

Clearwater Valley Post Concussion Protocol

GRADUATED RETURN-TO-PLAY:

- Stage 1 – Light Aerobic Activity for 10 – 15 minuteslight jogging, stationary bike, elliptical machine
- Stage 2 – Sport Specific Exercise for 20 – 30 minutes . . .running drills with NO contact or weight lifting
- Stage 3 – Non-Contact Drillsbegin complex drills & weight lifting
- Stage 4 – Full-Contact Practiceparticipate in normal training activities; full exertion; limit repetitions
- Stage 5 – Return-to-Playno restrictions

SUBSEQUENT TBI INCIDENCES:

If an athlete suffers more than one concussive episode, this protocol changes depending on the amount of time that has elapsed between episodes. The decision will be made by the family physician and parents as to the potential return of the athlete to normal participation. As a general rule, if the athlete suffers three concussions within the same season, termination of participation for the remainder of that season is seriously considered. Athletes will be encouraged to seek the professional advice of their primary care physician. Of course, the same subjective and objective data discussed in this document will be utilized in making this decision. The protocol may also be supplemented by extensive imaging of the athlete's brain and a thorough examination by the primary care physician, preferably a sports medicine specialist.

Things to remember:

- Location of impact does not determine severity of injury.
- Whether or not there is a loss of consciousness does not determine severity of injury.
- Recovery in pediatric athletes (18 years of age or younger) may take longer than in older athletes.
- Damage to the maturing brain of a young athlete can be catastrophic (i.e. almost ALL reported cases of second-impact syndrome are in young athletes).
- Return-To-Play (RTP) guidelines for young athletes are now stricter than those used to manage concussion in the more mature athlete.