

Concussion



IN A MEDICAL EMERGENCY CALL TRIPLE ZERO (000) FOR AN AMBULANCE.

DRSABCD Danger ► Response ► Send for help ► Airway ► Breathing ► CPR ► Defibrillation

The DRSABCD Action Plan is the first step when providing first aid. Use this to assess the immediate situation.

SIGNS AND SYMPTOMS

Some or all of the following may indicate concussion:

- loss of consciousness
- persistent headache
- faintness, dizziness
- confusion
- loss of memory, particularly of the event
- blurred vision
- slurred speech
- altered or abnormal responses to commands and touch
- vomiting within a few hours after a head injury
- wounds to the scalp or face.

WARNING

Any person who has suffered loss of consciousness or an altered state of consciousness after a blow to the head should not return to their activity (eg sport) and should see a medical practitioner urgently.

WHAT TO DO

- 1 Follow DRSABCD.
- 2 If the patient is conscious and no spinal injury is suspected, place the patient in a position of comfort (usually lying down) with their head and shoulders slightly raised.
- 3 Advise them to seek medical attention.
- 4 If the patient is unconscious and a neck or spinal injury is suspected, place the patient in the recovery position, carefully supporting the patient's head and neck, and avoid twisting or bending during movement.
- 5 **Call triple zero (000)** for an ambulance.
- 6 Ensure the patient's airway is clear and open. Keep the patient's airway open by lifting their chin. **DO NOT** force if the face is badly injured.

HEAD INJURY

- 7 Control any bleeding with direct pressure at the point of bleeding. If you suspect the skull is fractured, use gentle pressure around the wound.
- 8 If blood or fluid comes from the ear, secure a sterile dressing lightly over the ear. Lie the patient on their injured side, if possible, to allow the fluid to drain.
- 9 Ensure an ambulance has been called, noting the patient's condition so that you can report it to the paramedics.

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