RETURN TO PLAY PROGRESS

To be completed by non-medical personnel (e.g., coaches, PE teachers, health technicians, special-ed health technicians) to document a student's daily progress towards "Return to Play"

		Name: ff member completing	n form:	Date:
Job Ti				
	After	this activity, I inquired,	and the student reported the fo	ollowing: check all that apply
] []	☐ Ring ☐ Dela ☐ Mor ☐ No s	ofusion or foggy feeling ging in ears ayed response to question e fatigue than expected symptoms at all	☐ Nausea or vomiting ☐ Developed a headach ns ☐ Light sensitive ☐ Irritability or personal nt appeared to be truthful to me	☐ Noise sensitive ity change
	□ Yes		☐ Unsure - Comments:	
	Υ	ou must have written physician (N	MD/DO) clearance to begin and progress through (or as otherwise indicated by physicia	ough the following Stages as outlined below an)
Date &Initial	Stage	Activity	Exercise Example	Objective of the Stage
Gillita	I	No physical activity for at least 2 full symptom-free days AFTER you have seen a physician	No activities requiring exertion (weight lifting, jogging, P.E. classes)	Recovery and elimination of symptoms
	II-A	Light aerobic activity	10-15 minutes (minimum) f walking or stationary biking Must be performed under direct supervision by designated individual	Increase heart rate to no more than 50% of perceived maximum exertion (e.g., <100 bpm) Monitor for symptom return
	II-B	Moderate aerobic activity (light resistance training)	20-30 minutes jogging or stationary biking Body weight exercises (squats, planks, push-ups), maximum 1 set of 10, no more than 10 minutes total	Increase heart rate to 50-75% maximum exertion (e.g., 100-150 bpm) Monitor for symptom return
	II-C	Strenuous aerobic activity (moderate resistance training)	 30-45 minutes running or stationary biking Weight lifting ≤50% of maximal weight 	 Increase heart rate to >75% max exertion Monitor for symptom return
	II-D	Non-contact training with sport-specific drills (no restrictions for weight lifting)	Non-contact drills, sport-specific activities (cutting, jumping, sprinting) No contact with people, padding, or the floor/mat	Add total body movement Monitor for symptom return
Minim	um of 6			t written physician (MD/DO) clearance for return to play,
	III	Full contact practice Full unrestricted practice	Controlled contact drills allowed (no scrimmaging) Return to normal training, with contact Return to normal unrestricted training	Increase acceleration, decelerations, and rotational forces Restore confidence, assess readiness for return to play Monitor for symptom return
MAN	DATORY	•	contact practice before return to competiti commend that Stage III be divided into 2 conto	on, or if non-contact sport, ONE unrestricted practice (If
	IV	Return to play (competition)	Normal game play (competitive event)	Return to full sports activity without restrictions

