

# Serious injury Protocol

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## ARU Serious Injury Case Manager

The Australian Rugby Union (ARU) has appointed a Serious Injury Case Manager (SICM), to assist the club in managing traumatic injuries. The SICM is your first point of contact in the event of a serious injury to a players head or neck (ie: suspected spinal injury) or fatality and will provide a link between the club and the Australian Rugby Union (ARU).

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## ARU Protocol for Serious Injury

In the event of a serious injury to a players head or neck, or fatality, the following protocol is to be followed:

1. Provide immediate on-field medical care and arrange suitable transportation (ie. ambulance) to the hospital for the injured player.
2. Club representative to phone the ARU Serious Injury Case Manager (SICM) on the ARU Hotline 1800 036 156 in the event of a serious injury (ie: fatality or suspected spinal injury). This number is a call back service and your details will be passed on to the SICM who will call you back ASAP. Please have all details of the incident ready to pass on to the SICM.
3. SICM to establish initial contact with designated hotline caller to ascertain current status.
4. SICM notifies ARU General Manager (GM) of Community Rugby or designate of situation.
5. SICM or GM notifies designated representative responsible for zone/region/state union (eg: New South Wales Country Rugby - Executive Officer).
6. Designated representative responsible for zone/region/state is to establish one point of contact with the club/zone to coordinate situation (eg: President/Executive Officer).
7. SICM or GM to notify ARU Media Manager.
8. SICM, GM and representative responsible for the zone/region/state to establish a process of support as required.

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## Club Responsibilities

1. Provide immediate on-field medical care and arrange suitable transportation (ie. ambulance) to the hospital for the injured player.
2. Phone SICM on the ARU Hotline 1800 036 156 in the event of a serious injury (ie: fatality or suspected spinal injury), who in turn notifies ARU nominee.
3. Phone zone/regional/governing affiliate administration.
4. Accurately record any details and persons associated with the injury.
5. Notify next of kin in the case of a serious injury to a players head or neck.
6. In the case of a fatality, the Police will notify the next of kin.
7. Monitor players/match officials (referees, touch judges)/club officials (coaches, managers, runners, trainers, physiotherapists etc) for team debrief and/or personal counselling.
8. Complete the Serious Injury Report (on the back of this page) and provide copies within 48 hours of the injury occurring to:-
  - (1) Australian Rugby Union - **ARU Fax (02) 8005 5681** or Email [communityrugby@rugby.com.au](mailto:communityrugby@rugby.com.au)
  - (2) State Union -

<b>ACT &amp; Southern NSW Fax (02) 6260 8591</b>	<b>New South Wales Fax (02) 8354 3399</b>	<b>Northern Territory Fax (08) 8945 2060</b>
<b>Queensland Fax (07) 3856 6333</b>	<b>South Australia Fax (08) 8232 7102</b>	<b>Tasmania Fax (03) 6228 0855</b>
<b>Victoria Fax (03) 9529 7156</b>	<b>Western Australia Fax (08) 9387 2804</b>	
9. Complete the ARU Sports Injury Claim Form for all insurance claims. For more information please contact GOW-GATES Insurance Brokers (1800 811 371) or visit [www.rugby.com.au/communityrugby](http://www.rugby.com.au/communityrugby)

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## State Union Responsibilities

1. Follow up counselling requirements for the injured player, club personnel, referee and touch judges in conjunction with SICM and GM.
2. In conjunction with club officials, zone/regional/governing affiliate administration and ARU, handle all media contact. There should be one point of contact for media releases.
3. State Union representative to attend any inquest/event.
4. Assist (with club) any fund raising activities as required.

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## ARU Responsibilities

1. Provide support - (logistical and human) to the injured player, family, club, match officials and state union as required.
2. Monitor current and ongoing status of the injured player.
3. Complete analysis report of injury occurrence and record on the ARU Serious Injury Register.
4. Maintain ARU database.



# Serious injury Report

Fax or Email to ARU at (02) 8005 5681 / [communityrugby@rugby.com.au](mailto:communityrugby@rugby.com.au) and the State Union

## Serious Injury reports must be completed for the following injuries:

- Any head or neck injury, or any serious injury, that results in the admission of a player to an emergency department, hospital or after-hours medical centre.

## How to submit this report:

- Accurately record details about the player, their injury, the match and the designated club contact in the spaces below.
- Email or fax within 48 hours of the time of incident to both the Australian Rugby Union and the State Union.

## PLAYER (PLEASE PRINT CLEARLY)

Name (in full): \_\_\_\_\_ DOB:     /     /     Age: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone Number: (     ) \_\_\_\_\_  
Next of Kin: \_\_\_\_\_ Phone Number: (     ) \_\_\_\_\_  
Rugby Club: \_\_\_\_\_ Playing position: \_\_\_\_\_

## INJURY

Date and Time of Injury:     /     /     at     :     AM / PM     Scene of injury: Game  Training  Other   
Site of Injury:     Head  Neck  Back  Chest/Trunk  Other (specify): \_\_\_\_\_  
Type of Injury:     Concussion  Fracture  Dislocation  Serious Joint  Other (specify): \_\_\_\_\_  
Phase of Play:     Tackle  Ruck  Maul  Scrum  Lineout  Other (specify): \_\_\_\_\_  
Stage of Game:     1st Qtr  2nd Qtr  3rd Qtr  4th Qtr      Was the player wearing headgear? Yes  No   
Brief description of how the injury occurred: \_\_\_\_\_

Did the player leave the field?     Yes  No      Did the player return to the field?     Yes  No   
Who provided on-field treatment?     Doctor  First Aid  Team Official  Other (specify): \_\_\_\_\_  
Name of treatment provider: \_\_\_\_\_ Phone Number: (     ) \_\_\_\_\_  
What treatment was provided, if any? \_\_\_\_\_  
How did the player leave the field?     Stretcher  Ambulance  Helicopter  Other (specify): \_\_\_\_\_  
What hospital was the player taken to? \_\_\_\_\_ Phone number: (     ) \_\_\_\_\_  
Who accompanied the player? \_\_\_\_\_ Phone number: (     ) \_\_\_\_\_

## MATCH

Teams involved in the match: \_\_\_\_\_ V \_\_\_\_\_  
Competition: \_\_\_\_\_ State Union: \_\_\_\_\_ Grade: \_\_\_\_\_  
Referee: \_\_\_\_\_ Phone number: (     ) \_\_\_\_\_  
Venue Address: \_\_\_\_\_  
Field Condition: \_\_\_\_\_ Weather condition: \_\_\_\_\_  
How long was the game suspended for? \_\_\_\_\_ mins     Did the game restart? Yes  No   
Is there video footage of the game? Yes  No  (If yes, please retain until contacted by the ARU)

## CLUB CONTACT

Name (in full): \_\_\_\_\_ Position in the club: \_\_\_\_\_  
Contact Numbers: Home: (     )     Mobile: (     )     Work: (     ) \_\_\_\_\_  
Signature: \_\_\_\_\_ Date:     /     /     

## State Union Fax Numbers

**ACT & Southern NSW** Fax (02) 6260 8591  
**Queensland** Fax (07) 3856 6333  
**Victoria** Fax (03) 9529 7156

**New South Wales** Fax (02) 8354 3399  
**South Australia** Fax (08) 8232 7102  
**Western Australia** Fax (08) 9387 2804

**Northern Territory** Fax (08) 8945 2060  
**Tasmania** Fax (03) 6228 0855

Note, this report IS NOT an ARU Sports Injury Claim Form. For more information contact Gow Gates 1800 811 371 or visit [www.rugby.com.au/communityrugby](http://www.rugby.com.au/communityrugby)