

Appendix B) Baseline Testing

Each athlete is required to undergo annual baseline pre-season testing. Baseline testing assists with diagnosis of concussion and assessment of recovery, as well as providing historical information that is critical for concussion management decisions. The components of baseline testing are:

a) DETERMINATION OF RELEVANT CONCUSSION HISTORY (defined as follows):

- Concussed within the last 3 months
- Three or more concussions in the last 12 months
- Five or more career concussions
- Reduced impact threshold
- Any previous concussion complicated by psychological issues
- Any previous concussion with prolonged recovery (>21 days)

Note: Athletes with a relevant concussion history (as defined above) require a minimum 12 days for return to sport post-concussion, and clearance by telehealth with an Independent Concussion Consultant (ICC).

b) BASELINE SCAT6 SYMPTOM EVALUATION:

- Baseline ("trait" as opposed to "state") symptoms > 0 should not simply be accepted at face value, as the presence of baseline symptoms reduces the sensitivity of the symptom scale for concussion diagnosis and recovery.
- Further questioning is required, and if any baseline symptoms continue to be reported at > 0 severity, the SCAT 6 symptom evaluation should be repeated at least 24 hours later, following at least 24 hours rest from exercise.
- If trait symptoms are confirmed, then further review, investigation and treatment should be organised with the aim of complete symptom resolution.
- Non-zero baseline symptoms undermine the utility of the SCAT 6 symptom scale, with the following implications:
 - 1) In the setting of a normal HIA2 #1, there will be no option to perform HIA2 #2 with a view to training or competing on Day 1.
 - 2) In the setting of a normal HIA3, there will be no option for the accelerated 7-day return to sport pathway; minimum 12-day return to sport applies.

c) BASELINE SCAT6 COGNITIVE TESTING

- The cognitive component of the SCAT 6 (out of 50) includes orientation (out of 5), immediate memory (out of 30), digits backwards (out of 4), timed months in reverse order (out of 1) and delayed recall (out of 10).

d) BASELINE SCAT6 COORDINATION AND BALANCE TESTING

- The coordination and balance component includes modified BESS (or full SPC), timed tandem gait and dual task cognitive performance.

e) NEUROCOGNITIVE TEST – COGNIGRAM

- An annual baseline Cognigram is required, to facilitate accurate post-injury testing. This also enables identification of impairments that may appear over a career.

f) PARA-ATHLETE CONSIDERATIONS

- The Concussion in Para Sport Group Position Statement recommends baseline testing for para-athletes given the variable nature of an athlete's disability and the potential for atypical presenting signs/symptoms of concussion.
- Baseline testing should consider the impairment(s) of the athlete, and alternative or modified assessment measures should be used where appropriate.