

To all national football associations,  
and confederations

Circular no. 21

- 1. Temporary amendment to Law 3  
- extension**
  
- 2. Additional permanent  
“concussion substitutes”  
- trial**

Zurich, 18 December 2020

SEC/2020-C359/bru

Dear Sir or Madam,

At The IFAB Annual Business Meeting held remotely on 16 December, The IFAB Board of Directors (BoD) made decisions in relation to the **temporary amendment to Law 3 – The Players** and **trials of additional permanent “concussion substitutes” in the event of actual or suspected concussion.**

Confederations and national associations are kindly asked to take note of these decisions (as outlined below) and to pass the information on to the relevant competition organisers.

**1. Law 3 – The Players: extension of temporary amendment**

As outlined in circular no 19 (8 May 2020) and 20 (15 July 2020), the main reason for the introduction and extension of the temporary amendment (giving top competitions the option of allowing teams to use up to five substitutes) was the impact of COVID-19 on football. The IFAB's ongoing review, which has included stakeholder feedback and an analysis of the impact of the global pandemic on competition calendars, has shown that the reasons for the temporary amendment remain valid and, as a result, the BoD has **extended this temporary amendment to domestic and international club competitions scheduled to be completed by 31 December 2021 and national-team competitions scheduled to be completed by 31 July 2022.**

**2. Law 3 – The Players: trials of additional permanent “concussion substitutes”**

Following extensive consultation related to finding ways to improve the in-game management of possible neurological head injuries in football matches, the BoD has taken careful note of the recommendations from meetings of both The IFAB Football and Technical Advisory Panels and the Concussion Expert Group (which consists of medical concussion experts, team doctors, players/coaches, and refereeing and legal/Laws of the Game experts).

Based on these recommendations, the BoD strongly agrees that, where there is any suspicion about a player having been concussed, the player should be protected by being “permanently” removed from the match and to facilitate this, the player's team should not suffer a numerical disadvantage as a result of prioritising the player's welfare.

Consequently, the BoD has approved two trials with “concussion substitutes” because such an approach:

- prevents a player sustaining another concussion in the match – multiple concussions during the same game could eventually be fatal (“second-impact syndrome”);
- sends a strong message – “if in doubt, sit them out” – that maximises player welfare;
- allows the player to be replaced, so there is no numerical/tactical disadvantage when prioritising player welfare;
- reduces pressure on medical personnel to make a quick decision;
- is simple to operate and applicable at all levels of the game, including lower down the football pyramid, where there are usually no doctors or medically qualified staff; and
- is consistent with recommendations given by expert panels (e.g. the Concussion in Sport Group).

Use of a “concussion substitute” would operate in conjunction with other protocols, including delaying the restart of play for up to three minutes for an on-field assessment by the team's medical personnel (if present/available). In addition, while this is beyond the scope of the Laws of the Game, the implementation of return-to-training and return-to-play protocols for after the match is encouraged.

### **Participation in trials**

Both trials will be open to all interested competitions at any level; confederations and national FAs (on behalf of the competitions under their auspices) must apply to The IFAB and FIFA for permission to take part in either trial, which will only be given to competitions using the official protocols and agreeing to submit requested feedback.

### **Trial protocols**

An outline of the two protocols is given below. Those wishing to take part in the trials can request further information, including the detailed protocols and feedback requirements. For the purpose of the trials with additional permanent “concussion substitutes”, the following protocols must be used in their entirety. No variations are allowed except as outlined in these protocols.

## **Protocol A**

### *Principles*

- Each team is permitted to use a maximum of one “concussion substitute” in a match.
- A “concussion substitution” may be made regardless of the number of substitutes already used.
- In competitions in which the number of named substitutes is the same as the maximum number of substitutes that can be used, the “concussion substitute” can be a player who has previously been substituted.

### *Procedure*

- The substitution procedure operates in accordance with Law 3 – The Players (*except as outlined otherwise below*).
- A “concussion substitution” may be made:
  - immediately after a concussion occurs or is suspected;
  - after an initial three-minute on-field assessment, and/or after an off-field assessment; or
  - at any other time when a concussion occurs or is suspected (including when a player has previously been assessed and has returned to the field of play).
- If a team decides to make a “concussion substitution”, the referee/fourth official is informed, ideally by using a substitution card/form of a different colour.
- The injured player is not permitted to take any further part in the match (including kicks from the penalty mark) and should, where possible, be accompanied to the changing room and/or a medical facility.

### *Substitution opportunities*

- Making a “concussion substitution” is separate from any limit on the number of “normal” substitution opportunities.
- However, if a team makes a “normal” substitution at the same time as a “concussion substitution”, this will count as one of its “normal” substitution opportunities.

## **Protocol B**

### *Principles*

- Each team is permitted to use a maximum of two “concussion substitutes” in a match.
- A “concussion substitution” may be made regardless of the number of substitutes already used.
- In competitions in which the number of named substitutes is the same as the maximum number of substitutes that can be used, the “concussion substitute” can be a player who has previously been substituted.
- When a “concussion substitute” is used, the opposing team then has the option of using an “additional” substitute for any reason.

### *Procedure*

- The substitution procedure operates in accordance with Law 3 – The Players (*except as outlined otherwise below*).
- A “concussion substitution” may be made:
  - immediately after a concussion occurs or is suspected;
  - after an initial three-minute on-field assessment, and/or after an off-field assessment; or
  - at any other time when a concussion occurs or is suspected (including when a player has previously been assessed and has returned to the field of play).
- If a team decides to make a “concussion substitution”, the referee/fourth official is informed, ideally by using a substitution card/form of a different colour.
- The injured player is not permitted to take any further part in the match (including kicks from the penalty mark) and should, where possible, be accompanied to the changing room and/or a medical facility.
- The opposing team is informed by the referee/fourth official that it now has the option of using an “additional” substitute.
- This option may be used concurrently with the “concussion substitution” made by the opposing team or at any time thereafter (*except as outlined otherwise by the Laws of the Game*).

### *Substitution opportunities*

- Making a “concussion substitution” is separate from any limit on the number of “normal” substitution opportunities.
- However, if a team makes a “normal” substitution at the same time as a “concussion substitution”, this will count as one of its “normal” substitution opportunities.

