

Cambridge National

Sport Science

R180/01: Reducing the risk of sports injuries and dealing with common medical conditions

Level 1/2 Cambridge National Certificate/Award

Mark Scheme for January 2024

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This mark scheme is published as an aid to teachers and students, to indicate the requirements of the examination. It shows the basis on which marks were awarded by examiners. It does not indicate the details of the discussions which took place at an examiners' meeting before marking commenced.

All examiners are instructed that alternative correct answers and unexpected approaches in candidates' scripts must be given marks that fairly reflect the relevant knowledge and skills demonstrated.

Mark schemes should be read in conjunction with the published question papers and the report on the examination.

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MARKING INSTRUCTIONS

PREPARATION FOR MARKING RM ASSESSOR

1. Make sure that you have accessed and completed the relevant training packages for on-screen marking: *RM Assessor Assessor Online Training*; *OCR Essential Guide to Marking*.
2. Make sure that you have read and understood the mark scheme and the question paper for this unit. These are posted on the RM Cambridge Assessment Support Portal <http://www.rm.com/support/ca>
3. Log-in to RM Assessor and mark the **required number** of practice responses (“scripts”) and the **number of required** standardisation responses.

YOU MUST MARK 5 PRACTICE AND 10 STANDARDISATION RESPONSES BEFORE YOU CAN BE APPROVED TO MARK LIVE SCRIPTS.

MARKING

1. Mark strictly to the mark scheme.
2. Marks awarded must relate directly to the marking criteria.
3. The schedule of dates is very important. It is essential that you meet the RM Assessor 50% and 100% (traditional 40% Batch 1 and 100% Batch 2) deadlines. If you experience problems, you must contact your Team Leader (Supervisor) without delay.
4. If you are in any doubt about applying the mark scheme, consult your Team Leader by telephone or the RM Assessor messaging system, or by email.
5. **Crossed Out Responses**
Where a candidate has crossed out a response and provided a clear alternative then the crossed out response is not marked. Where no alternative response has been provided, examiners may give candidates the benefit of the doubt and mark the crossed out response where legible.

Rubric Error Responses – Optional Questions

Where candidates have a choice of question across a whole paper or a whole section and have provided more answers than required, then all responses are marked and the highest mark allowable within the rubric is given. Enter a mark for each question answered into RM assessor, which will select the

highest mark from those awarded. *(The underlying assumption is that the candidate has penalised themselves by attempting more questions than necessary in the time allowed.)*

Multiple Choice Question Responses

When a multiple choice question has only a single, correct response and a candidate provides two responses (even if one of these responses is correct), then no mark should be awarded (as it is not possible to determine which was the first response selected by the candidate).

When a question requires candidates to select more than one option/multiple options, then local marking arrangements need to ensure consistency of approach.

Contradictory Responses

When a candidate provides contradictory responses, then no mark should be awarded, even if one of the answers is correct.

Short Answer Questions (requiring only a list by way of a response, usually worth only **one mark per response**)

Where candidates are required to provide a set number of short answer responses then only the set number of responses should be marked. The response space should be marked from left to right on each line and then line by line until the required number of responses have been considered. The remaining responses should not then be marked. Examiners will have to apply judgement as to whether a 'second response' on a line is a development of the 'first response', rather than a separate, discrete response. *(The underlying assumption is that the candidate is attempting to hedge their bets and therefore getting undue benefit rather than engaging with the question and giving the most relevant/correct responses.)*

Short Answer Questions (requiring a more developed response, worth **two or more marks**)

If the candidates are required to provide a description of, say, three items or factors and four items or factors are provided, then mark on a similar basis – that is downwards (as it is unlikely in this situation that a candidate will provide more than one response in each section of the response space.)

Longer Answer Questions (requiring a developed response)

Where candidates have provided two (or more) responses to a medium or high tariff question which only required a single (developed) response and not crossed out the first response, then only the first response should be marked. Examiners will need to apply professional judgement as to whether the second (or a subsequent) response is a 'new start' or simply a poorly expressed continuation of the first response.

6. Always check the pages (and additional objects if present) at the end of the response in case any answers have been continued there. If the candidate has continued an answer there, then add a tick to confirm that the work has been seen.
7. Award No Response (NR) if:
 - there is nothing written in the answer space

Award Zero '0' if:

















- anything is written in the answer space and is not worthy of credit (this includes text and symbols).

Team Leaders must confirm the correct use of the NR button with their markers before live marking commences and should check this when reviewing scripts.

8. The RM Assessor **comments box** is used by your team leader to explain the marking of the practice responses. Please refer to these comments when checking your practice responses. **Do not use the comments box for any other reason.**
If you have any questions or comments for your team leader, use the phone, the RM Assessor messaging system, or e-mail.
9. Assistant Examiners will send a brief report on the performance of candidates to their Team Leader (Supervisor) via email by the end of the marking period. The report should contain notes on particular strengths displayed as well as common errors or weaknesses. Constructive criticism of the question paper/mark scheme is also appreciated.
10. For answers marked by levels of response:
 - a. **To determine the level** – start at the highest level and work down until you reach the level that matches the answer
 - b. **To determine the mark within the level**, consider the following

Descriptor	Award mark
On the borderline of this level and the one below	At bottom of level
Just enough achievement on balance for this level	Above bottom and either below middle or at middle of level (depending on number of marks available)
Meets the criteria but with some slight inconsistency	Above middle and either below top of level or at middle of level (depending on number of marks available)
Consistently meets the criteria for this level	At top of level

11. Annotations

Annotation	Meaning
	Tick
	Cross
	Benefit of doubt
	Irrelevant
	Repetition
	Too vague
	Knowledge and understanding
	Development
	Example
	Sub-max for question reached
	Level 1
	Level 2
	Level 3
	Unclear
	Blank Page
	Used for NR (no response)

Highlighting is also available to highlight any particular points on the script.

[The following questions should be annotated with ticks to show where marks have been awarded in the body of the text question 1-14]

Question			Answer	Mark	Guidance									
1			<p>Three marks for any three of:</p> <p>1. Abrasions / grazes 2. Cuts / lacerations 3. Contusions / bruises 4. Blisters 5. Burns</p>	3	<p>Do not accept: Scrape / tear = VG Open fracture = VG</p> <p>Accept: Astroburn = BOD (Point 1) Sunburn = 1 (Point 5)</p>									
2	(a)		<p>One mark for:</p> <p>On-field assessment routine / injury assessment / identify type of injury / procedure used to see if it is safe for a player to continue with the sport / see how severe the injury is / helps prevent further injury / identify if further medical help or assistance is needed</p>	1	<p>Do not accept: Response to injury = X (in question) See if person is ok / assist the person / see if person is conscious or unconscious = VG Form of treatment = VG</p> <p>Accept: Assessment of casualty = BOD</p>									
2	(b)		<p>Three marks for:</p> <table border="1"><tr><td>Supervision</td><td>Touch</td><td>Acute</td></tr><tr><td>Plan</td><td>Safety</td><td>Protection</td></tr><tr><td>Active</td><td>Stretch</td><td>Look</td></tr></table>	Supervision	Touch	Acute	Plan	Safety	Protection	Active	Stretch	Look	3	
Supervision	Touch	Acute												
Plan	Safety	Protection												
Active	Stretch	Look												

Question			Answer	Mark	Guidance
3			Three marks for: 1. Arousal 2. Anxiety 3. Aggression	3	Do not accept: Anger = VG for aggression (Point 3) Accept: Attitude = 1
4			Two marks for any two of: 1. Shivering 2. Blue or grey lips / blue or pale skin 3. Slurred or mumbled speech 4. Confusion / memory loss 5. Breathing is slow / heavy / shallow or shortness of breath 6. Weak pulse / faster heart rate than normal 7. Cold / dry skin 8. Tiredness / drowsiness / exhaustion / lack of energy 9. Loss of coordination / clumsiness / stumbling 10. Numbness	2	Accept: other relevant symptoms: https://www.nhs.uk/conditions/hypothermia/ Do not accept: Headaches = VG Shaking = VG Cold (on its own) = VG Frozen / black fingers = VG Hard to move = VG Skin a different colour = VG Accept: Purple lips / skin = BOD (Point 2) Cold body parts / cold body temperature = BOD (Point 7) Loss of feeling = BOD (Point 10)

Question			Answer	Mark	Guidance
5			Three marks for any three of: <ol style="list-style-type: none"> 1. Experience 2. Weight 3. Fitness levels / components of fitness 4. Technique / ability / skill level 5. Nutrition or diet / hydration 6. Medical conditions / health 7. Sleep 8. Previous or recurring injuries 9. Psychological factors 	3	Do not accept: Age or gender (in the question) = X Size / height = VG Knowledge (on its own) = VG Accept: Expertise = BOD (Point 4) Examples of components of fitness e.g. strength / flexibility = 1 (Point 3) Examples of medical conditions e.g. asthma = 1 (Point 6) Examples of injuries e.g. broken arm = 1 (Point 8) Examples of psychological factors e.g. aggression / stress / anxiety = 1 (Point 9)
6			Four marks for: <ol style="list-style-type: none"> 1. Pulse raising 2. Mobility 3. Dynamic stretching 4. Skill rehearsal / skill phase / skill drill 	4	Do not accept: examples of the component e.g. jogging = VG (question asks for <u>components</u>) Skill (on its own) = VG (Point 4) Accept: Dynamic movement = BOD Stretching = BOD (Point 3) Skill practice = BOD (Point 4)

Question			Answer	Mark	Guidance
7			One mark for: Tennis elbow	1	
8	(a)		One mark sub-max for medical condition: Diabetes	1	
	(b)		One mark sub-max for symptom: 1. Urinating often / going to the toilet lots 2. Extreme tiredness / fatigue / low energy / weakness / drowsy 3. Weight loss / weight gain 4. Cuts / sores a long time to heal 5. Headaches / feeling dizzy / light headed / feeling faint 6. High / low <u>blood</u> sugar levels 7. Odd behaviour / could be mistaken for 'drunkenness' 8. Confusion / memory loss 9. Pale / cold / sweaty skin / sweating 10. Nausea / vomiting / sickness 11. Blurred vision 12. Irritating skin / tingling skin / itchy 13. Abdominal pain / feeling hungry 14. Trembling / shaking / convulsions 15. Red or swollen gums 16. Shallow or rapid breathing / a higher heart rate than usual 17. Fruity breath odour	1	Do not accept: increased thirst for diabetes symptom (b) (in question) = X Accept: other relevant symptoms https://www.nhs.uk/conditions/diabetes/ https://www.diabetes.co.uk/diabetes-symptoms.html Accept: Tiredness = BOD (Point 2) Fainting = BOD (Point 5) Unconscious = BOD (Point 2) Do not accept: Low or high blood pressure = VG High / low sugar levels = VG (Point 6)

Question		Answer	Mark	Guidance
	(c) and (d)	<p>Two marks sub-max for symptoms:</p> <ol style="list-style-type: none"> 1. Feeling thirsty 2. Tiredness / fatigue / low energy / weakness / drowsy 3. Urine that is dark / yellow / brown or strong smelling 4. Infrequent urination 5. Dry mouth or throat or lips 6. Headaches / dizzy / light headed / feeling faint 	2	<p>Accept: other relevant symptoms https://www.nhs.uk/conditions/dehydration/ Sunken eyes / impaired vision = BOD</p> <p>Do not accept: Nausea = VG Poor concentration = BOD (Point 2) Fainting = BOD (Point 6)</p>
	(e)	<p>One mark sub-max for treatment:</p> <ol style="list-style-type: none"> 1. Drink plenty of water or fluids 2. Rehydration sachets / tablets / powder 		<p>Do not accept: sachets / tablets / powder on its own for = VG for (e)</p> <p>Accept: Drinking / water = BOD Rehydration / hydration = 1</p>

Question			Answer	Mark	Guidance
9	(a)		<p>One mark for:</p> <p>(b) Lifestyle changes</p>	1	
9	(b)		<p>Three marks for:</p> <p>1. (Emergency personnel) – first aiders / coach / paramedic / doctor / physiotherapist</p> <p>2. (Emergency communication) – call emergency services / 999 / NHS Direct / 111 OR next of kin contact details / emergency contact numbers</p> <p>3. (Emergency equipment) – first aid kit / defibrillator / evacuation chair / nebulisers / ice pack</p>	3	<p>Do not accept:</p> <p>Parents = VG (Personnel)</p> <p>911 = VG (Communication)</p> <p>Parents etc (on its own) = VG (Communication)</p> <p>Emergency services (on its own) = VG (Communication)</p> <p>Chair = VG (Equipment)</p> <p>Ambulance (on its own) = VG (All components)</p> <p>Accept:</p> <p>Medical team / someone with medical experience / medically trained = BOD (Personnel)</p> <p>Official / teacher = BOD (Personnel)</p> <p>Call ambulance = BOD (Communication)</p> <p><u>Call / contact</u> parents / parent contact number = BOD (Communication)</p> <p>Mobile / phone / walkie-talkie / radio = BOD (Communication)</p> <p>Evac chair = 1 (Equipment)</p> <p>Accept: other alternative examples</p>

Question		Answer	Mark	Guidance						
10	(a)	<p>Two marks for components and two marks for examples:</p> <table><tr><th>Cool down component</th><th>Practical example</th></tr><tr><td>Pulse lowering</td><td>Gentle jogging or walking around the pitch</td></tr><tr><td>Stretching</td><td>Maintenance Static PNF</td></tr></table>	Cool down component	Practical example	Pulse lowering	Gentle jogging or walking around the pitch	Stretching	Maintenance Static PNF	4	<p>Accept: cool down components in any order</p> <p>If component VG e.g. Jogging (example) / decrease HR (benefit) for pulse lowering credit valid examples of jogging if given again as practical example = BOD</p> <p>Named muscles for stretching example such as hamstring stretch = BOD</p> <p>Descriptions of stretch for practical example e.g. <u>holding</u> a stretch = BOD (static)</p> <p>Maintenance / static / PNF stretch for component = 2 marks (Component and example) If just maintenance / PNF / Static on its own for component = BOD</p> <p>Any exercises that could be performed statically e.g. lunges = BOD</p> <p>Do Not Accept: Stretch arms / legs = VG (Example) Touch toes (on its own) = VG (Example) Dynamic stretching = VG (Component)</p>
Cool down component	Practical example									
Pulse lowering	Gentle jogging or walking around the pitch									
Stretching	Maintenance Static PNF									

Question			Answer	Mark	Guidance
10	(b)		<p>One mark for any one of:</p> <ol style="list-style-type: none"> 1. <u>Gradually</u> lowers (body) temperature 2. <u>Gradually</u> lowers heart rate 3. Circulates blood / oxygen 4. <u>Helps</u> prevent blood pooling 5. <u>Gradually</u> lowers breathing rate 6. Removes waste products or lactic acid 7. <u>Reduces</u> risk of DOMS / soreness / aching 8. Aids or speeds up recovery / helps to improve flexibility or elasticity of muscles 	1	<p>Do not accept: reducing the risk of injury (in question) = X</p> <p>Lowers temperature / heart rate / breathing rate on its own = VG</p> <p>Prevents blood pooling = VG</p> <p>Prevents lactic acid build up = VG</p> <p>Not ache = VG</p> <p>Stretching muscles = VG</p> <p>Accept:</p> <p>Equivalent wording for Points 1, 2, 4, 5 and 7 e.g. slowly instead of gradually (1, 2 and 5)</p> <p>Reduces risk of cramp = BOD (Point 7)</p>

Question		Answer	Mark	Guidance
11	(a)	<p>Three marks for identification (odd numbers) and three marks for description (even numbers):</p> <p>1. Type of sports activity 2. Boxing is a contact sport OR involves punching an opponent</p> <p>3. Coaching / instructing / leading 4. Coaching the incorrect way to punch / instructing the boxer to clash heads OR Lack of experience and forgetting to check boxer is wearing gumshield OR Poor communication when explaining punching technique OR Lack of supervision by not paying attention when sparring OR Poor ethical standards by encouraging to keep punching after the bell</p> <p>5. Environment / weather / temperature / (playing) surface / surrounding area / human interaction / other performers / officials / spectators 6. Raining (weather) when boxing in an outside stadium may cause slips OR conditions (temperature) may be too hot or cold so body not prepared when fighting / boxing ring</p>	6	<p>Do not accept: Equipment / clothing / footwear (in question) = X</p> <p>Repeats of environment such as weather / surface / human interaction = REP</p> <p>Examples as factors = VG but credit if e.g. relevant</p> <p>Accept: responses that demonstrate applied links to boxing (e.g. hitting / striking) as well as specific terminology (jabs / uppercuts). Reference to specific boxing terms not required (e.g. boxing coach showing incorrect technique would be accepted)</p> <p>Accept: Poor coaching or behaviour or communication of coach / lack of supervision or lack of knowledge or experience of coach = BOD (Point 4)</p> <p>Floor = BOD (Point 5)</p> <p>Do not accept: Field / pitch = VG (needs to relate to boxing)</p>

Question			Answer	Mark	Guidance
			<p>OR (playing surface) ring maybe slippery due to debris / sweat OR the ropes (surrounding area) might be faulty OR referee (human interaction) may make poor decisions and allowing a boxer to continue when too tired</p> <p>OR opponent (human interaction) punch too low</p> <p>OR crowd (human interaction) may distract the boxers / throw objects into the ring</p>		<p>Accept: Surface / ring / floor not checked for hazards / not cleaned / slippery = BOD (Point 6)</p> <p>Poor refereeing = BOD (Point 6)</p>
11	(b)		<p>Two marks for any two of:</p> <ol style="list-style-type: none"> 1. Gum guard / mouth shield 2. Headguard / headgear 3. Gloves / hand wraps / taping 4. Groin protector / cup 5. Breast protector (women) 	2	<p>Do not accept: high top boxing boots (in question) = X</p> <p>Helmet = VG</p>

Question		Answer	Mark	Guidance
11	(c)	<p>Two marks sub-max for description of footwear Two marks sub-max for description of how reduces injury</p> <p>1. Rugby / football / hockey - (boots with) studs 2. Cricket / sprinting / golf / climbing – spikes 3. Ice hockey / ice skating – blades / skates 4. Cycling - cleats / locking mechanism 5. Tennis / badminton / basketball / rock climbing - gripped trainers or shoes (Description of how 1-5) Gives performer grip / helps prevent slipping or falling or sliding</p> <p>6. Basketball – high tops 7. Hiking - supportive / stability features (Description of how 6-7) Helps prevent going over or rolling or twisting the ankle</p> <p>8. Rugby / hockey (GK) / cricket / rock climbing – hard toe caps or protective surface / heel or toe bumpers (Description 8) Gives foot extra protection from impact</p> <p>9. Tennis or Running shoes – cushioned trainers (Description 9) Help prevent friction / rubbing / absorb shock / allows softer landings</p>	4	<p>Do not accept: Boxing (in question) = X Responses must come from two different sports. Do not accept: For Point 5 - Gripped tennis shoes (footwear) and gives grip = REP for how = 1 mark only. Accept: For Point 5 - Gripped tennis shoes = 1 (footwear) and helps prevent player from slipping = 1 (how) so 2 marks Accept: Prevents or stops slipping / falling = BOD (description of how points 1-5)</p> <p>Football boots (on its own) = VG. If response describes feature in description of how injury is reduced then credit both e.g. Sport: Football boots = VG Description: These boots have studs = 1 (description of footwear) that help prevent player from slipping = 1 (how)</p> <p>Repeats of explanation. e.g. Golf spikes and rugby studs help prevent from slipping = 2 marks for two descriptions of different footwear (studs and spikes) and 1 mark for description of how it prevents injury = 3 marks in total</p> <p>Accept: other sports and other relevant descriptions of footwear and ways they can help prevent injury</p>

Question			Answer	Mark	Guidance
12			Two marks sub-max for each individual variable and two marks sub-max for explanation:	4	<p>One mark for each valid individual variable and one mark for a valid applied explanation of that variable</p> <p>Accept: Technique / ability / skill level / expertise = BOD (Individual variable) and accept relevant explanation e.g. A rugby player with incorrect technique / performing high tackles will have more chance of injury</p> <p>Accept: The older player (50 year old) generally going to have weaker (bones / muscles) than the younger (20 year old) player therefore the older player has more chance of injury occurring from the tackle = 1</p> <p>Accept: Other relevant explanations e.g. The less experienced player may perform a high tackle as they don't know what to do and injure the more experienced/20 year old player / both players could become injured.</p>
			Individual variable		
			Age		
			Experience		

Question			Answer	Mark	Guidance
13	(a)		<p>Two marks sub-max for appropriate sport and two marks sub-max for description:</p> <p>(Sports) – American football / cricket / rugby league / rugby union / boxing / MMA / (ice) hockey / basketball / netball / motor sports / cycling / gymnastics / ice skating</p> <p>(Description):</p> <ol style="list-style-type: none"> 1. Being hit in the head during a tackle / collision 2. Being punched in head by an opponent in boxing 3. Being hit in the head with equipment / ball / stick 4. Falling over and banging their head on the ground / goalpost 	4	<p>Do not accept: Football in the question = X</p> <p>Accept: All types of combat sports / martial arts</p> <p>Do not accept: same descriptions for different sports e.g. hitting their head with hockey stick hitting their head with cricket ball = REP</p> <p>Accept: Other relevant sports and descriptions that could occur in that named sport</p> <p>Getting knocked out = BOD if linked with suitable practical example</p>
13	(b)		<p>Three marks for any three of:</p> <ol style="list-style-type: none"> 1. Limit / ban heading during training or games 2. Provide material on heading the ball correctly / better coaching on heading the ball 3. Punish for fouls involving high feet or fouls that increase the risk of head injuries 4. Provide specialist headgear / concussion headbands / protective head equipment 5. Use lighter or softer balls / less pressure in balls 6. Introduce head height rules 7. Make game non-contact / walking football 8. Ensure goalposts / playing surface safe to play 9. Provide concussion guidelines information or educate coaches or players on concussion 	3	<p>Do not accept: Reference to concussion procedures / protocols e.g. GRTP / 'If in doubt sit them out' = VG (Concussion has already occurred)</p> <p>Do not accept:</p> <p>Use helmets = VG</p> <p>Punish bad tackles (on its own) = VG (Point 3)</p> <p>Accept:</p> <p>Give bookings for high footed tackles = 1 (Point 3)</p> <p>Headgear (on its own) = BOD (Point 4)</p>

Question			Answer	Mark	Guidance
13	(c)		<p>One mark for:</p> <p>Dementia / Alzheimer's</p>	1	<p>Do not accept: Brain damage = VG Memory loss = VG</p> <p>Accept: Other relevant medical conditions Parkinson's / epilepsy / motor neurone disease or MND / strokes = 1</p>
14			<p>Four marks for:</p> <p>(Blisters): Friction in feet when long distance running / hiking with ill-fitted footwear / repetitive rubbing of hands when using a (tennis) racquet</p> <p>(Cut): Being hit in boxing / studded in a football tackle</p> <p>(Rotator cuff tendonitis): Repetitive overhead actions in basketball / baseball / tennis / golf / swimming</p> <p>(Dislocation): Tackle in rugby / suddenly changing direction or twisting knee when turning in basketball / landing awkwardly in downhill skiing</p>	4	<p>Do not accept: Repeats of sporting situations e.g. tackle in rugby for dislocation and tackle in football for cut = REP = 1 mark only</p> <p>Accept: any reasonable answers that link with a sporting situation e.g. players / pitch etc</p> <p>Running for a long amount of time = VG (Blisters)</p> <p>Accept: Blisters = Reference to performance / protective equipment e.g. friction on hands of player during wheelchair basketball = 1</p> <p>Rotator cuff tendonitis = reference to sporting actions that can involve overuse of the shoulder e.g. swimming strokes / tennis forehand</p>

15* Discuss the causes and symptoms of acute sports injuries of sprains and strains and use of PRICE therapy to treat them.

Your answer should include:

- causes and symptoms of sprains and strains
- how PRICE therapy can be used to treat sprains and strains
- the use of different practical examples throughout your answer.

Question	Answer	Mark	Guidance
15*	<p><u>Levels of response</u></p> <p>All level descriptors describe the TOP of the level.</p> <p>Level 3 (7-8 marks) A strong balanced discussion which demonstrates detailed knowledge and understanding on acute injuries and PRICE therapy. The discussion considers causes and symptoms of sprains and strains and how PRICE therapy can be used to treat them in an appropriate context. Knowledge points are developed and supported with a range of practical examples</p> <p>Level 2 (4-6 marks) A discussion which shows some knowledge and understanding on acute injuries and PRICE therapy. There is some use of appropriate context when discussing causes and symptoms of sprains and strains and how PRICE therapy can be used to treat them. Some knowledge points are developed and supported with practical examples.</p> <p>Level 1 (1-3 marks) A basic discussion which shows limited knowledge and understanding on acute injuries and PRICE therapy. The discussion may use some appropriate context about sprains and strains and PRICE therapy. The discussion will be unbalanced. Knowledge points are not developed and/or supported with limited practical examples or none at all.</p>	8	<p>Guidance:</p> <p>Level 3 (7-8 marks) A thorough discussion which: - shows detailed knowledge and understanding - analyses the points made, showing logical reasoning throughout - reaches a justified conclusion (where one is required) - consistently uses appropriate terminology.</p> <p>Level 2 (4-6 marks) An adequate discussion which: - shows sound knowledge and understanding - analyses the points made, may show some logical reasoning - uses some appropriate terminology.</p> <p>Level 1 (1-3 marks) A basic discussion: - shows limited knowledge and understanding. - identifies positive and negative (advantages and disadvantage) aspects (if appropriate for the question) - limited or no-use of appropriate terminology.</p> <p><u>Indicative content:</u> Candidate responses are likely to include: (relevant responses not listed should be acknowledged)</p> <p>Numbered points = knowledge / understanding Bullet points = likely to be development of knowledge</p>
	0 = nil response or no response worthy of credit.		0 = nil response or no response worthy of credit.

KU	DEV	EG
<u>Acute injuries</u> 1. Caused as a result of a sudden / instant trauma to the body / injury happens straight away 2. Soft tissue injuries 3. Results in immediate pain / tender / discomfort 4. Results in swelling 5. Loss of function or mobility 6. Bruising may occur	<u>Sprains:</u> <ul style="list-style-type: none"> the tearing / injury of a ligament (connecting bone to bone) can be caused by impact on joints / falling onto wrist / rolling the ankle anterior cruciate ligament injury / ACL <u>Strains:</u> <ul style="list-style-type: none"> the tearing / injury of a muscle or tendon (connecting muscle to bone) / pulled muscle different grades of strain based on how severe the injury is can be caused by overstretching / overworking 	Hard rugby tackle A hurdler falling over A runner going over on their ankle Being hit by a ball piece of equipment or collision with a player A football player overstretching their hamstring when reaching for a ball A weightlifter tearing pectorals when lifting weights that are too heavy
<u>PRICE therapy:</u> Treat minor soft tissue injury (KU for all PRICE acronym) P – Protection	<ul style="list-style-type: none"> helps to reduce chances of further injury immobilise / support the injury 	Use knee brace / boot / use splints or slings (arms)
R – Rest	<ul style="list-style-type: none"> stop the activity / don't put your weight on it continued activity can cause further harm / injury helps with recovery 	Use crutches
I - Ice	<ul style="list-style-type: none"> apply ice 15/20 mins every 2/3 hours or at regular intervals to reduce internal bleeding / contracts blood vessels to reduce swelling relieve pain 	Using an ice pack / pack of frozen peas
C - Compress	<ul style="list-style-type: none"> helps to prevent swelling helps restrict movement support (the limb) can help protect the injury 	Use bandages / taping
E - Elevate	<ul style="list-style-type: none"> keep limb above level of heart / keep limb up helps to reduce swelling / direct blood flow away from injury reduce amount of pain 	Put leg on chair Raise arm above head

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