

CIF Concussion Return to Play (RTP) Protocol

CA STATE LAW AB 2127 (Effective 1/1/15) STATES THAT RETURN TO PLAY (I.E., COMPETITION) CANNOT BE SOONER THAN 7 DAYS AFTER EVALUATION BY A PHYSICIAN (MD/DO) WHO HAS MADE THE DIAGNOSIS OF CONCUSSION.

Instructions:

- This *graduated return to play protocol* **MUST** be completed before you can return to FULL COMPETITION.
 - A certified athletic trainer (AT), physician, and/or identified concussion monitor (e.g., coach, athletic director), must monitor your progression and initial each stage after you successfully pass it.
 - Stages I to II-D take a *minimum* of 6 days to complete.
 - You must be back to normal academic activities before beginning Stage II, unless otherwise instructed by your physician.
 - You must complete one full practice *without restrictions* (Stage III) before competing in first game.
- After Stage I, you cannot progress more than one stage per day (or longer if instructed by your physician).
- If symptoms return at any stage in the progression, IMMEDIATELY STOP any physical activity and follow up with your school's AT, other identified concussion monitor, or your physician. In general, if you are symptom-free the next day, return to the previous stage where symptoms had not occurred.
- Seek further medical attention if you cannot pass a stage after 3 attempts due to concussion symptoms, or if you feel uncomfortable at anytime during the progression.

You must have written physician (MD/DO) clearance to begin and progress through the following Stages as outlined below (or as otherwise directed by physician)				
Date & Initials	Stage	Activity	Exercise Example	Objective of the Stage
	I	No physical activity for at least 2 full symptom-free days AFTER you have seen a physician	<ul style="list-style-type: none">No activities requiring exertion (weight lifting, jogging, P.E. classes)	<ul style="list-style-type: none">Recovery and elimination of symptoms
	II-A	Light aerobic activity	<ul style="list-style-type: none">10-15 minutes (<i>min</i>) of walking or stationary biking.Must be performed under <i>direct supervision</i> by designated individual	<ul style="list-style-type: none">Increase heart rate to no more than 50% of perceived maximum (<i>max</i>) exertion (e.g., < 100 beats per min)Monitor for symptom return
	II-B	Moderate aerobic activity (<i>Light resistance training</i>)	<ul style="list-style-type: none">20-30 min jogging or stationary bikingBody weight exercises (squats, planks, push-ups), max 1 set of 10, no more than 10 min total	<ul style="list-style-type: none">Increase heart rate to 50-75% max exertion (e.g., 100-150 bpm)Monitor for symptom return
	II-C	Strenuous aerobic activity (<i>Moderate resistance training</i>)	<ul style="list-style-type: none">30-45 min running or stationary bikingWeight lifting ≤ 50% of max weight	<ul style="list-style-type: none">Increase heart rate to > 75% max exertionMonitor for symptom return
	II-D	Non-contact training with sport-specific drills (<i>No restrictions for weightlifting</i>)	<ul style="list-style-type: none">Non-contact drills, sport-specific activities (cutting, jumping, sprinting)No contact with people, padding or the floor/mat	<ul style="list-style-type: none">Add total body movementMonitor for symptom return
Minimum of 6 days to pass Stages I and II. Prior to beginning Stage III, please make sure that written physician (MD/DO) clearance for return to play, after successful completion of Stages I and II, has been given to your school's concussion monitor				
	III	Limited contact practice	<ul style="list-style-type: none">Controlled contact drills allowed (no scrimmaging)	<ul style="list-style-type: none">Increase acceleration, deceleration and rotational forcesRestore confidence, assess readiness for return to playMonitor for symptom return
		Full contact practice Full unrestricted practice	<ul style="list-style-type: none">Return to normal training, with contactReturn to normal unrestricted training	
MANDATORY: You must complete at least ONE contact practice before return to competition, or if non-contact sport, ONE unrestricted practice (If contact sport, highly recommend that Stage III be divided into 2 contact practice days as outlined above)				
	IV	Return to play (competition)	<ul style="list-style-type: none">Normal game play (competitive event)	<ul style="list-style-type: none">Return to full sports activity without restrictions

Athlete's Name: _____ **Date of Concussion Diagnosis:** _____

CIF Concussion Return to Learn (RTL) Protocol

Instructions:

- Keep brain activity below the level that causes worsening of symptoms (e.g., headache, tiredness, irritability).
- If symptoms worsen at any stage, stop activity and rest.
- Seek further medical attention if your child continues with symptoms beyond 7 days.
- If appropriate time is allowed to ensure complete brain recovery before returning to mental activity, your child may have a better outcome than if he or she tries to rush through these guidelines.
- Please give this form to teachers/school administrators to help them understand your child's recovery.

Stage	Home Activity	School Activity	Physical Activity
Brain Rest	Rest quietly, nap and sleep as much as needed. Avoid bright light if bothersome. Drink plenty of fluids and eat healthy foods every 3-4 hours. Avoid "screen time" (text, computer, cell phone, TV, video games).	No school. No homework or take-home tests. Avoid reading and studying.	Walking short distances to get around is okay. No exercise of any kind. No driving.
	<i>This step usually ends 3-5 days after injury. Progress to the next stage when your child starts to improve, but s/he may still have some symptoms.</i>		
Restful Home Activity	Set a regular bedtime/wake up schedule. Allow at least 8-10 hours of sleep and naps if needed. Drink lots of fluids and eat healthy foods every 3-4 hours. Limit "screen time" to less than 30 minutes a day.	No school. May begin easy tasks at home (drawing, baking, cooking). Soft music and 'books on tape' ok. Once your child can complete 60-90 minutes of light mental activity without a worsening of symptoms he/she may go to the next step.	Light physical activity, like walking. No strenuous physical activity or contact sports. No driving.
	<i>Progress to the next stage when your child starts to improve and s/he has fewer symptoms.</i>		
Return to School - PARTIAL DAY	Allow 8-10 hours of sleep per night. Avoid napping. Drink lots of fluids and eat healthy foods every 3-4 hours. "Screen time" less than 1 hour a day. Spend limited social time with friends outside of school.	Gradually return to school. Start with a few hours/half-day. Take breaks in the nurse's office or a quiet room every 2 hours or as needed. Avoid loud areas (music, band, choir, shop class, locker room, cafeteria, loud hallway and gym). Use sunglasses/ earplugs as needed. Sit in front of class. Use preprinted large font (18) class notes. Complete necessary assignments only. No tests or quizzes. Limit homework time. Multiple choice or verbal assignments better than lots of long writing. Tutoring or help as needed. Stop work if symptoms increase.	Light physical activity, like walking. No strenuous physical activity or contact sports. No driving.
	<i>Progress to the next stage when your child can complete the above activities without symptoms.</i>		
Return to School - FULL DAY	Allow 8-10 hours of sleep per night. Avoid napping. Drink lots of fluids and eat healthy foods every 3-4 hours. "Screen time" less than 1 hour a day. Spend limited social time with friends outside of school.	Progress to attending core classes for full days of school. Add in electives when tolerated. No more than 1 test or quiz per day. Give extra time or untimed homework/tests. Tutoring or help as needed. Stop work if symptoms increase.	Light physical activity, like walking. No strenuous physical activity or contact sports. No driving.
	<i>Progress to the next stage when your child has returned to full school and is able to complete all assignments/tests without symptoms.</i>		
Full Recovery	Return to normal home and social activities.	Return to normal school schedule and course load.	May begin and must complete the CIF Return to Play (RTP) Protocol before returning to strenuous physical activity or contact sports.