

REGULATION 10. MEDICAL

10.1 Concussion¹

- 10.1.1 A Concussion must be taken extremely seriously. Players suspected of having concussion or diagnosed with concussion must be removed from the field of play and take no further part in the Match or training.
- 10.1.2 Players suspected of having concussion or diagnosed with concussion must go through a graduated return to play protocol described in the IRB Concussion Guidelines (available on www.irbplayerwelfare.com).
- 10.1.3 The IRB Concussion Guidelines denote the highest threshold for adolescents and children, which must be strictly adhered to.
- 10.1.4 The IRB Concussion Guidelines shall be updated from time to time in accordance with best medical practice and as approved by the Executive Committee.

10.2 Local Anaesthetic

- 10.2.1 A player may not receive local anaesthetic on Match day unless it is for the suturing of bleeding wounds or for dental treatment administered by an appropriately qualified medical or dental practitioner.

¹ Concussion is a complex process caused by trauma that transmits force to the brain either directly or indirectly and results in temporary impairment of brain function. Its development and resolution are rapid and spontaneous. A Player can sustain a concussion without losing consciousness. Concussion is associated with a graded set of clinical signs and symptoms that resolve sequentially. Concussion reflects a functional rather than structural injury and standard neuro-imaging is typically normal.

