

Success Unlimited Academy

Concussion Return to Play Protocol



This protocol will take place over 7-10 days for return to play with a minimum of 7 days. With this protocol, the athlete should continue to proceed to the next level if asymptomatic (i.e. showing no signs or symptoms of a concussion) at the current level. Twenty-four (24) hours must separate each of the steps.

If any post-concussion symptoms occur, the athlete should drop back to the previous step and try to progress again after 24 hours. The athlete should not be taking any pharmacological agents/medications that may mask or modify the symptoms of a concussion without the direction of the team physician.

Step 1

No physical activity, complete rest. Check symptoms daily on the attached Graded Symptom Checklist. Once the student-athlete is asymptomatic for at least 24 hours, proceed to Step 2.

Step 2

The student-athlete may complete 20 minutes of light aerobic exercise such as walking or using a stationary cycle. If the student-athlete has symptoms, return to Step 1. If still asymptomatic, proceed to Step 3 on the following day.

Step 3

The student-athlete may complete heavy aerobic exercise such as sprints, jumping rope, and interval training. He or she may begin resistance (weight room) training as well. If symptomatic, return to Step 2. If no symptoms occur, proceed to Step 4 on the following day.

Step 4

Begin functional, sport-specific exercises in a progression. Return to Step 3 if symptoms return. If asymptomatic, proceed to Step 5 on the following day.

Step 5

Student-athlete can begin non-contact drills. If the athlete remains asymptomatic, he/she may proceed to Step 6. If symptoms begin, return to Step 4.

Step 6

Only after clearance from the physician, or physician's designee, may the student-athlete begin full contact activity and/or exertional testing.

Step 7

If no symptoms occur, student-athlete can return to full competition after reassessment with SAC testing by the physician or the physician's designee. Written approval must also be received from the Athletic Director prior to returning to play. Final authority for return to play will reside with the physician or the physician's designee.