

Return to Learn & Play Protocol

Return to Learn:

Step 1: HOME—Total Rest - No mental exertion

- No Computer, Texting, Video Games or Homework
- Stay at home
- No driving

Step 2: HOME—Light Mental Activity

- Up to 30 minutes mental exertion
- No prolonged concentration
- Stay at home
- No driving
- Progress to the next level when able to handle up to 30 minutes mental exertion without worsening of symptoms
- When parent(s) indicate student is ready to return to school, school to send letter to parent(s)

Step 3: SCHOOL-Part time - Maximum Accommodations

- Shortened Days/Schedule
- Built-in Breaks
- Provide quiet place for scheduled mental rest
- No significant classroom or standardized testing
- Modify rather than postpone academics
- Provide extra time, extra help, modified assignments
- Progress to the next level when able to handle 30-40 minutes of mental exertion without worsening of symptoms. At this stage include the athletic staff in planning

Step 4: SCHOOL-Part Time - Moderate Accommodations

- No standardized testing
- Modified classroom testing
- Moderate decrease of extra time, help, and modification of assignments
- Progress to the next level when able to handle 60 minutes of mental exertion without worsening of symptoms.



Step 5: SCHOOL-Full Time - Minimal Accommodations

- No standardized Testing, Routine tests OK
- Continue decrease of extra time, help, and modification of assignments
- May require more supports in academically challenging subjects
- Progress to the next the next level when able to handle up to 60 minutes mental exertion without worsening of symptoms. At this point student may be considered for Return to Play Protocol with the appropriate healthcare professional approval

Step 6: SCHOOL-Full Time - Full Academics - No Accommodations

- Attends all classes
- Full homework
- When symptoms continue beyond 3-4 weeks, Prolonged In-School Support is required.

Return to Play:

This Return to Play Plan should start only when the student athlete has been without any symptoms 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). This plan should be supervised by an athletic trainer, school nurse, or health care professional trained in the management of concussions.

Intensity levels: 1=very easy; 10=very hard

Step 1: Aerobic Conditioning – Walking, swimming, or stationary cycling

- Intensity level: 4
- 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 or basketball

- Intensity level: 5 or 6
- Duration: no more than 60 minutes
- No head impact activities. No scrimmages or 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



Step 3: Non-contact Training Drills – more complex training drills such as passing in soccer/hockey/basketball. Running specific pattern plays, etc.

- Intensity level: 7
- Duration: no more than 90 minutes
- No head contact, or potential for body impact
- Ok to begin resistance training
- 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! You must have a note from a health care provider trained in managing concussions before returning to full practice or games.
- No intensity or duration restrictions
- If symptoms return, wait until you are symptom free for 24 hours then repeat Step 3.
- No symptoms for 24 hours, move to step 5

Step 5: Full Clearance for Return to Play