

THE REFEREE SPOTLIGHT

BLUE CARD

SA RUGBY CONCUSSION REGULATIONS

<http://boksmart.sarugby.co.za/content/boksmart-legislation>

BLUE CARD CONCUSSION PROCESS

1. Referee or Medical professional recognises a potential concussion event
2. Referee then signals Blue Card to the player
3. Visual cue to all watching → Concussion or suspected concussion
4. Player is permanently removed from the field of play
5. Player is logged onto the Club or School's submitted Team Sheet as a Concussion
6. Referee to submit Blue Card report to the Provincial Rugby Union
7. Referee, Coach, Team management, Player, Parent or Family member logs the Blue Card onto the SA Rugby Online software www.sarugby.online/bluecard
8. All contact persons listed when logging the Blue Card on the App will receive emailed advice on the required GRTS processes to follow with the player
9. All Blue Card concussion events recorded on the App will be stored on a national database
10. Sport Concussion SA's information: **011-3047724, 0825746918**, Email: sportsconcussion@mweb.co.za will also be emailed to them should they wish to access Medical Doctors who are sufficiently knowledgeable in Concussion management for rugby union

The following are 11 OBVIOUS SIGNS & SYMPTOMS that you as a referee, coach or medical support staff simply cannot miss, and cannot allow players presenting with any of these to continue in a match or practice. **THESE ARE IMMEDIATE BLUE CARDS!**

THOSE SIGNS AND SYMPTOMS TYPICALLY SEEN ON-FIELD:

1. Confirmed loss of consciousness; this is clear and obvious, the player was knocked out
2. Suspected loss of consciousness, or from what you saw happen on the field, where you have a strong suspicion of the player having lost consciousness
3. Convulsions or fits after making contact
4. Tonic posturing, abnormal muscle contractions or muscle stiffening
5. Balance disturbance, ataxia, stumbling or falling over
6. Clearly dazed, dinged or unable to think or react properly

THOSE ADDITIONAL SIGNS AND SYMPTOMS TYPICALLY IDENTIFIED DURING AN ON-FIELD ASSESSMENT:

7. The player is clearly not orientated in time, place or person or doesn't know what time it is, where they are or who they are talking to
8. Definite signs of confusion in the player
9. Definite changes in behaviour for that player
10. Oculomotor signs for e.g. spontaneous nystagmus or rapid involuntary eye movements
11. On-field identification of regular signs or symptoms of concussion as highlighted in your pocket BokSmart Concussion Guides

LAW 3.21 (C): The referee decides (*with or without medical advice*) that it would be inadvisable for the player to continue. The referee orders that player to leave the playing area.

LAW 3.22: 'If, at any point during a match, a player is concussed or has suspected concussion, that player must be immediately and permanently removed from the playing area. This process is known as "RECOGNISE AND REMOVE".'

