

Concussion Policy and Procedure Protocol — Pre-Tournament Package

THIS POLICY APPLIES TO ALL PLAYERS AND OFFICIALS PARTICIPATING IN SANCTIONED TOURNAMENT PLAY

1. DEFINITION

A concussion is a traumatic brain injury that interferes with normal brain function. A person receiving a blow to the head does not have to lose consciousness to have suffered a concussion.

2. TYPICAL CAUSES FOR CONCUSSIONS WITH PICKLEBALL PLAYERS MAY INCLUDE

- Head contact with the court floor or a paddle.
- Head contact caused by a collision with another player.
- Ball making direct contact with the head of a player, particularly the forehead.
- Player experiencing head or upper body contact with permanent fixed objects around the court, such as net posts, bleachers, or fencing.

3. CONCUSSION SIGNS AND SYMPTOMS, BUT NOT LIMITED TO

Visual signs of a concussion may include			
Lying motionless on the playing surface	Clutching head	Facial Injury	
Blank or vacant stare	Disorientation or confusion or inability to respond appropriately to questions	Slow to get up after a direct or indirect hit to the head	

Balance, gait difficulties, motor incoordination, stumbling, slow labored movements

Symptoms as reported by person with suspected concussion		
Headaches or head pressure	Blurred or fuzzy vision	Difficulty reading
Easily upset or angered	Sensitivity to light or sound	Nervousness or anxiety
Dizziness	Balance problems	Not thinking clearly
Nausea and vomiting	Feeling tired or having no energy	

4. WHAT TO DO WITH A SUSPECTED CONCUSSION?

The player must immediately be removed from the day's events, if one of the following persons believes the player might have sustained a concussion during play: the player, medical personnel (those assuming responsibility for first aid), or in the absence of medical personnel, the Tournament Director. Should a sideline assessment end with the recommendation of the removal of a player, an <u>Incident report</u> form is to be completed and signed by the player, tournament personal, any witnesses, on-court official and attending medical personnel.

5. POLICY OF REMOVAL DUE TO SUSPECTED CONCUSSION

A player removed from competition may not be permitted to practice or compete again in this competition until they have been evaluated and have received a written release as indicated on a <u>Medical Assessment Letter</u>. The decision to remove a player is to be made by medical personnel or Tournament Director.

6. INCIDENT REPORT

When a player has been removed from play due to a suspected concussion, an **Incident report** is to be completed and signed by the attending medical personnel or the TD and forwarded to PC Executive Director at <u>info@pickleballcanada.com</u> for filing and review.

7. RETURN TO PLAY POLICY

A Player diagnosed with a concussion may return to the event by providing a <u>Medical Assessment Letter</u> <<u>https://parachute.ca/wp-content/uploads/2019/09/Medical-Assessment-Letter.pdf</u>> or a <u>Medical Clearance Letter</u> <<u>https://parachute.ca/wp-content/uploads/2019/06/Medical-Clearance-Letter.pdf</u>>

8. WHO CAN COMPLETE THE LETTERS?

These letters may be completed by a health care provider such as an MD, RN practitioner or an RN with access to an MD/or RN practitioner in a clinic, but not by an allied health provider such as therapist nor chiropractor. Copies of these letters are to be forwarded to PCO Executive director (info@pickleballcanada.com) for filing and review.

9. REFERENCES

PCO Concussion Protocol: https://pickleballcanada.org/wp-content/uploads/2020/06/Concussion_Protocol_20_05_27.pdf Parachute.ca

Concussion Awareness Training Tool (CATT) <<u>https://cattonline.com/</u>>

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CATT (Concussion Awareness Training Tool) - Concussion Pathway, B.C. Injury (Research and Prevention Unit)

