New Zealand Ju-Jitsu Federation (NZJJF)

Concussion Awareness Policy

BACKGROUND

The purpose of this document is to provide:

1. An increased awareness of concussion in those involved in Ju-Jitsu – players, officials, supporters and their families.
2. Guidance on the identification and management of concussion to those involved in Ju-Jitsu in New Zealand.

This summary is prepared specifically for the Ju-Jitsuka of the NZJJF and the general public and is not a medical document. It incorporates the best practice guidelines developed at the 5th International Conference in Concussion in Sport held in Berlin in 2016. Refer Appendix 1.

This guideline primarily pertains to adults and whilst the principals of the document may be applied to children and adolescents, we would advise that all students of this age group with suspected concussion be assessed by a medical professional.

Concussion (and student welfare in general) is everyone's responsibility. Students, parents, coaches and officials need to act in the best interest of student safety and welfare by taking responsibility for the ***recognition***, ***removal*** and ***referral*** of students to a medical doctor. They should then ensure that concussion is appropriately managed as per these guidelines.

It is acknowledged that concussion is not well understood and more research is required to identify both the short and long term consequences of this brain injury. This policy is based on the current best practice guidelines and will be reviewed every 4 years in line with international consensus statements.

Guideline Summary:

- **Recognise and Remove.** If concussion is suspected, remove the student from activity immediately and refer for assessment by the on-site event designated First Aider and seek an urgent assessment by a medical doctor.
- Concussions often occur without loss of consciousness ('knocked out').
- Extra caution is required for child and adolescent athletes.
- It may take several hours (or even days) post injury for some or all of the symptoms of concussion to emerge.
- Non-medical personnel have an important role to play in recognising the signs and symptoms of concussion.
- Concussion can present in a similar manner to other catastrophic conditions with delayed onset of symptoms.
- A medical doctor must provide assessment and diagnosis of concussion because diagnosis may be difficult and relies on clinical judgement.
- No student should return to sport/activity on the day of a suspected or confirmed concussive injury.
- The effects of concussion can interfere with the students ability to learn in the classroom or to function well at work. Return to school/work may need to be graduated and demands altered to reflect level of function, guided by a medical practitioner experienced in this area. Return to school/work and social activities

New Zealand Ju-Jitsu Federation (NZJJF)

Concussion Awareness Policy

should be achieved before return to (insert sport).

PURPOSE

The purpose of the NZJJF Concussion Awareness Policy is to:

a) Increase awareness of concussion within the Ju-Jitsu community and its supporters;

b) Provide guiding principles and general advice regarding the management of concussion in competitions; and

c) Mandate the process by which a student may continue to participate or return to Ju-Jitsu, following involvement in an incident which requires assessment as to whether a suspected concussion has occurred.

The NZJJF has adopted the Consensus Statement on Concussion in Sport: The 5th International Conference on Concussion in Sport, held in Berlin, November 2016 Refer Appendix 1.

"With respect to the assessment of concussion, the advice contained within this Concussion Policy is of a general nature only. Individual treatment will depend on the facts and circumstances specific to each individual case. This Concussion Policy is not intended as a standard of care and should not be interpreted as such."

This Concussion Policy will be reviewed every 4 years by the NZJJF and will be modified according to the development of new knowledge.

POLICY

The NZJJF Concussion & Awareness Policy

The NZJJF Concussion & Awareness Policy:

a) Applies to; Clubs, Instructors, Students and Officials;
b) Applies to all Events;
c) Forms part of the NZJJF statutes to which all competition participants are bound;
d) Does not limit or restrict the application of NZJJF Statutes and, in particular, the code of conduct for behaviour or conduct of a club, instructor, student or official; and
e) May be supplemented or varied from time to time by the NZJJF.

Instructors and students should be educated on the signs and symptoms of concussion and encouraged to be honest with medical staff and report any new symptoms as they develop.

Definition

Concussion is a brain injury and is defined as "*a traumatic brain injury induced by biomechanical forces either directly or indirectly upon the head*".

(McCrory P, Meeuwisse WH, Dvorak J, et al. Consensus statement on concussion in sport: the 5th International Conference on Concussion in Sport, Berlin, November 2016).

New Zealand Ju-Jitsu Federation (NZJJF)

Concussion Awareness Policy

More simply, a concussion may be defined as a transient alteration in the mental state of the rider that may, or may not, result in a loss of consciousness.

There are several features that are important to highlight. These are:

a) A concussion is not always caused by a blow to the head. It may be caused by a direct blow to the head, face, neck, or elsewhere on the body with an 'impulsive' force transmitted to the head.
b) An athlete does not need to be knocked out to have sustained a concussion. Only approximately 10% of concussions present with a loss of consciousness.
c) A concussion typically results in the rapid onset of short-lived impairment of neurological function that resolves spontaneously.
d) Concussion can be difficult to diagnose. Whenever an athlete has an injury to the head and becomes confused or acts abnormally or they lose consciousness, even for a few seconds, they have been concussed.

SIGNS OF CONCUSSION

Recognise, Remove & Refer

When a concussion, or possible concussion, occurs it is important to take action and to get help. The most important steps in the early identification of concussion are to recognise a possible injury and remove the participant from the sport/activity.

Non-medical personnel have an important role in observing possible concussion and its effects (e.g. behaviour/symptoms), and should take responsibility for removing the injured athlete from the sport/activity.

Immediate visual indicators of concussion include:

a) Loss of consciousness or responsiveness;
b) Lying motionless on the ground/slow to get up;
c) A dazed, stunned, blank or vacant expression;
d) Appears confused or disorientated
e) Appearing unsteady on feet, balance problems or falling over;
f) Grabbing or clutching of the head; or
g) Impact seizure or convulsion.

Concussion can include one or more of the following symptoms:

a) Symptoms; headache, dizziness, 'feeling in a fog'.
b) Behavioural changes; inappropriate emotions, irritability, feeling nervous or anxious.
c) Cognitive impairment; slowed reaction times, confusion/disorientation - not aware of location or event, poor attention and concentration, loss of memory for events up to and/or after the concussion.
d) Balance problems including dizziness, lightheadedness or vertigo.
e) Blurred or double vision.

New Zealand Ju-Jitsu Federation (NZJJF)

Concussion Awareness Policy

The Pocket Concussion Recognition Tool or the ACC SportSmart Concussion Card may be used to help identify a suspected concussion. These tools are for non-medical personnel to assist with recogniton of a suspected concussion and should not be used to 'clear' people to return to riding that day. Refer Appendix 2

The Unconscious Athlete

If an athlete is injured and / or unconscious apply first aid principles.

- DRSABC (Danger, Response, Send for Help, Airway, Breathing, Circulation).
- Treat all unconscious athletes as though they have a spinal injury.
- An unconscious athletes must ONLY be moved by personnel trained in spinal immobilisation techniques.
- Urgent hospital care is necessary if there is concern regarding the risk of structural head or neck injury – call 111.

Immediate Referral (Red Flags)

A n injured athlete with any of the following should be referred to hospital URGENTLY.

- Loss of consciousness or seizures
- Persistent confusion
- Double vision
- Deterioration after being injured – increased drowsiness, headache or vomiting
- Report of neck pain or spinal cord symptoms – numbness, tingling, muscle weakness
- Child
- Personal medical history of bleeding disorder / clotting disorder
- Personal history of regular medication use that could result in prolonged bleeding (e.g. Warfarin, Aspirin).

If at any time there is any doubt the injured athlete should be referred to hospital for an immediate assessment.

All other athletes who have been withdrawn from competition due to a suspected concussion are advised to seek medical review by a qualified medical practitioner as soon as possible to confirm diagnosis.

Remove From Further Competition

An athlete should never return to competing on the day of a suspected or confirmed concussive injury.

A student with a suspected or confirmed concussion should be immediately removed from training or an event, and should not be returned to activity until they are assessed by a qualified medical doctor.

Students with a suspected concussion should not be left alone, should not drive a motor

vehicle and should not consume alcohol. The student MUST also be in the care of a responsible person who is aware of the concussion.

Only qualified medical practitioners (doctors) should diagnose whether a concussion has occurred, or provide advice as to whether the student can return to Ju-Jitsu training. All students should be referred for a medical assessment.

It is suggested that all clubs/events have a list of local medical doctors, concussion clinics and emergency departments close to where the event is being held.

A pre-activity checklist of the appropriate services could include:

- Local doctors or medical centre
- Local hospital emergency department
- Ambulance services (111).

Medical Assessment

Any athlete who is suspected of having sustained a concussion should be reviewed by the designated on-site First Aider at the event initially. The athlete will then be referred for immediate medical review (as per the Red Flags above) or have an assessment from a medical doctor post-event

A qualified medical practitioner should:

a) Diagnose whether a concussion has occurred – based on clinical judgement;
b) Evaluate the injured student for concussion using SCAT5 (or SCAT5 Child for those under the age of 12 years) or similar tool;
c) Advise the student as to medical management;
d) Advise the student as to when it is appropriate to begin a Graduated Return to Ju-Jitsu Program (refer Appendix 1 of the this Concussion Policy for Graduated Return to Ju-Jitsu Guidelines;
e) Clear the student to return to play following the Graduated Return to Ju-Jitsu Program, as detailed in this Concussion Policy.

NZJJF endorses the Sport Concussion Assessment Tool version 5 (SCAT5) and the Child-SCAT5 as a validated means of assessing concussion by a medical doctor. Refer Appendix 4.

We recommend students, coaches and officials become familiar with the symptoms evaluated in SCAT5.

The SCAT5 is NOT to be used for diagnosis of concussion alone. It provides a standardised assessment to aid diagnosis by a medical doctor.

Recovery

The majority (80-90%) of concussions resolve in a short (7-10 day) period. Some students will have more long-lasting symptoms. The recovery frame may be longer in children and adolescents. As a result the return to Ju-Jitsu process should be more conservative for children and adolescents. It should be stressed that there is no arbitrary

time for recovery and that decisions regarding a return to Ju-Jitsu need to be individualised.

Prior to embarking on a return to Ju-Jitsu programme, a student must have no symptoms at rest and must have had a clearance from a medical doctor.

It is suggested that any student who has sustained multiple concussions, or who has symptoms which persist for more than two weeks for adults and adolescents (>12yrs age) and more than four weeks for children (<12yrs age), have a review from a clinician with expertise in managing sports-related concussion (for example a Sport and Exercise Medicine Physician, Neurologist, or Neurosurgeon) before returning to Ju-Jitsu.

Return to Ju-Jitsu

Following clearance from a qualified medical practitioner, the student should commence and progress through a **Graduated Return To Ju-Jitsu Program (Appendix 5)**.

In all cases, the Graduated Return To Ju-Jitsu Program provides for a minimum of 6 days before the student can train at a competitive level. **Advance to the next stage no more quickly than every 24 hours and only if symptoms of concussion are not reproduced with each level of increasing activity.**

The following points are imporant considerations:

- If concussion symptoms return at any stage of the athletes return to Ju-Jitsu, the student must inform their medical professional of their symptoms and rest a minimum of 24 hours before resuming the level of activity where symptoms recurred.
- Return to activity should be particularly cautious where children and adolescents are concerned.
- The safety of the student is the priority and must NOT be compromised.
- The decision regarding return to school/work and clearance to return to restricted activity should always be made by a medical doctor.
- The decision regarding the timing of return to sport/activity should always be made by a medical doctor.

In some cases, symptoms may be prolonged or graded activity may not be tolerated. If recovery is prolonged, evaluation by a concussion specialist or clinic may be warranted to determine if there are other aspects of the concussion that could respond to rehabilitation.

Clearance by a medical doctor is required before return to Ju-Jitsu.

Enforcement

These guidelines reflect best practice in the management of concussion in a Ju-Jitsu context. It is everyone's responsibility to ensure that they are applied. students, coaches,

officials and clubs are encouraged to promote these guidelines and to ensure that they are applied appropriately.

Legal Disclaimer
The information presented is of a general nature and is not a substitute for professional, medical or legal advice. NZJJF, clubs and their employees, agents and other associates (including students and officials) disclaim all liability or responsibility for any actions undertaken by any person on reliance on any information provided herein.

The content in this document is subject to copyright but may be reproduced if (name of NSO) and ACC SportSmart are acknowledged as its source.

Appendices

The following resources provide useful further information regarding sports concussion. It is suggested that they are used and referred to.

New Zealand Ju-Jitsu Federation (NZJJF)

Concussion Awareness Policy

Appendix One

Consensus Statement on Concussion in Sport:

The 5th International Conference on Concussion in Sport held in Berlin, November 2016 (McCrory et al), found here: http://bjsm.bmj.com/content/51/11/838

ADOPTED DECEMBER 2018

REVIEWED JANUARY 2025

New Zealand Ju-Jitsu Federation (NZJJF)

Concussion Awareness Policy

Appendix Two

---

1. The Pocket Concussion Recognition Tool (CRT):
   http://bjsm.bmj.com/content/51/11/872

2. The ACC SportSmart Concussion Wallet Card :
   https://accsportsmart.co.nz/assets/Uploads/files/Sportsmart-Concussion-card.pdf

ADOPTED DECEMBER 2018

REVIEWED JANUARY 2025

New Zealand Ju-Jitsu Federation (NZJJF)

Concussion Awareness Policy

Appendix Three

Sport Concusssion in New Zealand. ACC National Guidelines, found here: http://www.acc.co.nz/PRD_EXT_CSMP/groups/external_communications/documents/reference_tools/wpc136118.pdf

ADOPTED DECEMBER 2018

REVIEWED JANUARY 2025

New Zealand Ju-Jitsu Federation (NZJJF)

Concussion Awareness Policy

Appendix Four

---

1. SCAT 5 – Sport Concussion Assessment Tool – 5th Edition, found here:
   http://bjsm.bmj.com/content/bjsports/early/2017/04/26/bjsports-2017-097506SCAT5.full.pdf

2. Child-SCAT5- Sport Concussion Assessment Tool (for children ages 5-12 years), found here:
   http://bjsm.bmj.com/content/bjsports/early/2017/04/26/bjsports-2017-097492childscat5.full.pdf

ADOPTED DECEMBER 2018

REVIEWED JANUARY 2025

New Zealand Ju-Jitsu Federation (NZJJF)

Concussion Awareness Policy

Appendix Five

Return to Ju-Jitsu Training Stage	Functional Exercise at each stage of rehabilitation	Objective
No activity	Physical and cognitive rest	Recovery
Light aerobic exercise	Walking, swimming or stationary cycling keeping intensity 70% of maximum predicted heart rate. No resistance (weights) training.	Increase heart rate
Ju-Jitsu specific exercise	Running, jumping or bounding type aerobic exercise that replicates the movements of Ju-Jitsu	Add movement
Low impact training drills	Low risk Ju-Jitsu training, drills/low impact work preferably under direct parental or coach supervision	Heart rate, movement, co-ordinaton and cognitive load
Higher impact training drills	Higher risk Ju-Jitsu training, preferably under parental or coach supervision. Increase duration & intensity of Ju-Jitsu training slowly during this period. Movement, coordination and cognitive load with more difficult tasks.	Restore student confidence.
Normal pre-injury Ju-Jitsu training	Return to regular training and competition events	Full return to Ju-Jitsu