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Serious Injury Report Follow-up Questionnaire

A serious and/or catastrophic injury is defined as any head, neck, spine, or brain injury that is life-threatening, or has the potential to be permanently debilitating and results in the emergency admission of a rugby player to a hospital or medical care centre.

WHAT TO DO!

- In the event of a serious and/or catastrophic injury meeting the above mentioned criteria, the following form should be completed by the injured player and/or coach in conjunction with the Serious Injury Case Manager, **Mrs. Gail Baerecke – Cell: 0728903538, e-mail: manager@playersfund.org.za, fax: 021 659 5653**
- If for some reason this is not possible, then the questionnaire should be completed by the Serious Injury Case Manager in consultation with the coach, other players, and family who might have seen the incident
- Although it might be sensitive and emotional to recall the incident, it would benefit rugby and future rugby players if the follow-up questionnaire is completed while the incident is still fresh in everyone's minds
- This form should then be kept on record pending any inquest or investigation
- Copies should be sent to the SARU's Senior Manager: Medical and SARU's Senior Manager: Rugby Safety

RESEARCH

All serious injury data collected will be recorded and stored on a SARU database. Personal details will be provided to the Chris Burger/Petro Jackson Players Fund, who may provide financial assistance and support to catastrophically injured rugby players. This information will be stored at SARU's offices for official records of these injuries. The injury data may be used for research and publication purposes to help improve the safety standards of the game of rugby in South Africa, and to potentially prevent other injuries of this nature from occurring in the future. However, in this instance, all personal information will be regarded as confidential in any ensuing research analyses and reports on the catastrophically injured players.

- By ticking this box, the player agrees to the above

WORLD RUGBY (WR) (FORMERLY KNOWN AS 'INTERNATIONAL RUGBY BOARD' OR 'IRB')

All data collected will be forwarded anonymously to WORLD RUGBY and stored in a secure WORLD RUGBY database of catastrophic injuries. These data may be analysed by WORLD RUGBY for audit, player welfare, research purposes in relation to the prevention, and management of Rugby-related catastrophic injuries.

- By ticking this box, the player agrees to the above

PLAYER'S CONSENT

It is hereby confirmed that the player or player's family, whichever may be applicable, has given permission to use and submit the information requested by this form and that they agreed that the information can be forwarded to WORLD RUGBY, and be used by both SARU and WORLD RUGBY for the purposes of monitoring and investigating the causes of catastrophic injuries sustained in Rugby Union.

- By ticking this box, the player agrees to the above

SECTION A: PERSONAL DETAILS (PRINT CLEARLY)

Surname: _____ Age of Player: _____

Forenames: _____ Known as (nickname): _____

Date that form was completed:

D	D	/	M	M	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Email address: _____

ID Number:

--	--	--	--	--	--	--	--	--	--	--	--	--

Passport Number:

--	--	--	--	--	--	--	--	--	--	--

Passport type (country of issue):

Marital status:

Playing position:

SARU Registration number:

Residential address:

Tel./Cell. Number:

Next of Kin:

Contact number (next of kin):

Name of Rugby Club/School:

Provincial Union (e.g. Bulls):

1. Date of Birth / /

2. Gender: Male Female

3. Player's Weight in Kilogram (kg)

a. At the time of Injury: _____ kg

b. What is the player's current weight? _____ kg

4. Player's Height in Cm at the time of injury (cm): _____ cm

5. Country of birth: _____

6. Ethnicity:

Arabic

Asian

Black African

Black Caribbean

Pacific Islander

White

Coloured/Mixed Ancestry

Indian

Other

7. What age did the player start playing rugby? _____

8. Number of years that the player has been playing rugby: _____

9. How many seasons of rugby has the player played prior to this season: _____

10. Grade of play

a. Player's current grade of play (please select highest level of play)

School

School Provincial

School International

Club

Non-professional Provincial

Professional Provincial

International

b. Player's current playing age-group

- | | |
|--|---------------------------------|
| <input type="checkbox"/> Junior (<U13) | <input type="checkbox"/> U18 |
| <input type="checkbox"/> U13 | <input type="checkbox"/> U19 |
| <input type="checkbox"/> U14 | <input type="checkbox"/> U21 |
| <input type="checkbox"/> U15 | <input type="checkbox"/> U23 |
| <input type="checkbox"/> U16 | <input type="checkbox"/> Senior |
| <input type="checkbox"/> U17 | |

c. Is the player registered at their Province?

- Yes No

d. Is the player registered at SARU?

- Yes No

11. Player's Usual playing position:

- | | |
|---|--|
| <input type="checkbox"/> 1 – Loose-head prop | <input type="checkbox"/> 9 – Scrum/Inside half |
| <input type="checkbox"/> 2 – Hooker | <input type="checkbox"/> 10 – Fly/Outside half |
| <input type="checkbox"/> 3 – Tight-head prop | <input type="checkbox"/> 11 – Left Wing |
| <input type="checkbox"/> 4 – Lock | <input type="checkbox"/> 12 – Inside centre |
| <input type="checkbox"/> 5 – Lock | <input type="checkbox"/> 13 – Outside centre |
| <input type="checkbox"/> 6 – Open-side flank | <input type="checkbox"/> 14 – Right Wing |
| <input type="checkbox"/> 7 – Blind-side flank | <input type="checkbox"/> 15 – Full back |
| <input type="checkbox"/> 8 – Eighth man | |

12. Number of years the player has been playing in this position: _____

13. Provide any specific, relevant information about the player's background:

SECTION B: INJURY CIRCUMSTANCES (PRINT CLEARLY)

14. How well did the player recall the events of the day?

- No recollection
- Vaguely remembered
- Somewhat
- Well
- Extremely well

15.

a. Date of Injury

/ /

b. Time that the injury occurred:

: am / pm

16. Did the injury occur during:

- Match
 - 15-a-side match
 - 7-a-side match
- Training activity
 - Rugby skills training, Full contact
 - Rugby skills training, Semi-contact
 - Rugby skills training, Non-contact

- Was match/training under:
 - Natural light
 - Artificial light

Other (please specify): _____

17.

a. At what stage of the season did the injury occur?

- Off-season
- Pre-season
- In-season
 - First month of the season
 - Mid-season
 - Last month of the season

b. What type of match was it?

Level of the game

- | | |
|---|--|
| <input type="checkbox"/> School | <input type="checkbox"/> Non-professional Provincial |
| <input type="checkbox"/> School Provincial | <input type="checkbox"/> Professional Provincial |
| <input type="checkbox"/> School International | <input type="checkbox"/> International |
| <input type="checkbox"/> Club | |

Type of game

- | | |
|---|--|
| <input type="checkbox"/> Tournament/Competition | <input type="checkbox"/> Social match |
| <input type="checkbox"/> Friendly match | <input type="checkbox"/> Hostel league match |
| <input type="checkbox"/> League match | <input type="checkbox"/> Farm league match |
| <input type="checkbox"/> Practice match | <input type="checkbox"/> Informal league match |

c. Grade of opposition

- | | |
|---|--|
| <input type="checkbox"/> School | <input type="checkbox"/> Non-professional Provincial |
| <input type="checkbox"/> School Provincial | <input type="checkbox"/> Professional Provincial |
| <input type="checkbox"/> School International | <input type="checkbox"/> International |
| <input type="checkbox"/> Club | |

d. In which period of the game did the injury occur?

- | | |
|--|--|
| <input type="checkbox"/> Warm-up | <input type="checkbox"/> 3 rd Quarter |
| <input type="checkbox"/> 1 st Quarter | <input type="checkbox"/> 4 th Quarter |
| <input type="checkbox"/> 2 nd Quarter | <input type="checkbox"/> Cool-down |

e. Was the incident leading to the injury as a result of foul or dangerous play as defined in Law 10.4 “Dangerous Play and Misconduct”?

Yes No

If Yes, then answer 17f and if answered No, then complete 17g

f. Classifications of dangerous play

- | | |
|---|---|
| <input type="checkbox"/> Punching or striking | <input type="checkbox"/> Tackling an opponent whose feet are off the ground |
| <input type="checkbox"/> Stamping or trampling | <input type="checkbox"/> Dangerous charging |
| <input type="checkbox"/> Kicking | <input type="checkbox"/> Scrum front row rushing opponents |
| <input type="checkbox"/> Tripping | <input type="checkbox"/> Scrum front row lifting opponents |
| <input type="checkbox"/> Early or late tackle | <input type="checkbox"/> Collapsing a scrum, ruck or maul |
| <input type="checkbox"/> Tackle above the line of the shoulders | <input type="checkbox"/> Tip/lifting/spear tackle |
| <input type="checkbox"/> Stiff-arm tackle | <input type="checkbox"/> Retaliation |
| <input type="checkbox"/> Playing a player without the ball | |

g. Did the referee take any action?

Yes No

Explain: _____

h. Playing position at the time of injury

- | | |
|---|--|
| <input type="checkbox"/> 1 – Loose-head prop | <input type="checkbox"/> 9 – Scrum/Inside half |
| <input type="checkbox"/> 2 – Hooker | <input type="checkbox"/> 10 – Fly/Outside half |
| <input type="checkbox"/> 3 – Tight-head prop | <input type="checkbox"/> 11- Left Wing |
| <input type="checkbox"/> 4 – Lock | <input type="checkbox"/> 12 – Inside centre |
| <input type="checkbox"/> 5 – Lock | <input type="checkbox"/> 13 – Outside centre |
| <input type="checkbox"/> 6 – Open-side flank | <input type="checkbox"/> 14 – Right Wing |
| <input type="checkbox"/> 7 – Blind-side flank | <input type="checkbox"/> 15 – Full back |
| <input type="checkbox"/> 8 – Eighth man | |

f. Had the coach attended a SARU or WORLD RUGBY Level coaching course?

Yes No

g. If Yes then give details of the coach's training:

h. Date of the most recent course attended

D	D	/	M	M	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

i. Had the coach attended a BokSmart Rugby Safety course?

Yes No

j. If Yes then provide the coach's BS-number: _____

21. Briefly describe the events that led up to the injury (if possible in the player's own words):

SECTION C: INJURY EVENT (PRINT CLEARLY)

22.

a. Did the player warm-up properly before the match or training session?

Yes No

b. Did the player stretch before the match or training session?

Yes No

23. Indicate the event causing the catastrophic injury (thereafter, please describe and answer the *relevant and corresponding event* section):

- Collision
- Tackle
- Scrum
- Ruck
- Maul
- Lineout

- Kicking
- Running
- Other: _____
- Unclear
- Not applicable

24. Tackle

a. What was the injured player's role in the tackle?

- Ball carrier
 - Tackled from behind
 - Tackled from the side
 - Tackled from the front
- Support player to ball carrier
- Tackler
 - Tackling from behind
 - Tackling from the side
 - Tackling from the front
- Support player to tackler

b. What type of contact was involved?

- Arm
- Collision (no-arms, deliberate)
- Jersey
- Lift (example spear)
- Shoulder
- Smother
- Tap

c. Indicate the following specifics as best you can with regards to the tackle situation;

ROLE	TACKLE HEIGHT	TACKLE DIRECTION	TACKLER'S VELOCITY	BALL CARRIER'S STANCE	BALL CARRIER'S VELOCITY
Ball carrier	High	Front-on	Fast	Upright	Fast
Tackler	Middle	Side-on	Slow	Low position	Slow
Support player	Low	From behind	Standing still	Falling/diving	Standing still

d. Tick off all the additional specifics as best you can with regards to the tackle situation;

Number of Tacklers	Tackle Type
1	Arms wrapped around the player
2	Shoulder charge (no arms used in the tackle)
3 or more	Spear tackle/pile drive (head below shoulders)
	Head is first point of contact with the ground
	Pulled /scragged by the collar

e. Please provide any further information relevant to the tackle e.g. head was first point of contact with the ground, upper body was first contact with the post, etc.

25.

Scrum

a. Was the scrum part of a training session or match

- Training session
 Match

b. If during Training, then was this against a scrum machine or live opposition?

Scrum machine

How many players were going in against the machine? _____

Live opposition

Indicate below how many players were contesting the scrum for both packs?

Injured player's team

3

5

6

7

8

Opposition team

3

5

6

7

8

c. Which team had the put-in in the scrum?

Player's own team

Opposition team

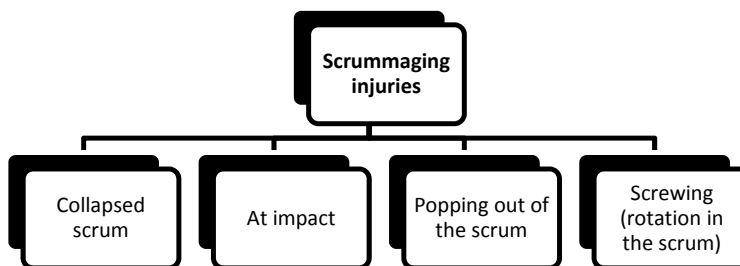
d. Did the injury involve any of the following:

Collapsed scrum

Impact on engagement

Player popping out of the scrum

Scrum wheeling/rotating



- e. Please provide any further information relevant to the scrum e.g. which player popped first, which team collapsed first, number of scrum resets, make and age of scrum machine etc.

26.

- Ruck or Maul

- a. What was the injured player's role in the ruck/maul?

- Ball carrier
 Support player to ball carrier
 Tackler
 Support player to tackler

- b. Body position at the time of injury

- On feet
 Off feet
 Bridging
 Supported

- c. During the ruck/maul did the injury occur during any of the following?

- Cleaning out
 Cleaned out
 Collapsed maul
 Squeeze ball (ball pinned between legs)
 Other (please specify) _____

- d. Please provide any further information relevant to the ruck/maul

27.

Lineout

a. Identify how the injury occurred:

- 'Lifted player' fell during landing (no other player involved)
- 'Lifted player' fell during landing (other player(s) involved)
- 'Lifting player' injured (no other player involved)
- 'Lifting player' injured (other player(s) involved)
- Other (please specify below)

b. Please provide any further information relevant to the lineout e.g. which body part first made contact with the ground, etc.

28. Other categories

- Non-contact training
- Collision (if accidental, then describe below)
- Kicking
- Running

a. Please provide relevant information to the activity being undertaken at the time of injury e.g. weight training, passing drills, running drills, phase play simulations etc.

SECTION D: IMMEDIATE POST-INJURY CARE (PRINT CLEARLY)

29.

a. Who of the following *medical or allied health professionals* were the first to provide on-field treatment or support to the injured player during the match or training session?

- Medical Doctor
- Physiotherapist
- Biokineticist
- Emergency Service Medic (paramedic)
- First Aider
- Nurse
- None

b. When was the injured player FIRST attended to by the medical or allied health professional?

- On the pitch
- Off the pitch

30. Was the player FIRST attended to by someone OTHER than a medical or allied health professional?

- Yes No

a. If answered Yes, then by whom?

- BokSmart Rugby Medic
- Coach
- Referee
- Spectator
- Team official
- Other (Please specify) _____

b. What actions were taken by this person?

- Player moved on the pitch
- Player removed from the pitch
- None e.g. waited for arrival of the paramedics/doctor
- Other (Please specify) _____

31. Who managed/assisted with the removal of the player from the pitch (was in charge/helped out)?

- Medical Doctor
- Physiotherapist
- Biokineticist
- Emergency Service Medic (paramedic)
- First Aider
- Nurse
- BokSmart Rugby Medic
- Coach
- Referee
- Spectator
- Team official
- Player walked off unassisted
- Other player(s)
- Other (Please specify) _____

32. What equipment was used in the removal of the injured player from the pitch?

- a. Did they place a brace/collar over the neck? Yes No
- b. Was the injured player placed on a stretcher? Yes No
- c. Was the injured player placed on a spinal board? Yes No
- d. Was the injured player stabilised using a spider harness? Yes No
- e. Were head-blocks used to immobilise/stabilise the injured player's head and neck? Yes No
- f. Was Oxygen used? Yes No
- g. Other (Please specify) _____

33. Did the player leave the field at any time during the match before the injury and return to the field of play?

- Yes
- No

34. Was the BokSmart SpineLine number (**0800 678 678**) contacted at any given stage during the management of the injured player?

- Yes No

If answered No, then why not?

35. Was the player taken immediately to hospital?

- Yes No

a. How long did the player have to wait before being taken to hospital?

- | | |
|------------------------------------|------------------------------------|
| <input type="checkbox"/> < 1 hour | <input type="checkbox"/> 3-4 hours |
| <input type="checkbox"/> 1-2 hours | <input type="checkbox"/> > 4 hours |
| <input type="checkbox"/> 2-3 hours | |

b. If more than 4 hours passed before being taken to hospital, then please specify the reasons why?

36. How was the injured player taken to hospital?

- Ambulance
 Car
 Helicopter
 Other (Please specify) _____

37. What hospital/medical facilities was the player taken to?

38. Was the injured player wearing any of the following at the time?

- Mouthguard
- Shoulder pads
- Headgear

SECTION E: EXPERIENCE AND TRAINING (PRINT CLEARLY)

39. The number of games played by the injured player this season prior to injury?

40. Within the last 12 months did the injured player receive training from a qualified coach/trainer on how to safely and correctly perform the following activities?

- a. Tackling techniques Yes No
- b. Ball carrying techniques Yes No
- c. Safe techniques in contact Yes No
- d. Scrum techniques Yes No Not relevant
- e. Scrum engagement Yes No Not relevant
- f. Falling correctly in a collapsed scrum Yes No Not relevant
- g. Ruck techniques Yes No
- h. Entering the ruck Yes No
- i. Maul techniques Yes No
- j. Entering a maul Yes No
- k. Lineout techniques Yes No Not relevant
- l. Supporting in a lineout Yes No Not relevant
- m. Supporting a jumper at kick-off Yes No Not relevant

41. Did the player have a *regular coach* other than the head coach of the team in charge of his/her rugby development?

- Yes No

If Yes, then answer 41 (a- e)

a. Had the coach attended a SARU or WORLD RUGBY Level coaching course?

- Yes No

b. If Yes then give details of the coach's training:

c. Date of the most recent course attended

D	D	/	M	M	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

d. Had the coach attended a BokSmart Rugby Safety course?

Yes No

e. If Yes then provide the coach's BS-number: _____

42.

a. Did the player receive specific coaching for his/her position by a qualified coach?

Yes No

b. Did the player receive specific conditioning for his/her position by a qualified trainer?

Yes No

43. How long before the season did the player take part in pre-season strength and fitness conditioning?

- Never
- 1-2 weeks
- 3-4 weeks
- 1-2 months
- 2-3 months
- ≥ 3 months

44. How many training sessions did the player undertake each week during the pre-season training period? (Please give number of sessions or 0 if none was undertaken)

- a. Individual training sessions per week _____
- b. Team training sessions per week _____

45. On average, how many formal structured rugby training sessions did the player perform per week (at the time of injury)?

- Never
- 1
- 2
- 3
- More than 3

46. Other than the official team training sessions, what individual training did the player perform? Specify how often, the type of activity, average duration of each session, etc.

Activity	Intensity				How many times per week	Average duration (min)
	<i>Easy</i>	<i>Moderate</i>	<i>Tough</i>	<i>Very hard</i>		
_____	E	M	T	VH	_____	_____min
_____	E	M	T	VH	_____	_____min
_____	E	M	T	VH	_____	_____min
_____	E	M	T	VH	_____	_____min
_____	E	M	T	VH	_____	_____min

47. Did the player participate in any strength/resistance/weight training at least twice per week during the season?

- Yes
- No

If YES, then for how many years has the player been performing structured strength/resistance/weight training and specify to what degree?

48. Did the player participate in any neck strengthening exercises?

- Yes
- No

If YES, specify:

- Rarely, no more than 1 session per season
- Occasionally, less than 1 session per month
- Often, at least 1 session per month
- Regularly, at least 1 session per week

For more detail on *neck strengthening*, please complete the table below:

Activity	Intensity				How many times per week	Average duration (min)
	Easy	Moderate	Tough	Very hard		
_____	E	M	T	VH	_____	_____ min
_____	E	M	T	VH	_____	_____ min
_____	E	M	T	VH	_____	_____ min
_____	E	M	T	VH	_____	_____ min
_____	E	M	T	VH	_____	_____ min

49. Compared to the injured player's *normal* training regime, in the week preceding the injury, what was the training level?

a. Training Volume

- Lower
- The same
- Higher

b. Training Intensity

- Lower
- The same
- Higher

50. If injured in the scrum, then please answer the following:

a. How many scrum engagements did the injured player typically practice per session? _____

b. Compared to the injured player's *normal* training regime, in the week preceding the injury, what was the SCRUM SPECIFIC training level:

i. Training Volume

- Lower
- The same
- Higher

ii. Training Intensity

- Lower
- The same
- Higher

51. Did the player follow any special diet/eating plan before or during the season?

- Yes No

52. Did the player use any specific supplements before or during the season?

- Yes No

a. If YES, elaborate

SECTION F: PLAYING CONDITIONS (PRINT CLEARLY)

53. What was the weather like on the day of injury? Please tick all of the appropriate answers:

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> Hot | <input type="checkbox"/> Cold |
| <input type="checkbox"/> Dry | <input type="checkbox"/> Heavy Rain |
| <input type="checkbox"/> Light Rain | <input type="checkbox"/> Windy |
| <input type="checkbox"/> Overcast | <input type="checkbox"/> Other (Please specify): _____ |

a. Were the weather conditions on the day of the player's injury *typical* for the location and time of year?

- Yes No

b. If NO, what are the typical weather conditions for the location and time of year at which the injury occurred?

c. What was the temperature at the time of injury? (You can get this information from the local weather service)_____

54. On what type of surface did the injury occur?

- | | |
|--|--|
| <input type="checkbox"/> Wood e.g. gym floor | <input type="checkbox"/> Artificial turf – sand infill |
| <input type="checkbox"/> Tarmac or similar | <input type="checkbox"/> Dirt or sand |
| <input type="checkbox"/> Concrete | <input type="checkbox"/> Gravel |
| <input type="checkbox"/> Natural grass | <input type="checkbox"/> Other (Please specify):_____ |
| <input type="checkbox"/> Artificial turf – rubber infill | |

55. How hard was the field or surface?

- Soft
- Firm
- Very hard

56. How was the surface of the field?

- Slippery
- Medium grip
- Good, solid footing (hard grip)

57. What was the condition of the playing surface?

- a. Even
 - Flat and rough
 - Flat and smooth

- b. Uneven
 - Sloping and rough
 - Sloping and smooth

58. Does the player feel that the field condition contributed towards the injury?

- Yes
- No

59. If answered YES, please specify

60. What type of footwear was the player using at the time of injury?

- None
- Trainers/tekkies
- Studded boots
- Other (Please specify): _____

61. If wearing studded boots, please tick all applicable answers below:

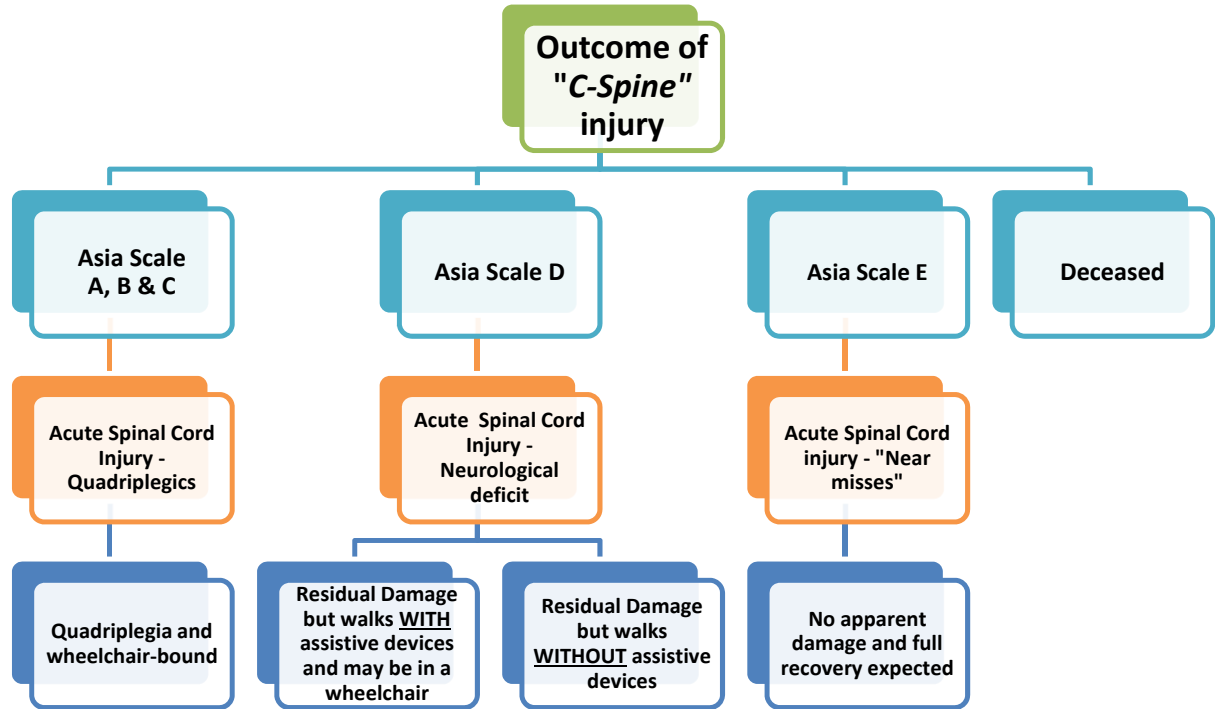
- Brand new
- Worn in
- Old/damaged
- Short studs
- Long studs
- Multi studs
- Six studs
- Other (Please specify): _____

62. In the player's opinion, what was the main cause of his/her injury?

63. Does the player have any recommendations to prevent others from sustaining a similar injury?

SECTION G: OUTCOME OF INJURY (PRINT CLEARLY)

**Outcome of Injury Classification Matrix
for Cervical Spinal Cord Injuries (C1-C7):**



64. What was the initial hospital-based *diagnosis*?

- Deceased
 - A fatal spinal cord injury
 - A fatal head injury
 - Cardiac event
 - Other e.g. stroke: _____

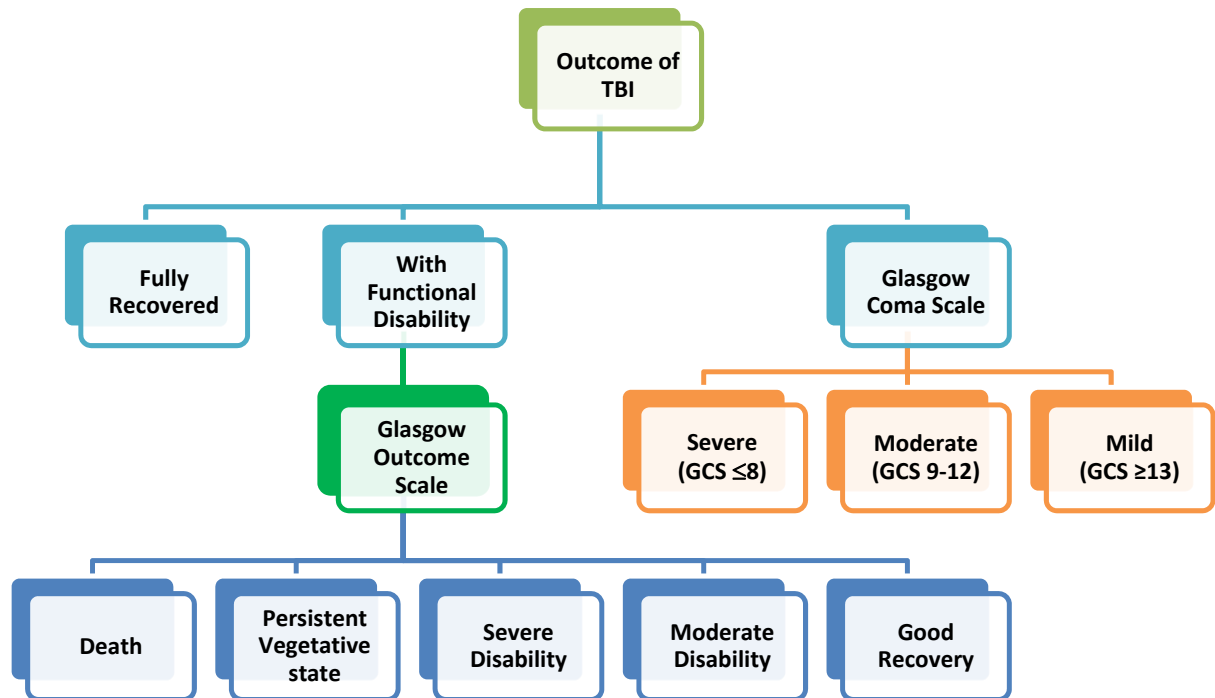
- Non-fatal Spinal Cord Injury
 - Quadriplegia and Wheelchair bound
 - Potential catastrophic injury with recovery (residual damage but walks with assistive devices and may be in a wheelchair)
 - Potential catastrophic injury with recovery (residual damage but walks without assistive devices)
 - No apparent residual damage and full recovery expected

- Head injuries (see Question 66)
 - Fully recovered
 - With disability

65. Asia Impairment Scale for Cervical Spinal Cord injured players at time of diagnosis

- A – Complete: no motor or sensory function is preserved in the sacral segments S4-S5
- B – Incomplete: sensory but not motor function is preserved below the neurological level, and includes the sacral segments S4-S5
- C – Incomplete: motor function is preserved below the neurological level, and more than half of key muscles below the neurological level have a muscle grade less than 3
- D – Incomplete: motor function is preserved below the neurological level and at least half of key muscles below the neurological level have a muscle grade of 3 or more
- E – Normal: motor and sensory function are normal

Outcome of Injury Classification Matrix
for Head or TBI Injuries



66. Glasgow Coma Scale (GCS) for Head or Brain (TBI) injured players at time of diagnosis:

- Mild (GCS \geq 13) – loss of consciousness and/or confusion and disorientation was shorter than 30 minutes
- Moderate (GCS 9-12) – loss of consciousness >30 minutes; physical or cognitive impairments that may or may not resolve; benefit from rehabilitation
- Severe (GCS \leq 8) – Coma; unconscious state; no meaningful response; no voluntary activities

67. Glasgow Outcome Scale (GOS) for Head or Brain (TBI) injured players at discharge:

- Death
- Persistent Vegetative state – A vegetative state that lasts for longer than 1 month. A vegetative state consists of sleep-wake cycles, arousal but no interaction with the environment and no localised response to pain
- Severe Disability (conscious but disabled) – patient depends on others for daily support due to mental or physical disability or both
- Moderate disability (disabled but independent) – patient is independent as far as daily life is concerned. The disability found includes varying degrees of dysphasia, hemiparesis, ataxia, as well as intellectual and memory deficits and personality changes
- Good recovery – Resumption of normal activities even though there may be minor neurological or psychological deficits

SECTION H: PLAYER'S MEDICAL HISTORY (PRINT CLEARLY)

68.

a. Did the player suffer from any medical conditions or illnesses that interrupted their training or match play in the week prior to the injury?

- Yes No

b. If YES, then describe the conditions/illnesses:

69.

a. Does the player have any long-term medical conditions or illnesses that may be relevant to the injury e.g. epilepsy, diabetes?

Yes No

b. If YES, then describe the conditions/illnesses:

70.

a. Does the player have a history of “stinger” (also known as burner, nerve pinch and brachial plexus injuries)?

Yes No

b. If YES, then describe the history:

71.

a. Had the player ever sustained a previous *neck/spinal injury* before?

Yes No

b. If YES, then please provide details of the nature and circumstances of the previous neck/spinal injury:

c. Had the player ever sustained a previous *SIGNIFICANT neck/spinal* injury (that is requiring hospital admission or scans (MRI or CT scan), with prolonged symptoms for over 1 month, associated with arm symptoms or preventing play for more than 2 weeks):

Yes No

d. If YES, then please provide details of the nature and circumstances of the previous SIGNIFICANT neck/spinal injury:

e. Had the player fully recovered from the previous SIGNIFICANT neck/spinal injury before starting the match/training session in which the current injury was sustained?

Yes No

f. Did the player receive treatment for the previous neck/spinal injury?

Yes No

g. Briefly describe the treatment received:

72.

a. Had the player ever sustained a previous *head/brain/concussion* injury before?

Yes No

b. If YES, then please provide details of the nature and circumstances of the previous head/brain/concussion injury:

c. Had the player ever sustained a previous SIGNIFICANT head/brain/concussion injury (with symptoms lasting more than 3 weeks or requiring hospital admission or scans (MRI or CT scan)):

Yes No

d. If YES, then please provide details of the nature and circumstances of the previous SIGNIFICANT head/brain/concussion injury:

e. Had the player fully recovered from the previous SIGNIFICANT head/brain/concussion injury before starting the match/training session in which the current injury was sustained?

Yes No

f. Did the player receive treatment for the previous SIGNIFICANT head/brain/concussion injury?

Yes No

g. Briefly describe the treatment received:
