

PLAN for Gradual Return to Daily Activity/School/Play

Staged return to play has become the standard of care following a concussion. This means that a student athlete resumes activity gradually after a concussion; stops the activity if it brings on post-concussion symptoms like headache, dizziness and confusion; and backs up a step until the symptoms are gone. There should be at least 24 hours between stages of advancement.

Progression is individualized, determined on a case-by-case basis. The athlete should spend 1-2 days at each stage before advancing to the next. If post-concussion symptoms occur at any stage, the athlete must stop the activity and contact the doctor. Typically, 24 hours of rest is recommended, than return to activity one stage below the symptom-causing stage.

Return-to-Sports/Play/Physical Activity		
Stage 1	Complete physical and cognitive rest.	NO SCHOOL, no group activities. Quiet rest.
Stage 2	Light aerobic exercise	Walk in the neighborhood or ride stationary bike
		10-15 minutes (light sweat). Avoid group activities.
Stage 3	Moderate aerobic exercise	Low risk activities - dribbling ball, chasing a ball,
	Light resistance training	playing catch
		20-30 minutes jogging or stationary bike
		Arm curls, shoulder raises, leg lifts with easy
		weights, 1 set of 10 repetitions per activity
Stage 4	Intense aerobic exercise	Moderate-risk activities - No contact activities
	Moderate resistance training	40-60 minutes of running or stationary bike
	Sport-specific exercise	Same resistance exercises - 3 sets of 10 reps
		Pre-competition warm-up - passing soccer ball,
		throwing football, doing ladder drills
Stage 5	Controlled-contact drills/practice	Requires doctor approval and adult supervision
		Full return to PE, run and jump as able, free play
		60-90 minutes on field, court for specific drills
		Normal practice participation with supervision
Stage 6	Return to play	No restrictions
	Return-to-Sch	nool/Studies
Stage 1	Complete physical and cognitive rest	NO SCHOOL. No group activities, no videos or
		other electronics, no cell phones, texting, games,
		no crowds, minimize noise; no planners or 'to-do'
		lists. Allow as much sleep as possible. Quiet rest.
Stage 2	Light cognitive activity	School half-day, core classes only; rest in nurse's
		office between classes and as needed. No tests or
		quizzes. Limited electronics (TV, video games,
		texting, tweeting & social media) less than 2 hours/
		day. Avoid any electronics that bring on symptoms.
		Allow as much sleep as possible. Quiet rest.
Stage 3	Moderate cognitive activity	School full-day, gradual return to class work
		including make-up work, tests, quizzes. Only one
		test or quiz a day with extra time as needed to
		complete. Slow return to usual use of electronics.
Stage 4	Normal home, school and social activity	Return to normal activities without restriction.
	WORSENING OR RETURN OF SYMPTOMS SH	HOULD BE RE-EVALUATED BY A PHYSICIAN.