



CONCUSSION IN NETBALL: A GUIDE FOR COACHES

Immediate Response for On-Court Injury

(Consensus Statement on Concussion in Sport, Parachute Canada, Ontario Neurotrauma Foundation)

Concussion is a mild traumatic brain injury, commonly caused by sport, assault or a motor-vehicle accident. Although uncommon in netball, concussions can occur during training or games.

Any time a concussion is suspected, the athlete should be removed from play.

Seek medical help **immediately** if any 'Red Flags' are suspected:

- neck pain or suspected spinal cord injury
- growing confusion
- seizures
- loss in consciousness
- weakness in arms or legs
- increasingly restless or agitated

Signs and Symptoms:

- Headache
- Dizziness
- Feeling 'dazed' or confused
- Ringing in the ears
- Loss or impairment of vision
- Abdominal pain or nausea

Other Problems:

- Poor coordination
- Slurred speech
- Poor concentration
- Strange or inappropriate emotions
- Impaired sports performance

Memory Assessment: failure to answer the following questions (or similar) may also indicate a concussion:

- 'Where are we training/playing right now?'
- 'Who scored the last goal?'
- 'What was the last drill we were doing?'
- 'What was the warm up we did today?'

Next steps for the athlete:

- do NOT leave alone
 - initially do NOT drink alcohol
 - do NOT drive a car
- SEEK an in-depth medical assessment by a healthcare professional



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Managing Return to Play for the Athlete

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After a concussion has been diagnosed by a medical profession, a safe return to the court should be managed appropriately by the coach and other health professionals who are involved.

It is important that the athlete does not return to full participation in sport if continued symptoms are present. **A medical clearance letter should be provided to the coach before full contact sport resumes.**

After an initial rest period of 24-48 hours, the following steps can be followed for return to sport (Parachute Return to Sport Strategy, Consensus Statement on Concussion in Sport (2018))

- There should be at least 24 hours between each stage of the process
- The athlete only move to the next stage if there are no new or worsened symptoms
- If new symptoms develop or symptoms worsen, the athlete should return to the previous stage for at least 24 hours.

Stage	Aim	Activity	Goal & Considerations for Netball
1	Symptom-limiting activity	Daily symptoms that do not provoke symptoms.	Gradual re-introduction of work/school activities.
2	Light aerobic activity	Walking/stationary cycling, slow-medium pace. No resistance training.	Increase heart rate.
3	Sport-specific exercise	Running drills, no cognitive drills, or head contact.	Add movement. Use pre-planned drills (i.e. with no decision-making) with no contest or contact.
4	Non-contact training drills	Harder training drills, e.g. passing drills. May start resistance training.	Increased coordination and cognitive element. Introduce more complex drills, no contact.
5	Full contact practice	Following medical clearance.	Restore confidence and assess functional skills.
6	Return to sport	Normal game play.	Monitor for any return of symptoms.