ADELAIDE UNIVERSITY FOOTBALL CLUB INC.

AUFC MEDICAL AND PHYSIO GUIDELINES - 2023

Have you been injured?

Please follow this document to ensure you are looked after and it will not cost you an arm and a leg.

Download this QR Code to take you to an electronic copy of this document.

1. Major Injures

Major or severe head, chest, abdominal, pelvis, limb and all possible spinal injuries should be sent directly to a major public hospital such as the RAH. This may require a 000 SA Ambulance call.

2. Medical Doctor

“Sportsmed” (AUFC gold sponsor)

sportsmed

Please take your medicare card and your private health insurance card with you

32 Payneham Rd, Stepney

Saturday 8am - 2pm and Sunday 10am - 2pm at the “walk in injury clinic “
No appt necessary

On weekends injured players will be able to access bulk billed medical service at the “walk in injury clinic”. There is a branch of Jones Radiology medical imaging on the Stepney site and will refer AUFC players there.

Monday – Friday 8am - 6pm
By appt only. Phone 8130 1222
Bulk billed medical consults with Dr Damian Newberry and Dr. Jack Fuller only - this must be at Stepney by appointment.

In regards to the surgical side of things some Sportsmed surgeons will bulk bill and reduce gaps on surgery if required. Preferred orthopaedic surgeons for Blacks Players include Dr Justin Alexander, hip and knee surgeon, Dr Shahram Shahrokhi and foot and ankle surgeon Dr Tom Fisher all at Sportsmed.

If you find any barriers to receiving timely review at Sportsmed please contact AUFC Manager to follow up with Dr Damian Newberry directly.

3. Medical Imaging

“Jones Radiology” (AUFC silver Sponsor)

Jones Radiology

Please take your medicare card and your private health insurance card with you.

32 Payneham Rd, Stepney

Open weekends as well for some services such as referral from the injury clinic at Sportsmed (in the same building)

Medicare billable items will be bulk billed by Jones Radiology for AUFC players. Non medicare related items will be billed to the player.

Please ask the Sporstmed doctor to note on the xray request that you are a current AUFC player thus for bulk billing.

4. Physiotheraphy

“Therapia Sports & Spine Physiotherapy” (AUFC silver Sponsor)

Therapia Sports & Spine

Please take your private health insurance card with you.
Unit 46/81 Carrington St, Adelaide SA 5000
08 8246 6432
info@therapia.com.au
Opening Hours
Mon 8:00-20:00, Tue 8:00-19:00, Wed 8:00-20:00, Thu 8:00-18:30, Fri 8:00-17:30, Sat 7:30-12:30

Therapia ia a preferred provider of physiotherapy services for the Blacks. Therapia Physio and Pilates provide 20% reduction on their standard priced physiotherapy consultations at their practice by appointment only.

For physiotherapy to be claimed on AU Sport Insurance all physio services must first have a medical referral.

Book with AUFC A Grade player - Stefan Jankewicz

Stefan completed his Bachelor of Physiotherapy at the University of South Australia with first class honours. Stefan knows first-hand the significant role exercise can have in managing pain and minimising the risk of future injuries. He is passionate about assisting individuals to reach their full potential with a strong belief in hands on treatment, exercise prescription and self-management. Stefan has the knowledge and the skills to work with clients to deliver great outcomes through quality communication and education. He is currently playing football for Adelaide University in the amateur league and loves to keep fit by either running or trail hiking.

5. Physiotheraphy

“James Mills Physiotheraphy” (AUFC silver Sponsor)

Norwood Village Medical & Dental Centre

A ForHealth Practice

James is the AUFC A grade and high performance physiotherapist. Please take your private health insurance card with you.

Attends Tuesday, Thursday training, Sat Men’s A and B grade matches. James Mills is a preferred provider of physiotherapy for the Blacks.

Mobile 0423 760799. Text first as may be busy. Injured A squad players under his care will require his ok to be considered for selection.

Norwood Village Medical and Dental. 201-203 The Parade, Norwood. Call 8425 1333 for a booking Monday to Friday in office hours by appt only. 30% off for all Blacks Players.

https://www.norwoodvillagemedicalanddental.com.au/physio-allied-health/james-mills/

For physiotherapy to be claimed on AU Sport Insurance all physio services must first have a medical referral.

6. Player Insurance

Please note; AUFC cannot cover the financial shortfalls for treatments. Private Health cover is highly recommended.

AU Sport & Fitness Insurance requires that you are a paid up member at the time of injury. Playing without paying full subs is playing without any AUSF insurance. AUSF insurance covers only non-medicare items and possible loss of income to some extent.

For physio to be claimed on AUSF insurance all physio services must first have a medical referral.

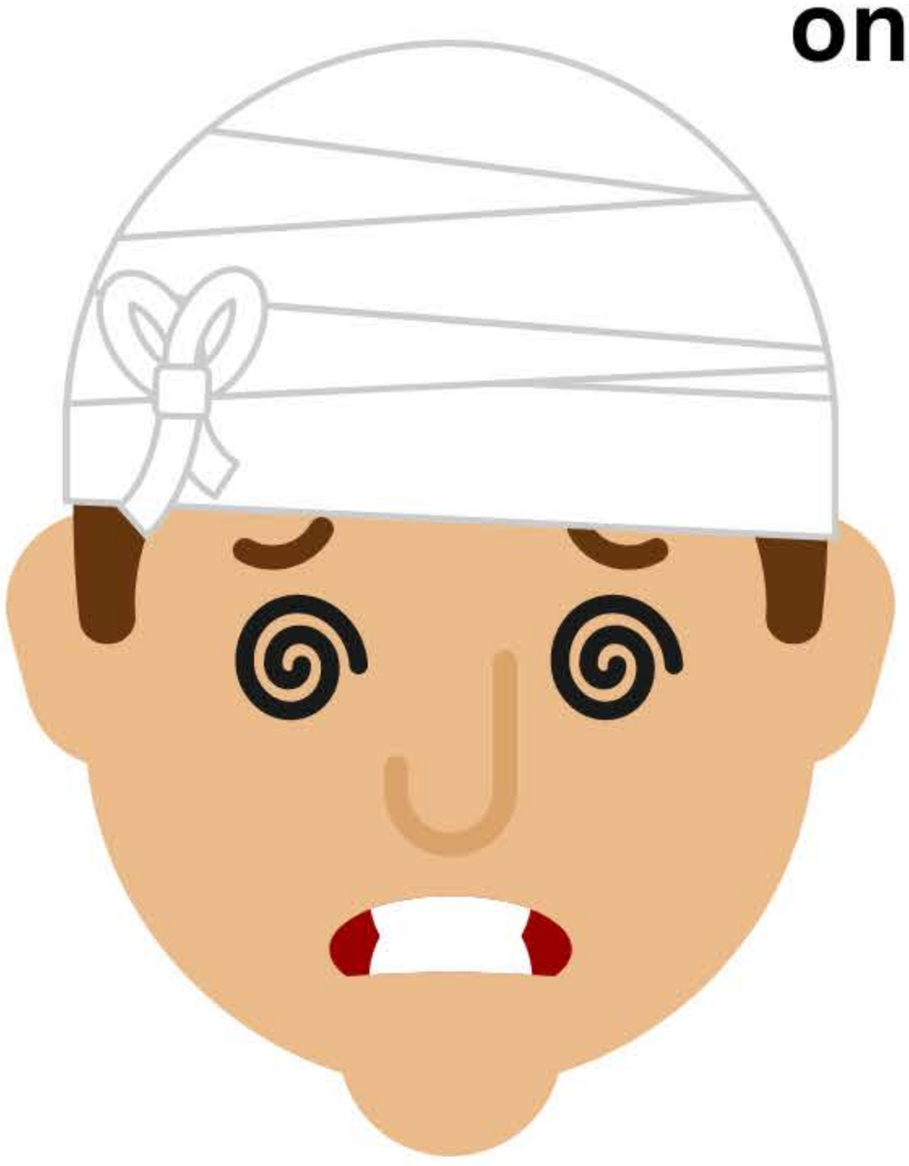
Refer to https://uniblacksfc.com.au/insurance-policies/ for more details

The Adelaide Footy League also offer insurance mainly for devasting injuries (no loss of income)

7. Concussion

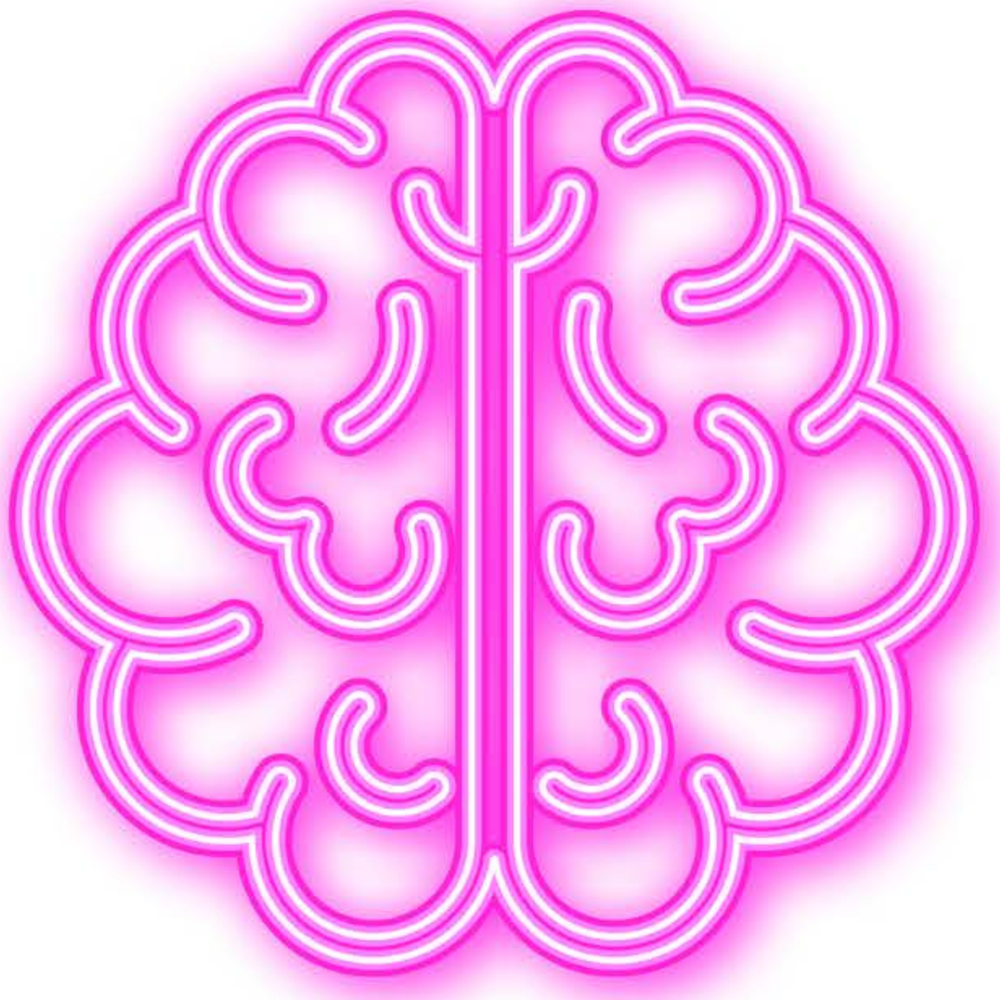
Refer https://uniblacksfc.com.au/aufc-player-support/
for more comprehensive information

See below for Concussion Recognition Tool 5 (CRT 5) on the day of injury



To highlight the most important step is that players who have been concussed, or likely to have been concussed, are required to make an appointment with their GP or Sportsmed (as above) to get a medical clearance to return to play. See the return to play schedule in the following pages.

The current AFL recommendation is that a minimum 12 days of non contact activity is required. Note also that the player must be completely asymptomatic even before returning to even non contact training.



CONCUSSION RECOGNITION TOOL 5©

To help identify concussion in children, adolescents and adults

Supported by

RECOGNISE & REMOVE

Head impacts can be associated with serious and potentially fatal brain injuries. The Concussion Recognition Tool 5 (CRT5) is to be used for the identification of suspected concussion. It is not designed to diagnose concussion.

STEP 1: RED FLAGS — CALL AN AMBULANCE

If there is concern after an injury including whether ANY of the following signs are observed or complaints are reported then the player should be safely and immediately removed from play/game/activity. If no licensed healthcare professional is available, call an ambulance for urgent medical assessment:

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

Remember:

- In all cases, the basic principles of first aid (danger, response, airway, breathing, circulation) should be followed.
- Assessment for a spinal cord injury is critical.
- Do not attempt to move the player (other than required for airway support) unless trained to so do.
- Do not remove a helmet or any other equipment unless trained to do so safely.

If there are no Red Flags, identification of possible concussion should proceed to the following steps:

STEP 2: OBSERVABLE SIGNS

Visual clues that suggest possible concussion include:

- Lying motionless on the playing surface
- Slow to get up after a direct or indirect hit to the head
- Disorientation or confusion, or an inability to respond appropriately to questions
- Blank or vacant look
- Balance, gait difficulties, motor incoordination, stumbling, slow laboured movements
- Facial injury after head trauma

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SCHEDULE 2: PHASES OF REST, RECOVERY AND RETURN TO PLAY FOLLOWING CONCUSSION

Focus	Goal	Requirements to move to next stage
Rest		
Rest	• Help speed up recovery	• Complete physical and cognitive rest in the first 24 – 48 hours
Recovery		
Symptom limited activity	• Two days of activities that do not provoke symptoms	• No concussion-related symptoms at rest or with physical or brain activity for at least 1 day and the player has successfully returned to work/school • The player should also have a medical clearance (e.g. physiotherapist, sports trainer, first aider) to confirm that the player has had no concussion-related symptoms for at least 1 day
Graded Loading – individual program		
Light / moderate aerobic exercise	• Light / moderate aerobic exercise (e.g. walking, jogging, cycling at slow to medium pace) • No resistance training	• Remain completely free of any concussion-related symptoms
Recovery day		
Sport-specific exercise	• Increased intensity (e.g. running at an increased heart rate) and duration of activity • Add sports specific drills (e.g. goal kick, stationary handball) • Commence light resistance training	• Remain completely free of any concussion-related symptoms • The player should also have a medical clearance (e.g. physiotherapist, sports trainer, first aider) to confirm that the player has had no concussion-related symptoms for at least 1 day
Recovery day		
Graded Loading – full team training		
Limited contact training	• Return to full team training – non-contact except drills with incidental contact (incl. tackling)	• Remain completely free of any concussion-related symptoms • Player confident to return to full contact training
Recovery day		
Clearance by a medical doctor is required before returning to the final full contact training session and competitive contact sport		
Full contact training	• Full team training	• Remain completely free of any concussion-related symptoms • Player confident to participate in a match
Recovery day		
Return to Play		

Note: Schedule 2 outlines the minimum process to follow in returning to play following a concussion. The earliest that a player may return to play (once they have successfully completed a graded loading program and they have obtained medical clearance) is on the 12th day after the day on which the concussion was suffered.

A more conservative approach is required if there is a lack of baseline testing and active medical practitioner oversight of each stage of the graded return to football. Section 4.4 of these guidelines also outlines the importance of a more conservative approach in certain situations including for children and adolescents, players with a history of concussion and where there is a recurrence of symptoms at any stage during the return to play program.