



### Match Day Doctor rights and responsibilities

- a. Co-ordinate medical services delivered during a game
  - b. Support the Team Doctor with an injured player (if requested)
  - c. Adjudicate on blood injuries suitable to access temporary substitution (up to 15 minutes) - Regulation 15.2.1 (c)
  - d. Request an off-field HIA1 screen on a player if criteria defined in HIA procedures are identified
  - e. Enforce permanent removal from field of play if a player has signs as defined in the HIA procedures for permanent removal
  - f. Observe the HIA with the Team Doctor delivering the off-field HIA1 screen unless assigned this responsibility by the Team Doctor
  - g. Undertake HIA if the MDD is assigned the responsibility for undertaking a HIA by the Team Doctor. The MDD will complete the HIA and be responsible for deciding return to play unless there are simultaneous HIA s being completed
  - h. If the MDD is concerned regarding a return to play following an off-field HIA1 screen, this should be discussed with the Team Doctor. If an ongoing dispute persists, the MDD can request a repeat of the HIA before or after the player returns to play. The MDD does retain the right to unilaterally remove a head injured player from further game participation BUT this should only occur following exhaustive discussions and potential re-assessment between the MDD and Team Doctor has been undertaken.
  - i. Remove a player from further match participation in a game if indicated as per Regulation 15.2.1 (d) - If the nominated Match Day Doctor gives his opinion that a player should not continue playing on account of his injury, (whether such injury is a blood injury, head injury or otherwise) that player shall not be allowed to resume playing. Before making a final decision the MDD must discuss this decision with the Team Doctor so that every effort is made to reach a consensus decision on removal of the player from further game participation or allow a return to play. The opinion of the nominated Match Day Doctor shall be conveyed to the player's Union or its representative and it is then for that Union to decide whether or not a replacement shall be introduced.
  - j. Confirm that Team Doctors have completed a post-match, same-day HIA2 on all players removed permanently or temporarily with a head injury during a game
  - k. Confirm that Team Doctors are aware that all HIA paperwork is to be forwarded to the World Rugby Competition Co-ordinators each week including the post-match, same-day HIA2
  - l. Confirm World Rugby Heat Guidelines require implementation on days of extreme temperatures
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### Match Day Doctor game day checklist

#### PRE-MATCH

1. Meet with Rugby Services personnel on arrival and confirm stretcher access to medical room is possible.
2. Confirm all medical room equipment is available especially noting presence of AED, oxygen and spinal evacuation equipment either in medical room or in ambulance, and confirm that this equipment is in good working order. This task may be delegated to the Immediate Care lead if present
3. Confirm phone number for emergency hospital key contact is available.
4. Confirm that medical support staff, as agreed by the World Rugby Tournament Agreement, are in attendance 60 minutes prior to first match.
5. Confirm radiology services available during and after match if planned to be available.
6. Meet with Team Doctors, Match Officials (referees) and Match Commissioner to confirm:
  - Decisions regarding blood injuries that are allowed access to temporary substitution rests with MDD as from August 1 2013 (World Rugby Regulation 15.2.1.c).
  - The on-field signals to be used - four distinct signals.
  - The location where all HIAs will be undertaken (ideally this would be in the medical room but, if this is too distant from the field, another closer location to pitch side should be identified by the MDD and Team Doctors). **The Match Commissioner MUST be aware of the HIA location.**
  - If one or both of the Team Doctor(s) wishes to assign HIA duties to the MDD.
  - Who will be in charge of player evacuation if a catastrophic cervical spine injury is suspected (the decision regarding the person in command on the field lies with the Team Doctor).
7. Confirm with the Team Doctors the correct answers to the Maddocks Questions: who was the opposition in last match and what was the result of the last match (win or loss).
8. Confirm HIA forms and pens are available.
9. If the CSx app is in use, ensure all players from both teams are "synced" on the MDD ipad. It is preferable for the MDD to use their own iPad, if a team ipad is in use, ensure all passwords are available and preferably that Wifi access for the device is secured.
10. **Match Day Medical Team MUST undertake a practice cervical spine evacuation prior to the game using head blocks and triple immobilisation.**



### Match Day Doctor game day checklist

#### DURING THE MATCH

1. Support the Team Doctor with on field medical issues, IF requested. This may be delegated to the Immediate Care Doctor if available.
  2. As from August 1 2013, determine if a blood injury is suitable for a temporary replacement **up to 15 minutes**.
  3. Enforce current guidelines pertaining to a blood injury:
    - Suturing is completed in the designated medical room and not at the field side.
    - All blood stained apparel and dressings are replaced prior to the player returning to the field.
    - A player with a blood injury returns to play within 15 minutes of substitution. Failure to return within 15 minutes makes this substitution a permanent substitution. In determining the 15 minutes, half time is regarded as actual time and included in the 15 minute period.
    - Team Doctors are wearing glove(s) and are not using previously used towels or community ice bags to stem the flow of blood.
  4. Identify players who have the following signs and enforce permanent removal from further participation in the Game:
    - a) Tonic posturing
    - b) Convulsion
    - c) Confirmed loss of consciousness
    - d) Suspected loss of consciousness
    - e) Balance disturbance / ataxia
    - f) Player not orientated in time, place or person
    - g) Clearly dazed – eyes vacant, blank expression, wandering eyes
    - h) Definite confusion
    - i) Definite behavioural changes
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### Match Day Doctor game day checklist

#### DURING THE MATCH (CONTINUED)

5. Identify players who have the following signs, not identified by the Team Doctor or the Referee and request a HIA via the 4th Official (having discussed the case with the team doctor first):
  - a) Head injury where diagnosis not apparent
  - b) Possible behaviour changes
  - c) Possible confusion
  - d) Injury event witnessed with potential to result in a concussive injury
  - e) Other symptoms or signs suggesting a suspected concussion
6. Either complete HIA if responsibility assigned by Team Doctor or observe the HIA being completed by the Team Doctor for all players identified as having suspicious symptoms or signs.
7. If the Match Doctor believes a player should be removed from further game participation on account of an injury, this opinion MUST be discussed with the Team Doctor. If a dispute persists, the Match Day Doctor does have the authority under Regulation 15.2.1 (d) to stop this injured player from further participation in the game.
8. Confirm on each HIA1 form the decision regarding return to play.
9. Assume responsibility for the management of an injured player if referred by a Team Doctor. These duties may be delegated to a match day medical team lead. The MDD should liaise with the immediate care medical team to ensure appropriate management of serious injury.

***As from August 1 2013, the MDD has the ultimate authority to decide if a temporary substitution is required for a blood injury. This should only be undertaken AFTER discussion with the Team Doctor. If there is no MDD, then the referee is the decision maker (Regulation 15.2.1.c).***

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Concussion Management for Elite Level Match Day Medical Staff

## Match Day Doctor game day checklist

### POST-MATCH

1. Confirm with both Team Doctors if any post match medical services are required. This may be delegated to the Immediate doctor/lead if available.
  2. Confirm that all players who have undergone an off-field HIA1 screen during a game, irrespective of the result, have completed a "post-match, same-day" assessment using the World Rugby HIA2 form. It is the responsibility of the MDD to confirm that the Team Doctor has completed the HIA2 prior to leaving the stadium.
  3. If assigned by the Team Doctor, the MDD will complete the HIA2 on player(s) who have undergone an off-field HIA1 screen. The MDD in this situation will not be responsible for the remaining neurological assessment or clinical diagnosis.
  4. Confirm that the team physician has identified his/her diagnosis at the bottom of page 3 in the HIA2 form.
  5. If a dispute arises, the MDD is the final arbiter in determining if a player is physically capable of undertaking an anti-doping test.
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