





### INTRODUCTION

#### **GAB SURIANO**

SMJFL FOOTBALL PATHWAYS DIRECTOR

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2023 WORKING PARTY



lan Jickell (SMJFL Board Member)



Dr. David Munro (East Malvern JFC)



Genine Arvanitakis (Bentleigh JFC)



Derek Waters (Caulfield Bears JFC)



Karen Bennett (East Brighton Vampires JFC)



Jacob Miller (SMJFL Staff)



Bree Vallance (SMJFL Staff)











**OJECTIVE:** To reduce the risk and incidents of concussion across the South Metro Junior Football League

The working party proudly release our "Commitment to Concussion management - Club Code of Conduct" in 2023 to be adopted and signed by all club presidents prior to Round I, April 23, 2023.

7 DECEMEBER 2022

**22 FEBRUARY 2023** 









#### DR DAVID MUNRO PHD

SPECIALIST CONCUSSION TRAINED PHYSIOTHERAPIST

What is Concussion?

- Definition
- Diagnosis
- SMJFL protocol









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SMJFL/AFL Return to Play Protocol post-concussion

- What is the protocol?
- How does it work?









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SMJFL/AFL Return to Play Protocol post-concussion

- What is the protocol?
- How does it work?

Returning to play post-concussion

- When is it safe?
- Letter from GP/appropriate Health Care Practitioner









#### Defining Concussion

### **Sports Related Concussion**

- Impact to head, neck or elsewhere
- Initiates neurotransmitter and metabolic cascade within the brain, resulting in possible:
  - Axonal injury
  - Blood flow change
  - Inflammatory response

No change on standard structural neuroimaging (eg. MRI, CT scan, X-ray)

A *functional* brain injury with a wide spectrum of signs and symptoms











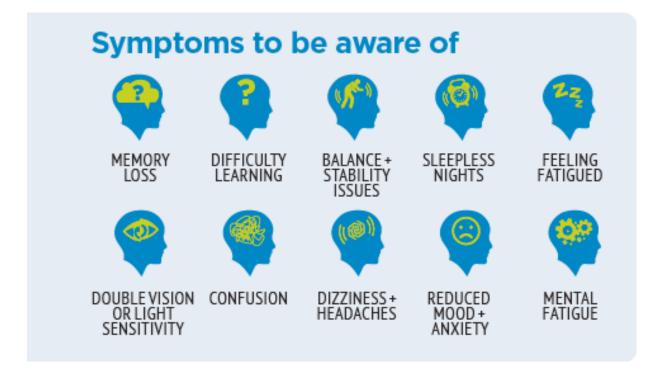
### **Defining Concussion**

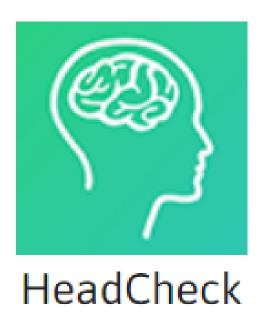
Importantly, a player does not have to lose consciousness to have sustained a concussion

















#### Concussion Diagnosis

• The role of the trainer is to identify any **suspected** concussion, not to clinically diagnose concussion







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- Any player **suspected** of sustaining a concussion must be removed from the play and not be allowed to return i.e. "If in doubt, sit them out"







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- Any player **suspected** of sustaining a concussion must be removed from the play and not be allowed to return i.e. "If in doubt, sit them out"
- That player must then be assessed by a suitably qualified healthcare professional to make a clinical diagnosis







- Once assessed, if that player is cleared of concussion they must provide a written medical clearance certificate to the club
- They are then free to train and play









- Once assessed, if that player is cleared of concussion they must provide a written medical clearance certificate to the club
- They are then free to train and play
- If that player is clinically diagnosed as having sustained a concussion, however, they enter the SMJFL/AFL Return To Play Protocol







### **RETURN TO PLAY PROTOCOL**









Help speed up recovery.	Complete physical and cognative rest in the first 24-48 hours.
Two days of activities that do not provoke symptoms.	No concussion-related symptoms at rest or with physical or brain activity for at least 1 day and the patient has successfully returned to work/school.
ding - Individual prog Light/moderate aerobic exercise (e.g. walking, jogging, cycling at slow to medium pace). No resistance training.	ram   Remain completely free of any concussion-related symptoms.
Increase intensity of exercise (e.g. running at an increased heart rate) and duration of activity Add sports-specific drills (e.g. goal kicking, stationary handballs) Commence light resistance training	Remain completely free of any concussion-related symptoms.
ding - full program	
Return to full team training - non contact except drills with incidental contact (including tackling).  Return to full home and school life	Remain completely free of any concussion-related symptoms.  The patient confident to returm to full contact training or sport or just general life.
by a medical practitioner (e.g. Concussion	on Specialist, Physiotherapist or Doctor) is required to
Full team training/full home and school life.	Remain completely free of any concussion-related symptom The patient confident to returm to full game.
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Focus	Goal	Requirements to move to next stage	
Rest.	Help speed up recovery.	Complete physical and cognative rest in the first	
Recovery		24-48 hours.	
Symptom limited activity.	Two days of activities that do not provoke symptoms.	No concussion-related symptoms at rest or with physical or brain activity for at least 1 day and the patient has successfully returned to work/school.	





Graded Loa	ding -	Individual	progr	am
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to medium pace).
No resistance training.

Remain completely free of any concussion-related symptoms.

#### **RECOVERY DAY**

Sport-specific exercise.

Increase intensity of exercise (e.g. running at an increased heart rate) and duration of activity Add sports-specific drills (e.g. goal kicking, stationary handballs) Commence light resistance training

Remain completely free of any concussion-related symptoms.

#### **RECOVERY DAY**

#### **Graded Loading - full program**

Limited contact training.

Return to full team training - non contact except drills with incidental contact (including tackling).
Return to full home and school life.

Remain completely free of any concussion-related symptoms.

The patient confident to return to full contact training or sport or just general life.

#### RECOVERY DAY

Full contact training.

Full team training/full home and school life.

Remain completely free of any concussion-related symptoms
The patient confident to returm to full game.

Return to play

Minimum 12 days from initial injury











### When Is It Safe To Return To Play?

• 12 days is the *minimum*, NOT a guaranteed time out. It may very well be longer if a player progresses more slowly







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- Once a player has successfully completed the RTP Protocol, they require a written medical certificate from a suitably qualified healthcare practitioner to return to play









### When Is It Safe To Return To Play?

- 12 days is the *minimum*, NOT a guaranteed time out. It may very well be longer if a player progresses more slowly
- Once a player has successfully completed the RTP Protocol, they require a written medical certificate from a suitably qualified healthcare practitioner to return to play



This certificate must be supplied to the Club





#### Letter To GP/Healthcare Professional

The SMJFL Concussion Working Party are currently working on an information sheet and/or letter to assist healthcare practitioners in their clinical decision making process.

This will also inform them of the leagues guidelines and protocols







#### The working party provides the following resources to clubs:

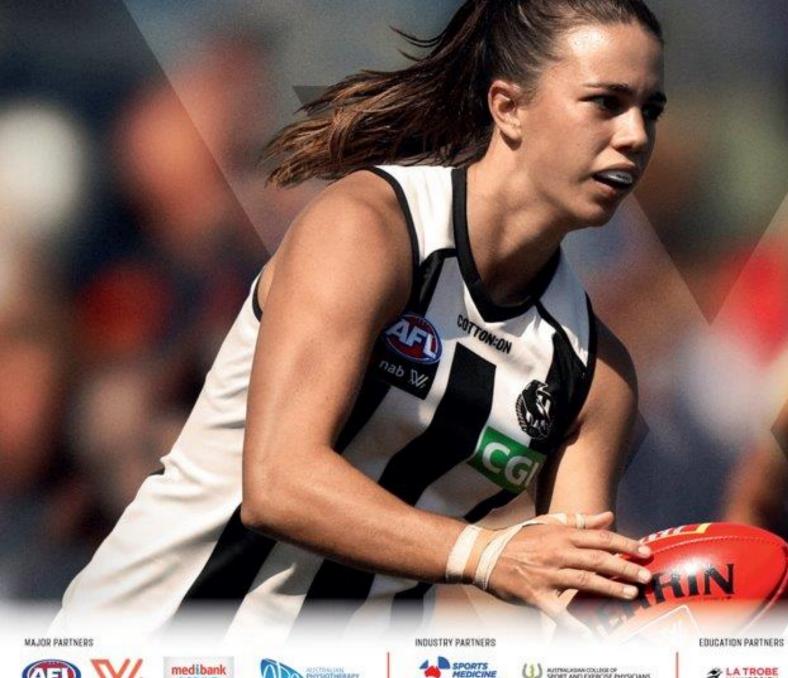
- Dangerous Tackle Guidelines SMJFL Club Corner
- 4 x A3 posters for each club to be placed their change rooms Take home today
- Reporting injuries spreadsheet for club management acknowledge EBV for sharing their resource
- Sample letter for clubs to give to parents to show their GP what is required for a medical clearance in return to play

Working Party long term plan

Commitment to starting a Data Collection of Baseline testing in 2023







# 1111

**REDUCE INJURY & ENHANCE PERFORMANCE** 

A PROGRAM FOR FEMALE AUSTRALIAN FOOTBALLERS

THIS IS US

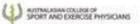














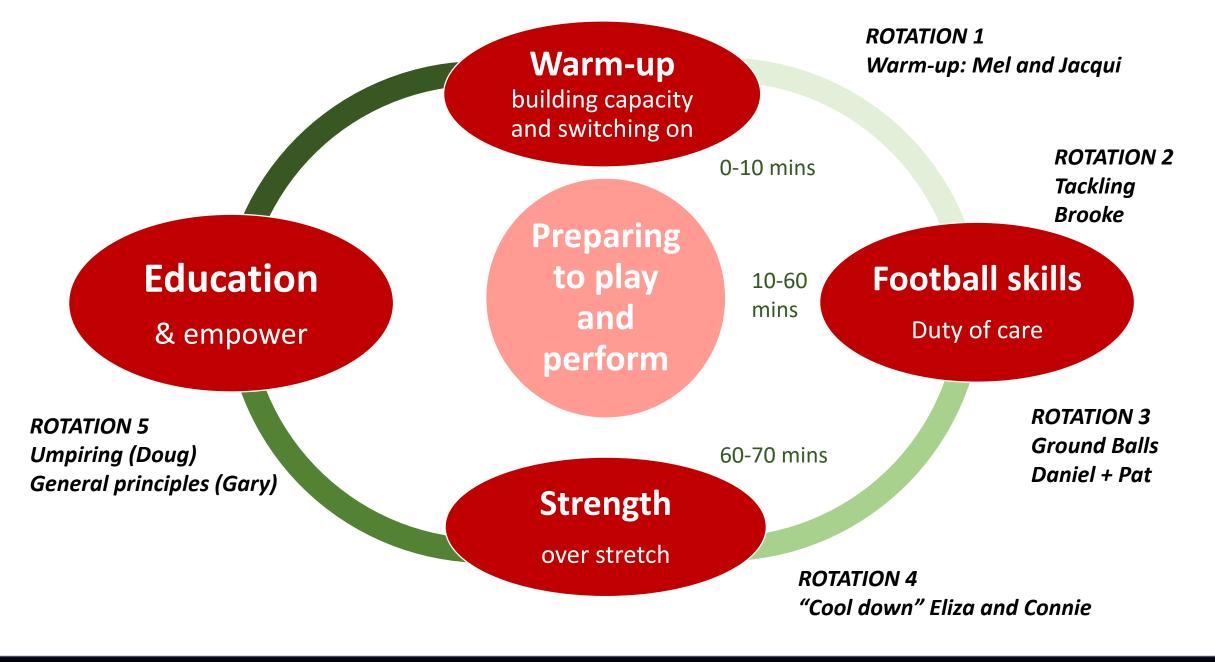


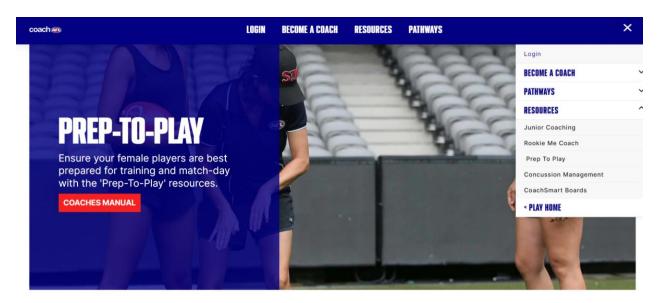












https://www.play.afl/coach/resources/prep-to-play/ Share a different video with your team each week Get your laminated warm-up and strength card

Need some 1-to-1 support at your club?

prep2play@latrobe.edu.au

pathwaysdirector@smjfl.com.au

Scan the QR code to indicate your interest













- First Aid Courses
- **ERC**

- **1300 IMHURT**
- **Match Day Injury Support**
- 10% Discount for SMJFL **Players & Family Members**

#### **Cabrini Emergency**

 SMJFL Member discount at **Cabrini Malvern Emergency Department** 



Prep2Play - Call to Action clubs to book their session (link)









SOUTH METRO JUNIOR FOOTBALL LEAGUE Community Wing – RSEA Park 32-60 Linton Street, Moorabbin VIC 3189

PO Box 3, Moorabbin VIC 3189

