

In alliance with 1411 outsitting A.rm.tHit

Gradual Return to Play Following a Concussive Injury

- This return to play plan should start only when you have been <u>without any symptoms</u> for 24 hours.
- It is important to wait for 24 hours between steps because symptoms may develop several hours after completing a step.
- Do not take any pain medications while moving through this plan (no ibuprofen, aspirin, Aleve, or Tylenol).
- Make a follow up appointment with your provider if symptoms develop during this progression.
- Intensity levels: 1 = very easy; 10 = very hard.

Step 1: Aerobic conditioning - Walking, swimming, or stationary cycling.

- Intensity: 4 out of 10.
- Duration: no more than 30 minutes.
- If symptoms return, wait until you are symptom free for 24 hours then repeat Step 1.
- No symptoms for 24 hours, move to Step 2.

Step 2: Sports specific drills - skating drills in hockey, running drills in soccer/basketball.

- Intensity: 5 or 6 out of 10.
- Duration: no more than 60 minutes.
- No head impact activities. No scrimmages/potential for contact.
- If symptoms return, wait until you are symptom free for 24 hours then repeat Step 1.
- No symptoms for 24 hours, move to Step 3.

<u>Step 3:</u> Non-contact training drills - include more complex training drills (passing in soccer/ice hockey/basketball. Running specific pattern plays, etc).

- No head contact, or potential for body impact.
- OK to begin resistance training.
- Intensity: 7 out of 10.
- Duration: no more than 90 minutes.
- If symptoms return, wait until you are symptom free for 24 hours then repeat Step 2.
- No symptoms for 24 hours, move to Step 4.

Step 4: Full contact practice.

- Only after medical clearance!
- No intensity/duration restrictions.
- If symptoms return, wait until you are symptom free for 24 hours and repeat Step 3.
- No symptoms for 24 hours, move to Step 5

Step 5: Full clearance for return to play.

Developed by the Fletcher Allen Health Care Concussion Task Force August 2010