



NZC Concussion Substitute Guidelines

30 September 2021

Definition:

Concussed Player – a player who received a direct impact to the head region and the signs and symptoms are suggestive of a suspected concussion. The diagnosis of concussion can only be made by a medical doctor.

Process

If the relevant Major Association Team Physio formally notifies the Match Referee or Match Manager of the diagnosis of a player with suspected concussion (Concussed Player), then a Concussion Substitute may be activated to take the place of the Concussed Player for the remainder of the match in accordance with this First Class Playing Condition 51.

Nominated 12th

- I. In the event of a Concussion Substitute being required this will be the nominated 12th at the time of the toss, irrespective of whether they are a batter or a bowler.
- II. If a team travels with 13 players, or if the home MA team has a squad of more than 12 players present at the match, those players cannot become a Concussion Substitute. It must be the nominated 12th.
- III. There will only be one Concussion Substitute allowed per innings.
- IV. The nominated 12th can take the field as a normal 12th whilst the SCAT 3 test is taking place.
- V. If the nominated 12th becomes the Concussion Substitute and its team has 13 players, then the 13th player will become the 12th.
- VI. If a team does not have 13 players and their nominated 12th has become the Concussion Substitute then normal 12th duties will need to be performed by someone else (e.g. similar to what would happen if a team only travelled with 12 players and the 12th fielded).

Role of the MA Team physio

The written SCAT 5 test as per playing condition 51.2 (c) will be carried out by the MA Team Physio. This is a 15-minute test that gives a baseline of the signs and symptoms of a suspected concussion. Irrespective of the results of the SCAT 5 test, the physio will ring a doctor for a consultation and to explain what happened. The doctor may conclude it is a suspected concussion at which point the Concussion Substitute can enter the match as per the playing conditions.

If the doctor concludes it is not a suspected concussion, then a Concussion Substitute will not be necessary and the player may re-enter the match.



Doctor Availability

In a short form game, there may be an issue with the availability of a doctor to confirm a suspected concussion.

If the MA Team Physio cannot contact a doctor, or the match is at a stage where the Concussion Substitute is needed to play a part in the match, NZC, MA CEO's and NZCPA agree that the MA Team Physio will err on the side of caution and concussion will be suspected.

Scoring

For the purposes of scoring, the Concussion Substitute will be entered as an additional batter and their innings will be considered separate to the innings of the Concussed Player (who will remain "Retired – Not out"). However, the fielding side still only needs to take 10 wickets to close the batting innings.

Player Welfare

Player welfare is paramount. The amendments to the playing conditions and associated guidelines are to protect the player in the event of a suspected concussion.