

## **WOP10-Concussion Management & Return to Play Policy**

EFFECTIVE: May 1st, 2023

2370 Midland Ave, #B23-25, Scarborough, ON, M1S 5C6 416-801-5614 ontario@wushucanada.com www.WushuOntario.ca

### **WushuOntario - Concussion Management Policy**

WushuOntario outlines the procedures to identify and manage concussions based on the International Concussion Consensus Guidelines (Zurich 2012). This policy includes an emergency medical plan removal from physical activity, notification of all affected parties (e.g. parents, coaches, officials) medical examination, as well as a medically supervised and individualized plan to return to play.

### **POLICY STATEMENT**

1. This policy is not age dependent, all athletes, coaches, officials, and volunteers must be treated in the same manner. Though concussions are common sport injuries, particularly among children, adolescents, and combative participants, their sometimes-subtle symptoms may go unnoticed. Without identification and proper management, a concussion can result in permanent or severe brain damage.

#### **DEFINITION**

#### 2. A Concussion:

- a. is a brain injury that is caused by a bump or blow to the head. It can change the way your brain normally works. It can occur during practices or games in any sport. Even a "ding," "getting your bell rung," or what seems to be a mild bump or blow to the head can be serious. A concussion can happen even if you haven't been knocked out. You can't see a concussion. Signs and symptoms of a concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If your child reports any symptoms of concussion, or if you notice the symptoms yourself, seek medical attention right away.
- b. may cause changes in how the brain functions, leading to symptoms that can be physical (e.g., headache, dizziness), cognitive (e.g., difficulty concentrating or remembering), emotional/behavioral (e.g., depression, irritability) and/or related to sleep (e.g., drowsiness, difficulty falling asleep).
- c. may be caused either by a direct blow to the head, face or neck, or a blow to the body that transmits a force to the head that causes the brain to move rapidly within the skull.
- d. can occur even if there has been no loss of consciousness (in fact most concussions occur without a loss of consciousness) e. cannot normally be seen on X-rays, standard CT scans or MRIs. (2) f. can result in symptoms that are evident immediately or may evolve and persist over the course of hours, days or even months.

### INITIAL RESPONSE TO SUSPECTED CONCUSSION TRAUMA: REMOVAL FROM PLAY

3. An individual responsible for those who are participating in organized physical activity who believes that, following a blow to the head, face or neck, or a blow to the body that transmits a force to the head, a participant in the activity may have suffered a concussion needs to take immediate action.

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- 4. If the participant is unconscious as a result of a trauma occurred during a Wushu activity whether combative or non-combative:
  - a. Immediately direct attention and assign notice to paramedic supervisors on site.
  - b. If for some reason, there is no paramedic or medical staff on site dial 911 for emergency services.
  - c. Do not move the participant.
  - d. Give adequate space and only if requested, assist the paramedic or medical staff on site.
  - e. In combative events, all personnel shall follow the clear directives of the medical staff assigned to the event.
- 5. If the participant is conscious after the trauma:
  - a. The participant must be immediately removed from the practice (on or off the competition floor), training, competition, camp, or clinic, and immediate medical assessment received either on or off site.
  - b. The participant should not be left alone c. Symptoms should be documented and may include:
    - i. Dizziness
    - ii. Headaches
    - iii. Nausea
    - iv. Neck pain
    - v. Sensitivity to light and noise
    - vi. Impaired balance and vision
    - vii. Difficulty concentrating or remembering.
    - viii. General confusion
    - ix. Depression or irritability; and
    - x. Drowsiness or difficulty falling asleep.
  - d. Coaches and non-medical staff are never to make the concussion determination in the field on their own.



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- e. In combative competition, only the medical staff is authorized to determine the extent of the trauma and has the final say in whether the participant must cease the current activity or competition.
- f. If there is doubt as to whether a concussion has occurred, it is to be assumed that it has occurred.
- g. The participant's parent/guardians of minors must be contacted, and they will be required to have the injury properly assessed at a hospital or medical clinic.

#### RETURN TO PLAY AFTER A SUSPECTED CONCUSSION

- 6. A participant must undergo medical evaluation for diagnosis and guidance to determine the extent of the individual's injury by a medical doctor or nurse practitioner, preferably one who is trained in concussion management.
  - a. If concussion IS NOT diagnosed, the participant may return to the sport.
  - b. If a concussion IS diagnosed, the participant is not allowed to TRAIN OR COMPETE until the individual has completed the 6 STEPS TO RETURN TO PLAY and receives written medical clearance to return to programming.
  - c. Return to play guidelines are clearly stated in "Parachute, Preventing Injuries and Saving Lives" www.parachutecanada.org.
  - d. WushuOntario supports "Parachute" and "Think First Canada" and the training protocols for coaches, volunteers, athletes and parents to educate them on Concussion awareness. GUIDELINES TO RETURN TO WUSHU AFTER A CONCUSSION DIAGNOSIS
- 7. The following are suggested guidelines related to Wushu and should be used in conjunction with supervised medical recommendations:
  - a. **Step 1:** No activity, only complete rest. Limit school, work and tasks requiring concentration. Refrain from physical activity until symptoms are gone. Once symptoms are gone, a physician, preferably one with experience managing concussions, should be consulted before beginning a step-wise return to play process.
  - b. **Step 2:** Light aerobic exercise. Activities such as walking or stationary cycling. The player should be supervised by someone who can help monitor for symptoms and signs. No resistance training or weight lifting. The duration and intensity of the aerobic exercise can be gradually increased over time if no symptoms or signs return during the exercise or the next day.
    - i. If the athlete has symptoms: Return to rest until symptoms have resolved. If symptoms persist, consult a physician.
    - ii. If the athlete has no symptoms: Proceed to Step 3 the next day.

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- c. **Step 3:** Sport specific activities. Activities such as exercise, stationary striking, kicking or choreography can begin at step 3. There should be no body contact or other jarring motions such as highspeed, full force movements or stops.
  - i. If the athlete has symptoms: Return to rest until symptoms have resolved. If symptoms persist, consult a physician.
  - ii. If the athlete has no symptoms: Proceed to Step 4 the next day.
- d. **Step 4:** Begin drills without body contact. These activities include training drills and movements without at 50-75% capacity.
  - i. If the athlete has symptoms: Return to rest until symptoms have resolved. If symptoms persist, consult a physician. ii. If the athlete has no symptoms: The time needed to progress from noncontact exercise will vary with the severity of the concussion and with the player. Proceed to Step 5 only after medical clearance.
- e. **Step 5:** Begin drills with body contact or at capacity.
  - i. If the athlete has symptoms: Return to rest until symptoms have resolved. If symptoms persist, consult a physician.
  - ii. If the athlete has no symptoms: Proceed to Step 6 the next day. Note: If the participant experiences any symptoms during the above activities, the participant must stop the activity immediately and rest until symptoms resolve, for a minimum of 24 hours. The participant should be seen by a doctor and cleared again before starting the stepwise protocol again.
- f. Step 6: Appendix A: The Return to Play form must be completed by a medical doctor.
  - i. Considerations/Restrictions with respect to returning to train must be documented.
  - ii. A copy of this form must be given to the primary coach and club administrator/office.
  - iii. The document must indicate that the individual is symptom-free and able to return to full participation in physical activity.
  - iv. For Combative Athletes, all documentation and protocols must be recorded in the athletes' competition passport.

### **DISCLAIMER/WAIVERS**

- 8. Registration Forms:
  - a. All members/participants (or if under 18 their parents/guardians) who register for Skate Ontario events must indicate during online registration that they have read the WushuOntario Concussion Policy. The policy will be posted on the WushuOntario Website.



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b. Athletes competing in the WushuOntario events will be expected to sign a Concussion Disclaimer/Waiver during qualifying registration processes.

### 9. Additional Sources:

Concussion Guidelines - Athlete, Coaches, Parents:

http://www.parachutecanada.org/thinkfirstcanada

Ministry of Tourism, Culture and Sport:

http://www.health.gov.on.ca/en/public/programs/concussions/