

CONCUSSION RED FLAGS

If ANY of these are present after a crash or incident, the rider should be excluded from the event and assessed by a medical professional.

- **Neck pain or tenderness**
- **Seizure or convulsion**
- **Double vision**
- **Loss of consciousness**
- **Weakness/tingling/burning in arms or legs**
- **Deteriorating conscious state**
- **Vomiting**
- **Severe or increasing headache**
- **Increasingly restless, agitated or combative**
- **Visible deformity of the skull**

See overleaf for a checklist for Officials and First Responders at cycling events to help assess cyclists involved in incidents for possible concussion.

If In Doubt, Sit Them Out!

A About the **Accident**

- Did they land heavily on their head or neck?
- Is there new damage to their helmet or bike?
- Has a witness or other competitor raised concern?
- Is there footage of the accident?

B About the **Brain**

- Are they slow to think & interact, or not alert?
- Can they recall the accident or events earlier in the day?
- Did they lose consciousness, or are they drowsy?
- Are they dizzy, slow to get up, or staggering?
- Can they see clearly - no blurriness, double vision or blindness?
- Are they nauseous or vomiting?
- Do they have a headache or neck pain?
- Do they have injuries to the head or face?
- Have they experienced a seizure or convulsion?

C Check the **Spine**

- Do they have pain in the midline of the neck?
- Is there any direction of neck movement that is painful or limited?
- Have they had any numbness or weakness in their arms or legs since the accident?

If any of the above are present there is a possibility of concussion. Assessment by the highest-ranking first aid or medical officer should be prioritised in order to make an early diagnosis.

D Don't forget **Danger**

- Are there any other significant injuries to the chest, spine, abdomen or limbs that require an ambulance or immediate attention?