Athletes, their parents or support personnel, Officials, Clubs, Coaches, and all other EA members. Managing and reporting concussion in sport is a mandatory requirement from some of Australia's key sporting stakeholders, therefore it is Equestrian Australia's (EA) aim to comply with these requirements.

Athlete health, safety and welfare is EAs primary priority. Therefore, by prescribing a risk management protocol and process for concussion we are caring for our members and managing concussion, being one of the identified risk-factors within equestrian sport. EA is also setting standards for compliance in managing, reporting, and monitoring a suspected or confirmed concussion.

**'If in doubt, sit them out'.**

## 2. Concussion Stats and Facts

- 75% parents do not recognize severity of concussion symptoms even if they were at the game – **OVER 70%**
- 42% were not managed according to recommended guidelines – **OVER 40%**
- 19% were not immediately removed from play following the head injury – **20% or 1 IN 5.**
- 93% of parents were unaware of concussion or return to play guidelines used by their sporting organisations **LESS THAN 10%**
- Nearly 80% of Australians are not aware that children who have a concussion have a higher risk of another concussion.
- 80% of Australians believe that someone with a concussion should be kept awake.
- Nearly 40% of Australians believe that when a child is knocked unconscious, they will wake up with no lasting effects.
- Nearly 40% of Australians believe that concussion occurs only because of a blow directly to the head.

Stats relative to All Australian Sports: Research by Murdoch Children's Research Institute (MCRI)

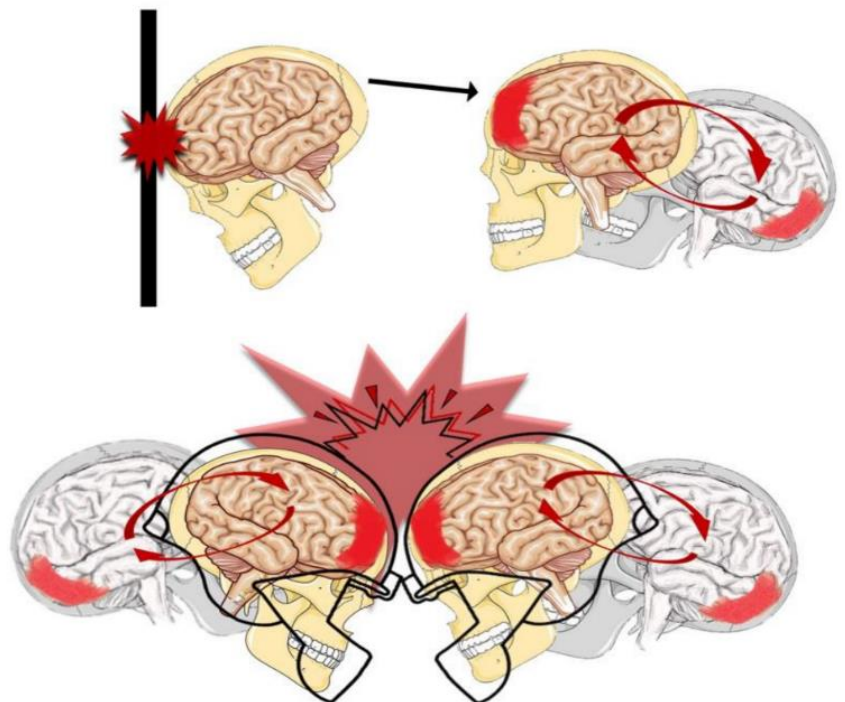
### 3. EA National Approach to Concussion

- Best Practice Medical Care from Australian Institute of Sport (AIS) being Australia's peak high performance sport agency. Other contributors include:  
  
Australian Medical Association (AMA), the Australian College of Sport and Exercise Physicians (ACSEP) and Sports Medicine Australia (SMA)
- Feb 2019 approved by EA Board – All Disciplines
- July 2019 General Regulation have been updated for all Disciplines.
- One concussion protocol and process for all Disciplines, Affiliated Clubs and Coaches
- Concussion report and completed by Medical Service Provider at all EA endorsed competitions, events and, including Affiliated Clubs.
- Coaches to report all injuries including concussion during coaching activities, via MyEA online. If a hospital transfer occurs, EA recommends Coaches also complete an incident/injury report sending a copy to their insurer and NSM at [reporting@equestrian.org.au](mailto:reporting@equestrian.org.au)
- National Concussion Data Base (1 source of data collection-MyEA)

**'EA member Health & Safety is No1 when managing concussion in sport'.**

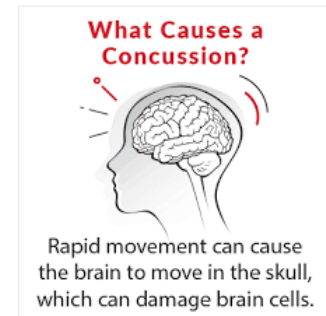
EA members also have a responsibility for their brain:

- If you have a suspected or confirmed concussion = REST and NO RIDE
- It is the members responsibility, along with their parents and/or legal guardian to follow all EA Concussion Protocols
- A Medical Service Provider or Official at an event or your EA Coach makes the final decision about a concussion response and actions required.
- Concussion is a reportable incident.



#### 4. What is Concussion?

- Classified as a 'Mild Traumatic Brain Injury'
- May involve temporary neurological impairment, resulting from
  - a) direct 'knock' to the head (even minor) OR
  - b) indirect where the body transmits an impulsive force to the head
- May cause short-term neurological impairment.
- Symptoms may occur within hours, some even days following injury.
- Treatment: **REST** > followed by gradual return to training – sport activity
- Every concussion needs to be treated as **SERIOUS**



*Note: "Concussion usually results from a blow or knock to the head, but it can also occur from a knock or a blow to anywhere in the body". (Dr David Hughes, AIS Chief Medical Officer)*

#### 5. Why Concussion is Serious

- Growing concern in Australia and internationally about the incidence of sport-related concussion and potential health effects, including long-term for athletes.
- Concussion affects athletes at all levels of sport, from the part-time recreational athlete to the full-time professional.
- Often not easily recognised: can evolve > more significant hours and days following an injury.
- Complications can occur including prolonged duration of symptoms and increased susceptibility to further injury.
- Growing concern about potential long-term consequences of multiple concussions



#### 6. Health Effects of Concussion

- Post-Concussion effects can vary for everyone.
- Some symptoms can persist for months and even years.

**Did you know?**  
**30% of concussions**  
**have ongoing symptoms**

Some of the long-lasting effects of concussion may be:

- Ongoing Headaches
- Balance issues
- Light or noise sensitivities
- Anxiety
- Depression

#### **Repeated Concussions Increased Risk:**

- Alzheimers
- Parkinson's Disease
- Chronic traumatic Encephalopathy (CTE)
- Traumatic Brain Injury (mild)

## **7. Concussion Signs and Symptoms**

- Concussion can be difficult to identify.
- Signs & symptoms vary, some may be obvious, non-specific, and subtle.

### **7.1. Obvious Signs and Symptoms**

- Loss of consciousness
- Impact seizure or tonic posturing (can be a sign of brain damage, esp. stiff leg posture, clenched fists and arms bent to hold the hands on the chest)
- Confusion, disorientation
- Memory impairment
- Dazed, blank/vacant stare or not their normal self.
- Behaviour changes atypical of athlete
- Balance disturbance or motor in coordination (e.g., ataxia)
- No protective action taken by the athlete in a fall to ground (observed directly or on video)
- Athlete reports significant, new, or progressive concussion symptoms.

### **7.2. Obvious Signs and Symptoms that require IMMEDIATE ACTION**

- Neck pain
- Increasing confusion
- Repeated vomiting
- Seizure or convulsion
- Weakness or tingling/burning in the arms or legs.
- Deteriorating conscious state
- Severe or increasing headache
- Unusual behavioural change
- Double vision

### **7.3. Other Signs and Symptoms**

*Twenty-two less obvious signs and symptoms listed in the Sports Concussion Assessment Tool (SCAT5). This tool is only used by qualified medical health professionals.*

Headache.... 'Don't feel right'.... 'Pressure in the head'....Difficulty concentrating....Neck pain  
Difficulty remembering....Nausea & vomiting....Fatigue or low energy....Dizziness....Confusion  
Blurred vision....Drowsiness....Balance problems....Sensitivity to light....More emotional.... Irritability  
Sensitivity to noise....Feeling slowed down....Sadness....Feeling like 'in a fog'....Nervous or anxious  
Trouble falling asleep.

## **8. Children and Concussion**

- Medical research has identified children and adolescents 18 years and under have a slower rate of recovery from concussion.
- A more conservative approach to managing concussion and return to sport is recommended for this age group.
- It is critical that a return to learn (training activities) take priority over return to equestrian sport (competition/events)
- A return to school program, may need to include more regular breaks, frequent rest times and increased time for students to complete tasks.
- Medical research recommends NO return to competitive activities less than (<) 14 days from the resolution of ALL symptoms (asymptomatic) (as identified in section 7.1, 7.2 & 7.3)

*Note: By the age of 10, 1 in 5 children (~51,000 in Australia alone) will sustain a concussion and present with acute Post-Concussion Symptoms (PCS). (Professor Vicki Anderson)*

**[https://www.mcri.edu.au/research/projects/concussion-research?qclid=EAlalQobChMI79nUtZ2L7AlVhCRqCh2pighBEAAYASAAEgKxT\\_D\\_BwE](https://www.mcri.edu.au/research/projects/concussion-research?qclid=EAlalQobChMI79nUtZ2L7AlVhCRqCh2pighBEAAYASAAEgKxT_D_BwE)**

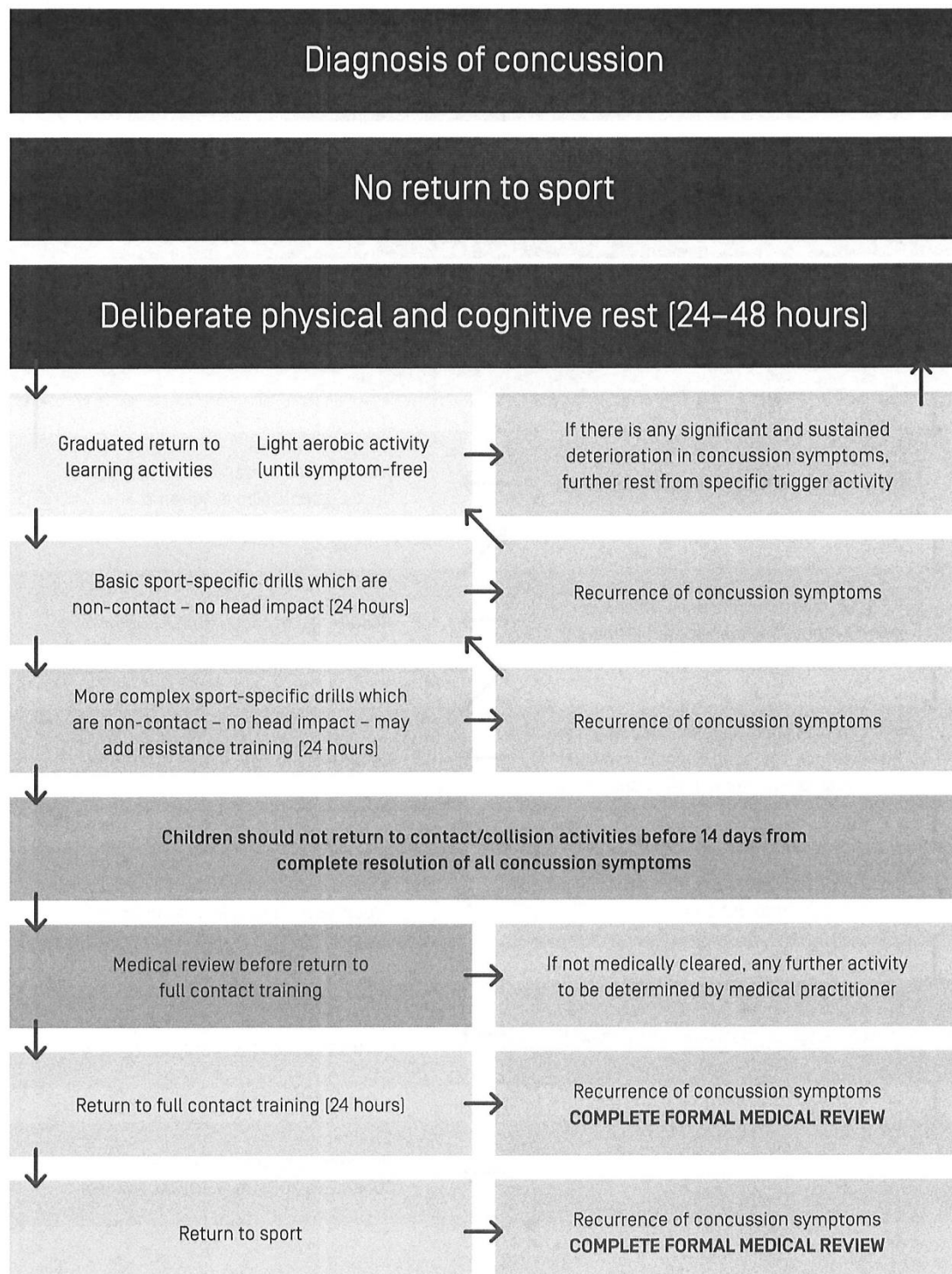


**Remember: For children 18 years and under, it is a parent or guardians' responsibility to follow all EA Concussion Protocols.**

Did you know?  
20% of children are affected by concussion by the age of 16 years



Diagram 2: Return to Sport Protocol for children 18 years of age and under



## 9. Identifying Concussion: Roles

- Everyone has a role to play when an EA member has a suspected or diagnosed concussion.
- Everyone needs to play by the concussion rules.

### 9.1. Qualified Medical Service Provider (MSP)

They are the only ones that use this tool and are qualified to diagnose a concussion.

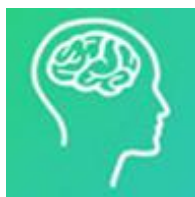
- Use Sport Concussion Assessment Tool (SCAT5)
- <https://bjsm.bmj.com/content/bjsports/early/2017/04/26/bjsports-2017-097506SCAT5.full.pdf>

- Improves identification.
- Provides clinical assessment.
- Diagnoses concussion





### 9.2. All Others: Officials, OCs, Affiliated Clubs and Coaches

- Use Concussion Recognition Tool 5 (CRT5)
- CRT5 is a **non**-medical provider's tool to assist in identifying concussion.
- Tool directs removal from sport **immediately**.
- **Red** flags included to prompt medical review.



**CONCUSSION RECOGNITION TOOL 5®**  
To help identify concussion in children, adolescents and adults

Supported by:   

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

**Remember:**

- In all cases, the basic principles of first aid (danger, response, airway, breathing, circulation) should be followed.
- Assessment for a spinal cord injury is critical.
- Do not attempt to move the player (other than required for airway support) unless trained to do so.
- Do not remove a helmet or any other equipment unless trained to do so safely.

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
- Blow to get up after a direct or indirect hit to the head
- Disorientation or confusion, or an inability to respond appropriately to questions
- Balance, gait difficulties, motor incoordination, stumbling, slow laboured movements
- Blank or vacant look
- 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
- Nervous or anxious
- Neck Pain
- Difficulty concentrating
- Difficulty remembering
- Feeling slowed down
- Feeling like "in a fog"

**STEP 4: MEMORY ASSESSMENT**  
(IN ATHLETES OLDER THAN 12 YEARS)

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

- "What venue are we at today?"
- "What team did you play last week/game?"
- "What half is it now?"
- "Who scored last in this 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.

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

- Use Headcheck (interactive digital smartphone app). >  
Developed by Murdoch Children's Research Institute (MCRI)  
Refer to: <https://youtu.be/7UfM6CzoILs> (MCRI)





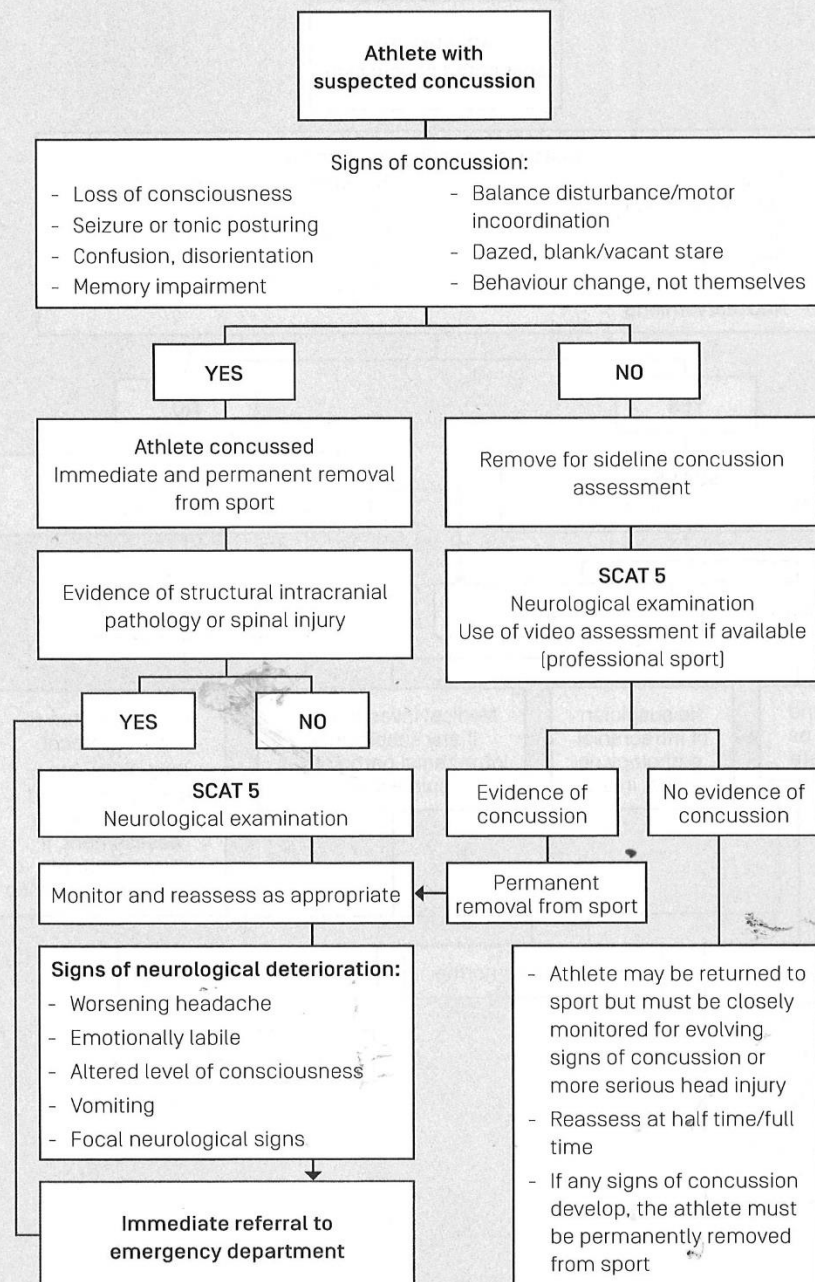
## For Medical Service Providers Only

"if in doubt, sit them out"

Concussion in Sport Australia Position Statement

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**Diagram 5: Concussion management flow chart – on field**  
(for medical practitioners)



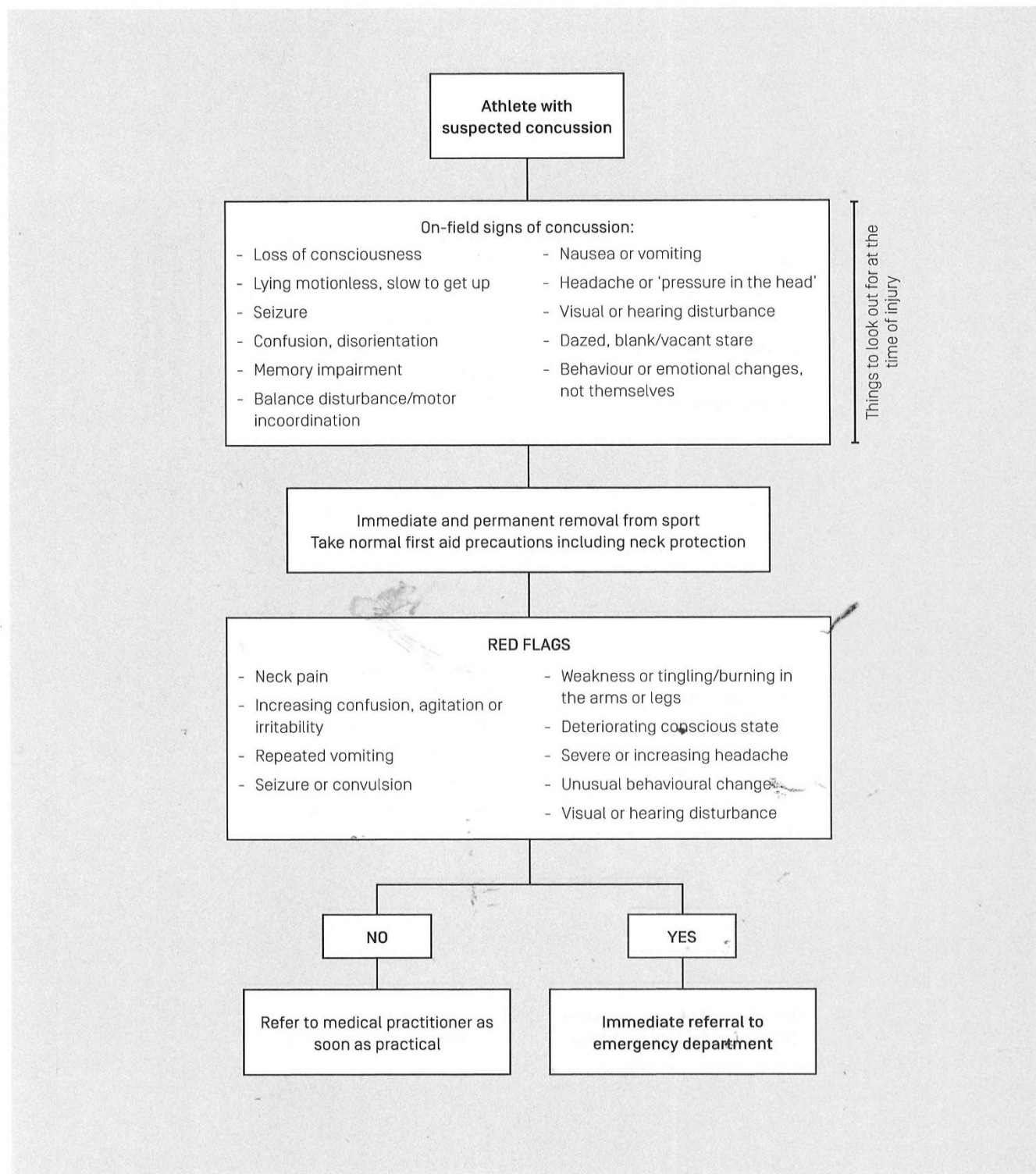
**For ALL Others**  
**(officials, parents, coaches, support person and others)**

"if in doubt, sit them out"

Concussion in Sport Australia Position Statement

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**Diagram 3: Concussion management flow chart – on field**  
(for parents, coaches, teachers, team-mates, support staff)



## **10. Key Messages**

**‘If in doubt, sit them out’.**

**‘Seek Medical Review Immediately’**

**‘MUST’ have medical clearance to return to sport’**

**‘Concussion doesn’t just occur in competition’**

**Multiple Concussions in a short time-frame  
= long-term health effects!**

**It’s not COOL or SAFE to shake your head & get back on!**

**1 x Concussion = Serious**

## **11. EA Concussion Process and Reporting Protocols**

- EA supports Australia’s Concussion in Sport position statement.
- 2017 Concussion protocols were introduced in Eventing competition.
- Feb 2019 the EA Board endorsed Australia’s Concussion in Sport position statement with the commencement of Concussion reporting July 2019.
- July 2019 Concussion protocols revised. All Equestrian Discipline Sport Rules amended to include Concussion protocols and reporting requirements.
- Sept/Oct 2020 EA-NSM has conducted a review of all Concussion Protocols and Processes, Education and Training materials
- 2020 EA NSM commenced communications with all Disciplines and the Eventing Medical Consultative Group, to participate in updates and adopt changes.
- January 2021 All equestrian Disciplines (OCs), Affiliated Clubs and Coaches to implement EAs Nationally endorsed Concussion Protocols and Processes
- The review and update of EAs National Concussion Protocols and Processes supports EAs National Event/Activity Medical and Reporting Protocols



### **11.1 EA-Concussion Protocol (1-10) Mandatory reporting from 1<sup>st</sup> January 2021**

***NOTE: This protocol is applicable to all EA members regardless of the equestrian activity.***

1. **IMMEDIATELY** after an 'athlete is dislodged' from a horse, with a 'suspected concussion' remove athlete from competition/event/training activity. (**Note: this also applies to any EA member even if not mounted on a horse and they have a suspected concussion**).
2. Do a Concussion Assessment according to your skill level and capability:

#### **For Events/Competitions/Affiliated Clubs:**

- a) Qualified: Medical Service Provider (MSP) (if present and **preferred**) to complete all information (including medical monitoring) **EA-HSMS-MED-Incident/Referral Report Form 08**. MSP can retain a copy for their records. Copy **Form 08** to [reporting@equestrian.org.au](mailto:reporting@equestrian.org.au) and Official **within 24hrs**.

#### **For First Aid, Official Coach or Other:**

- b) NON-Medical person who witnesses a suspected concussion refer to Concussion Recognition Tool 5 (CRT5) or Headcheck App, to assist you in the next steps to action. Complete all information (excluding medical monitoring etc.) on **EA-HSMS-MED-Incident/Referral Report Form 08**. Retain a record for your records or OC and forward a copy of **Form 08** to [reporting@equestrian.org.au](mailto:reporting@equestrian.org.au) **within 24hrs**.

3. If Suspected or Diagnosed Concussion by a Qualified: Medical Service Provider **ONLY** EA member **MUST NOT** until medically cleared: > return to training/competition/event or any other equestrian activity (including officiating).

4. Monitor EA member (min 4hrs) and/or hospital transfer according to assessment 2 a) or 2 b)

5. Follow **ALL** EA General Rules Return to Sport Timeframes for a Suspected or Diagnosed Concussion

- a) **18 years and under**: not to ride in competition for a minimum of **14 days**.
- b) **19 years and over**: not to ride in competition for a minimum of **6 days**

6. EA member **MUST** Comply with **ALL** medical advice.

7. MSP, Official or Coach to issue: **EA-HSMS-MED-EA Member Concussion Advice Form 09A** to a responsible person monitoring the EA member with a suspected concussion.

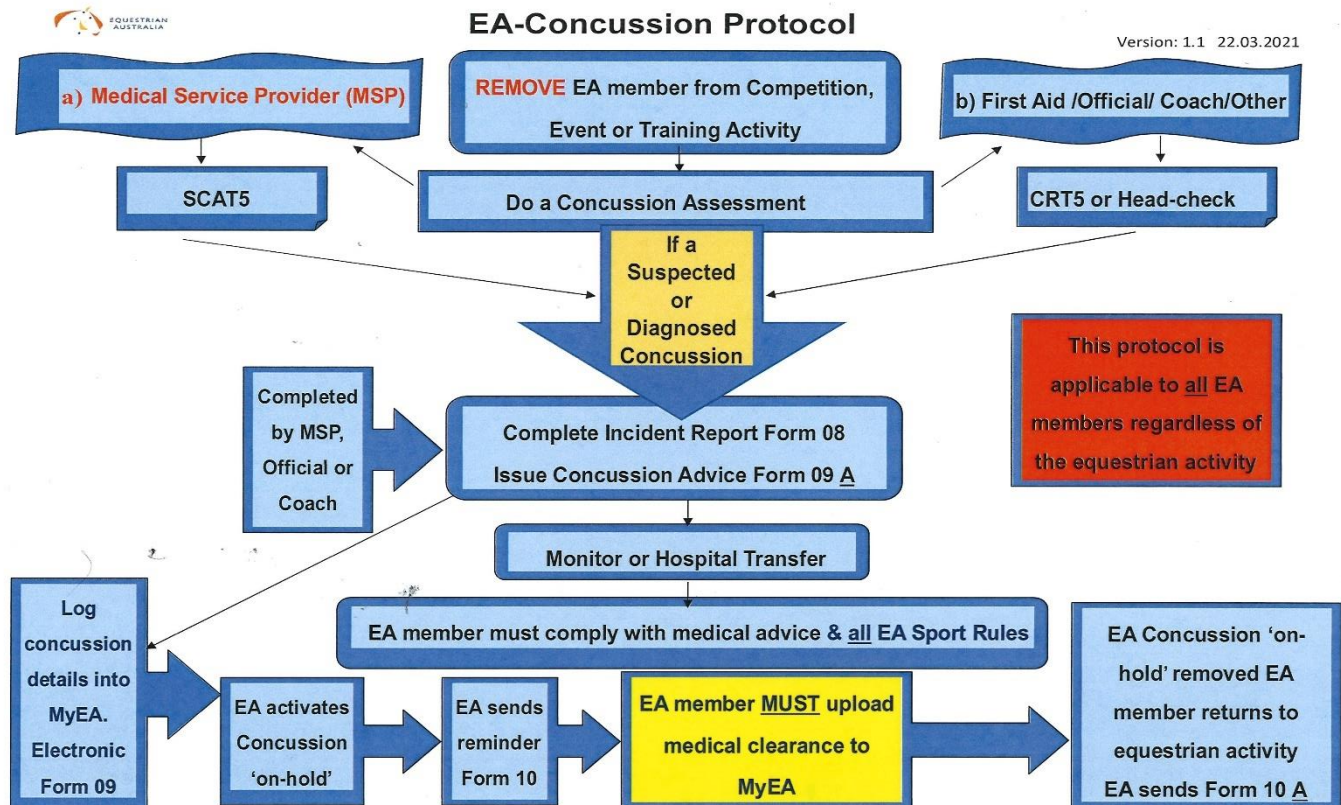
8. a) EA member concussion details to be logged onto MyEA by completing online **Form 09** **within 24hrs** (TD, Official, Coach, delegated other). MyEA will notify National Safety Manager via email ([reporting@equestrian.org.au](mailto:reporting@equestrian.org.au))

- b) MyEA activates 'concussion on hold' status and sends concussion protocol email REMINDER **EA-HSMS-MED-EA Member Post Concussion Email Form 10** to EA member.

9. EA member **MUST** upload a copy of concussion medical clearance onto MyEA

10. Only after step 9 is completed by the EA member and checked by EA, will concussion on-hold be removed from MyEA. In addition, MyEA will then email a notification to EA Member (**Form10A**) that concussion on hold is removed.





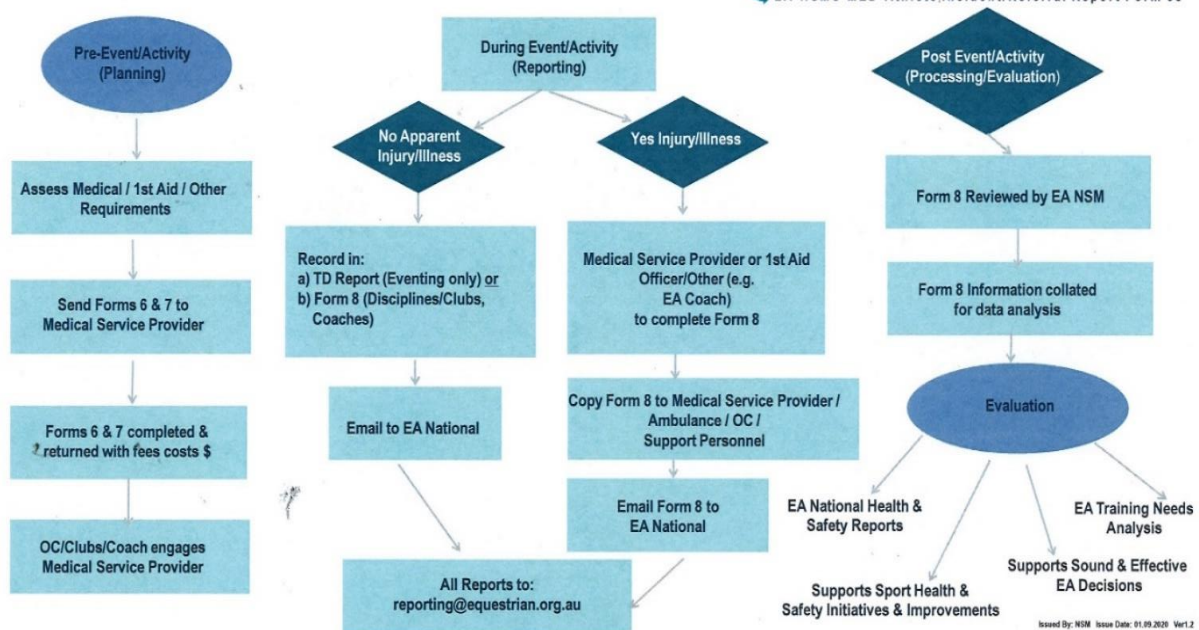
**EA National Event/Activity Medical & Reporting Protocol (Table 1)**

Flowchart for Event OCs/Clubs/Coaches

EA-HSMS-MED-Medical Provider Pre-Event Checklist & Service Agreement Form 06

EA-HSMS-MED-Medical Provider Pre-Event Audit Form 07

EA-HSMS-MED-Athlete Incident/Referral Report Form 08



## 11.2 EA Concussion Reporting Process

Concussion reporting is mandatory and applies to all EA members, regardless of the equestrian activity (e.g., EA endorsed events/activities, coaching, affiliated clubs or joint equestrian participation activities) Do a Concussion Assessment according to your level of skill and capability {see a) and b)}

### **For Events/Competitions/Affiliated Clubs:**

a) Qualified Medical Service Provider (MSP) (if present and **preferred**) to complete all information (including medical monitoring etc.) **EA-HSMS-MED-Incident/Referral Report Form 08**. MSP can retain a record for their records.

Copy **Form 08** to NSM at [reporting@equestrian.org.au](mailto:reporting@equestrian.org.au) and event Official **within 24hrs**.

b) First-Aid, Official, Coach/Other – NON-Medical [refer to Concussion Recognition Tool 5 (CRT5)] To complete all information (excluding medical monitoring etc.) **EA-HSMS-MED-Incident/Referral Report Form 08**. Retain a copy for your records and forward a copy of **Form 08** to [reporting@equestrian.org.au](mailto:reporting@equestrian.org.au) **within 24hrs**.

### **Where do we get copies of EA-HSMS-MED-Incident/Referral Report Form 08?**

a) triplicate booklets can be purchase from EA National by accessing the order form on EAs website <https://www.equestrian.org.au/content/risk-management-and-compliance> or just use the order form link next: <https://form.jotform.com/203477189760061>

**Form 08** booklets cost: \$20 each plus postage 1-2 books \$10 postage and 3+ books \$20 postage. Payment can be by direct credit or credit card by calling EA National office 02 876 2777

*Note: all funds from Form 08 purchases will be included in the EA National Safety budget*

### **Or you can use Form 08 FREE - electronic JotForm**

b) Form 08 JotForm (electronic) for free copy the link below and start reporting on your iPhone, ipad or laptop. The choice is yours. You can elect to send a copy to relevant parties and to yourself as a record. Here is the link for Form 08. <https://form.jotform.com/202477282848061>

### **Always Remember to:**

- Complete **EA-HSMS-MED-Incident/Referral Report Form 08** and send a copy to NSM via [reporting@equestrian.org.au](mailto:reporting@equestrian.org.au)
- Issue **EA-HSMS-MED-Athlete Concussion Advice Form 09A** to a responsible person monitoring the EA member with a suspected concussion.
- Log into MyEA, complete concussion notification online **EA-HSMS-MED-Athlete Concussion Advice Form 09**. MyEA will to the rest. Send follow-up emails, manage medical certificate etc.



EA-HSMS-MED-Incident/Referral Report-Form 08 (word/jotform)



Event Name:	State:	Date:	/ /	Time:	am/pm
Athlete Name:		DOB:	/ /	Age:	Gender: M / F / ND
Athlete No:		Discipline:			

Injury/Illness Severity: ☐ NO Apparent Inj/Ill ☐ YES > ☐ Minor Inj/Ill ☐ Serious Inj/Ill ☒ Concussion ☐ Fatality

Brief description of incident: \_\_\_\_\_

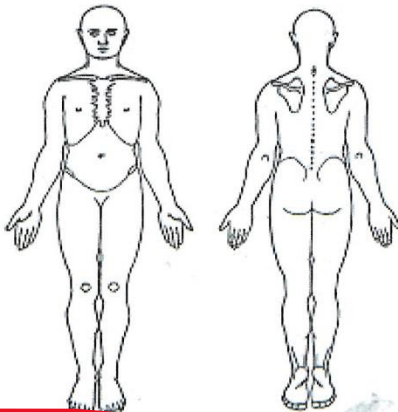
a) ☐ Mounted > b) Speed: ☐ Stationary ☐ Walk ☐ Trot ☐ Canter ☐ Gallop c) ☐ Un-mounted  
d) Helmet: ☐ Yes ☐ No ☐ N/A e) Helmet Damaged: ☐ Yes ☐ No ☐ N/A f) Body Protector: ☐ Yes ☐ No ☐ N/A g) Air Vest Activated: ☐ Yes ☐ No ☐ N/A

Medical History:

Medications:

Allergies:

Observations /Examination:



Treatment Provided:

Time:	BP	HR	RR	SPO2	GCS	BSL	Air/E	Pupils

Medical Clearance Return to Ride ☐ Yes

If ☐ No requires

☐ Observation or ☐ Hospital

T/F >

☐ Amb

☐ Car

> Treatment Plan/Discharge Advice:

(Note: If Hospital transfer OC/Other to complete Insurance Incident Report)

Concussion card issued ☐ Yes ☐ No

Concussion protocols advised ☐ Yes ☐ No

Athlete Mob:

Email:

Athlete/Support Personnel Signature: \_\_\_\_\_

Other documents provided/attached:

Name:

Qualification (if applicable):

Signature:

Mob:

Email:

Copy to a) OC/TD/Coach & b) [reporting@equestrian.org.au](mailto:reporting@equestrian.org.au)

c) Medical Provider Email:

Received by

Date: / /

**EA-HSMS-MED-Incident/Referral Report-Form 08**

JotForm ID No: Form 8-001

Tuesday, September 29, 2020 14:52

**Event Name**

Narrabri Event

**DOB / Age**

18/11/1975

**Date**

Tuesday, September 29, 2020 08:00

**Injury/Illness Severity**

Serious

**Athlete Name**

Catherine Pike

**Gender**

Female

**Was the athlete Injured?**

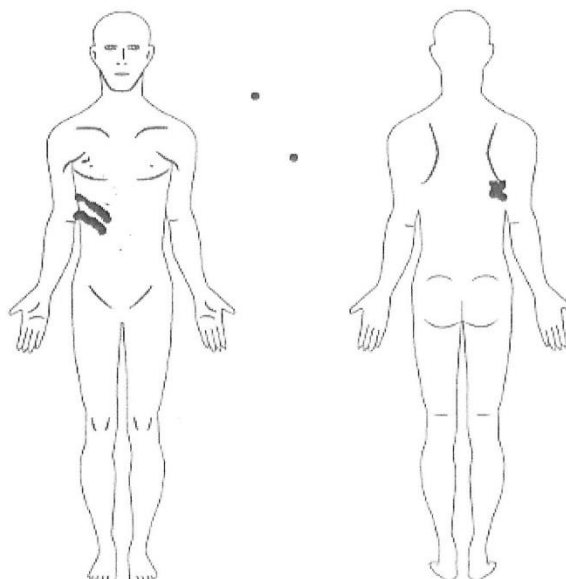
Yes

**Brief description of incident**

Kicked by horse in chest when about to mount

**Rider mounted at the time of the incident?**

No

**Examination / Observations**



**Observations / Examination (cont)**

	Time	BP	HR	RR	SPO2	GCS	BSL	Air Entry L/R	Pupils L/R
1	8.30am	156/98	110	28	96	n/a	n/a	R reduced	L= R
2	9.00am	170/110	115	30	96	n/a	n/a	R reduced	L=R
3	9.25am	160/98	100	22	96	n/a	n/a	R reduced	L=R

**Relevant Medical History**

No history of previous chest issues. History of epilepsy

**Medications**

Dilantin 30mgs daily

**Allergies**

Nil Known

**Medical Clearance - return to ride?**

No

**Follow up?**

Referred for hospital  
treatment

**Concussion Card Issued?**

N/A

**Concussion protocols advised?**

N/A


**Athlete Mobile Number**

0423456782

**Athlete e mail address**

ca@outlook.com-au

**Signature of athlete or connection**

  
Friend

**Signature of person submitting the form**



**Person submitting this form**

Name: Dr Mary Lou

Qualification/Other (eg coach): Trauma  
Guru

Mobile Phone: 0429926365

**Email of person submitting form**

admin@safetyinfocus.com.au

**Event OC contact e mail (if applicable)**

reporting@equestrian.org.au

## **12. EA Members Role in Concussion**

### **12.1 It is important for EA members, their parents or support personnel to know:**

- What is Concussion?
- Recognise the signs and symptoms of a 'suspected concussion'.
- Follow **ALL** EA concussion management, reporting and return to equestrian sport protocols.
- Comply with **ALL** medical advice.
- Immediately report any changes in symptoms in the following days after a suspected or diagnosed concussion.
- **DO NOT** return to any equestrian activity until a 'graduated return to sport' has been completed.
  - EA member will be listed as 'concussion on-hold' in MyEA portal.
  - Return to sport **ONLY** after medical clearance has been received
- Be responsible **DO NOT** return to equestrian training, competition or participate in any equestrian related activity if you are still recovering from a concussion.
- A copy of the concussion medical clearance is to be uploaded onto MyEA. **ONLY** then will concussion on-hold be removed. MyEA will then email a notification to EA Member (**Form10A**) that concussion on-hold has been removed.

### **12.2 Stages of Return to Sport Includes:**

Stage 1. Rest = No Activity, complete 'brain-rest' (cognitive) and physical rest

> NO Handling, interacting (e.g., feeding) or riding a HORSE

> When 'asymptomatic' (not feeling unwell or concussion symptoms) ↓

Stage 2. Progress to **light** aerobic training (e.g., walking, jogging, feeding horse)

Stage 3. Progress to equestrian specific **exercise** (slow trail riding, on flat or hacking)

Stage 4. **Gradually** increase training intensity (pace, duration, terrain)

Stage 5. After Medical Clearance > Return to full training

Stage 6. Return to equestrian competition.

***NOTE: If at any stage the athlete becomes symptomatic - return to stage 1. of activity for 24 hrs before attempting to move onto the next stage***

**Tip: Take a copy of your concussion medical clearance to the first event post-concussion**


### **13. Officials/Organising Committees/Clubs Role in Concussion**

- Prior to the commencement of any competition or event advise the Medical Service Provider/s of the EA concussion protocols and processes. This includes the need to recognise suspected concussion early, act promptly and ensure officials are aware of the circumstance and treatment requirements.
- As soon as an EA member concussion is suspected, they are to be removed **IMMEDIATELY** from any further competition, equestrian activity or other (e.g., EA officiating).

Responsible Event Official by Discipline: 1 Official only designated to manage all concussion/s.

Endurance	Chief Steward
Jumping	Jumping Judge
Show Horse	Show Secretary / Event Organiser
Dressage	Dressage Event Organiser
Vaulting	Ground Jury President or Nominee
Driving	Technical Delegate
Eventing	Technical Delegate

**ALWAYS:**  
Be **AWARE**  
Provide **ADVICE**  
**REMOVE** EA Member  
**ENSURE** Concussion Advice provided  
**REPORT** Suspected Concussion

- Proceed with directing/assisting a concussion assessment by:
  - a) Qualified: Medical Service Provider (if present and **preferred**) SCAT5 Tool **OR**
  - b) First-Aid, Official or Other (non-medical) [refer to Concussion Recognition Tool 5 (CRT5)] or Headcheck (interactive digital smartphone app) (MCRI) 
- Advise Committee Liaison Manager where applicable

#### **Official is required to:**

- Ensure MSP or relevant other has issued **EA-HSMS-MED-Athlete Concussion Advice Form 09A** to a responsible person monitoring the EA member with a suspected concussion.
- Ensure MSP or relevant other completes **EA-HSMS-MED-Incident/Referral Report Form 08**, emails a copy to NSM via [reporting@equestrian.org.au](mailto:reporting@equestrian.org.au) **within 24 hours**. (JotForm does this for you)
- Arrange alternate transport for EA member and/or horse in consult with OC if/as required.
- Include concussion notification in TDs report and Log EA member concussion details onto MyEA or delegate a suitable committee member to complete same **within 24hrs**.
- **MyEA will do the rest:**
  - > Activate client concussion on hold
  - > Email a reminder to the EA member of Sport and EA Concussion Protocols (**Form 10**)
  - > On receipt of the client (EA member) concussion Medical Clearance MyEA will:
    - 1) remove EA member from concussion on hold status (allowing them to participate in equestrian),
    - 2) notify EA member via email that they are no longer on the active concussion list (**Form 10A**)


## **14. Coach Role in Concussion**

### **Prior to any training activity be prepared for a client (EA member) concussion!**

- Always check client (EA member) is not listed as 'Concussion on Hold' on My EA, and always ask about their current health & wellness status.
- Be familiar with EA Concussion protocols and processes.
- Advise your clients of EA Concussion protocols and reporting requirements.
- Be aware concussions do occur during training activities.
- Have a current First-Aid certification
- **Recognise >** a suspected concussion using:
 

Concussion Recognition Tool 5 (CRT5) or

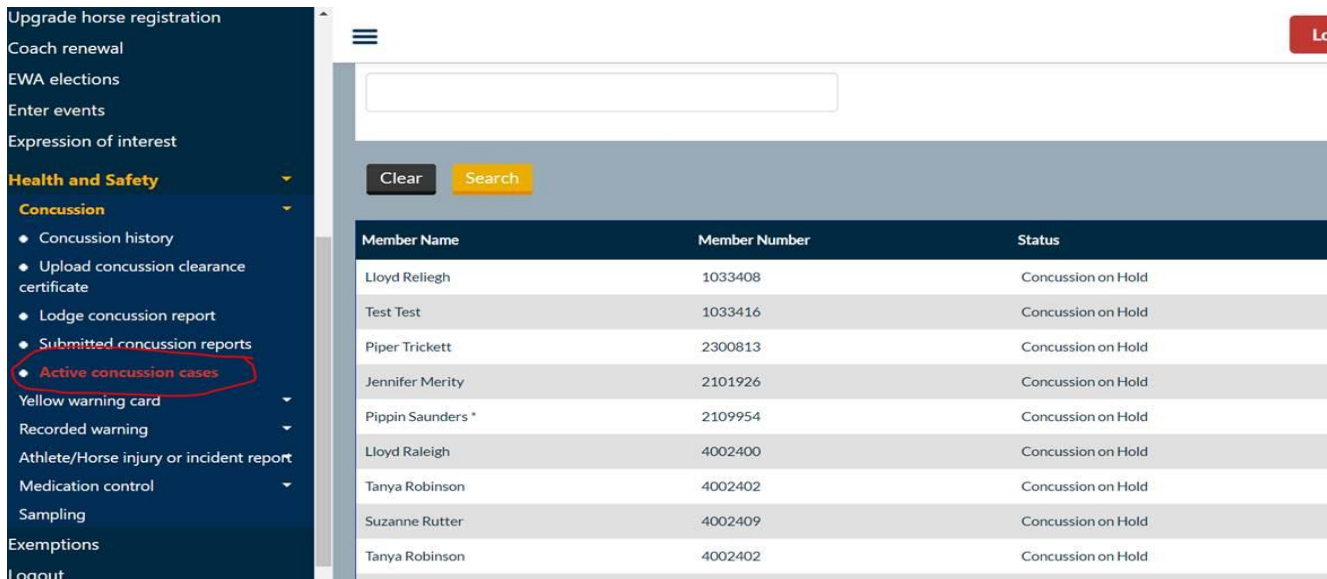
Use Headcheck (interactive digital smartphone app). > (MCRI)


- **Remove >** no further riding or horse interactions if client (EA member) has a suspected concussion
- **Refer >** advise client to seek medical advice (non-emergency) OR **Call 000**
- **Remind >** client or their support person they must follow all age-related return to sport and EA member protocols.
- Issue **EA-HSMS-MED-EA Member Concussion Advice Form 09A** to a responsible person monitoring the client with suspected concussion.
- Arrange alternate transport for client and horse depending on client status or needs as above.
- **Complete EA-HSMS-MED-Incident/Referral Report Form 08** (non-medical sections only), email copy to NSM via [reporting@equestrian.org.au](mailto:reporting@equestrian.org.au) **within 24 hours**. (if electronic this is done for you)
- Log client (EA member) concussion details onto MyEA **within 24 hours**.
- **MyEA will do the rest:**
  - > Activate client concussion on hold
  - > Email a reminder to your client of Sport and EA Concussion Protocols (**Form 10**)
  - > On receipt of the client (EA member) concussion Medical Clearance MyEA will:
    - 1) remove the client from concussion on hold status (allowing them to participate in equestrian),
    - 2) notify the client via email that they are no longer on the active concussion list (**Form 10A**)
- Best Practice is to also complete a copy of your Insurers Incident reporting form and
  - a) retain a copy for your records;
  - b) send a copy to your Insurer and
  - c) send a copy to NSM [reporting@equestrian.org.au](mailto:reporting@equestrian.org.au)





## 15. My EA Check Active Concussion Cases



Member Name	Member Number	Status
Lloyd Reliegh	1033408	Concussion on Hold
Test Test	1033416	Concussion on Hold
Piper Trickett	2300813	Concussion on Hold
Jennifer Merity	2101926	Concussion on Hold
Pippin Saunders *	2109954	Concussion on Hold
Lloyd Raleigh	4002400	Concussion on Hold
Tanya Robinson	4002402	Concussion on Hold
Suzanne Rutter	4002409	Concussion on Hold
Tanya Robinson	4002402	Concussion on Hold

- Note all EA Members have access to MyEA
- It is your responsibility as an EA Accredited (current) Official or Coach, OC, and Affiliated Club to check EA member concussion status pre-event or pre-training session. We cannot just rely on a discussion with the EA member, we need to check. This demonstrates Due-Diligence.
- The process is **EASY**.
  1. Log into MyEA
  2. Click on Health and Safety
  3. Click on Concussion.
  4. Click on Active Concussion Cases
- Due Diligence = ensuring EA members **Do Not** ride, participate in training activities, officiate, or complete any other activity for EA while being listed as concussion on hold with EA.
- EA National Concussion Protocols detail the requirements that EA members cannot resume training, competition or perform any related EA activities until a Medical Clearance Certificate from a Medical Practitioner or Medical Professional has been received by EA and the concussion on hold status has been removed.

**Always be cautious and respond to a 'suspected' concussion.**

***'Think what if I take action now and be cautious, rather than if only I had of responded, more proactively'.***

## **16. Resources and References**

Concussion in Sport Website <https://www.concussioninsport.gov.au/>

FEI Concussion Recognition and Management <https://inside.fei.org/fei/your-role/medical-safety/concussion>

Concussion Recognition Tool 5 (CRT5)

[https://sportconcussion.com.au/wp-content/uploads/2016/02/Concussion\\_Recognition\\_Tool5.pdf](https://sportconcussion.com.au/wp-content/uploads/2016/02/Concussion_Recognition_Tool5.pdf)

### **Athlete:**

<https://www.equestrian.org.au/content/health-and-safety-training>

### **Official:**

<https://www.equestrian.org.au/officials/eventing>

### **Coach:**

[https://www.concussioninsport.gov.au/coaches\\_and\\_support\\_staff](https://www.concussioninsport.gov.au/coaches_and_support_staff)

## **EA-General Concussion Reporting Forms**

EA-HSMS-MED-Incident/Referral Report Form 08 (Completed by MSP or Official/Coach)

<https://form.jotform.com/202477282848061>

EA-HSMS-MED-EA Member Concussion Advice Form 09A (Issued by MSP or Official/Coach)

EA-HSMS-MED-EA Member Concussion Advice Form 09 (Electronic on MyEA)

EA-HSMS-MED-EA Member Concussion Email Form 10 (Sent from MyEA)

EA-HSMS-MED-EA Member Concussion Email Form 10A (Sent from MyEA)

## **Other Concussion Information and Links:**

<https://www.mdpi.com/2411-5142/4/2/37/htm>

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## **16. Document Control**

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Meredith Chapman-NSM	National Concussion Education & Training Shared with Medical Consultative Group & NDCC, EA Business Ops	30.09.2020	1.0		
Meredith Chapman-NSM	Reviewed & approved by EA Acting CEO & GM-Business Operations & Integrity	28.10.2020	1.0		28.10.2020
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