CONCUSSION RETURN TO SPORT



» 24 - 48 HOURS OF RELATIVE REST (PHYSICAL AND MENTAL) CONSULT YOUR DOCTOR FOR CLEARANCE BEFORE STARTING A RETURN TO SPORT (RTS) STRATEGY

» THE RTS STRATEGY SHOULD BE SUPERVISED BY YOUR DOCTOR

» CHILDREN 18 YEARS AND YOUNGER SHOULD PROGRESS SLOWER THROUGH THE RTS STRATEGY (TWICE AS LONG) » WHILE THE RETURN TO LEARN (RTL) CAN OCCUR IN PARRALLEL, FULL RTL SHOULD BE COMPLETED PRIOR TO UNRESTRICTED RTS

1. SYMPTOM LIMITED ACTIVITY

» NORMAL DAILY ACTIVITIES THAT DONT MAKE SYMPTOMS ANY WORSE OR PROVOKE NEW ONES

2. AEROBIC EXERCISE

» WALKING OR EXERCSISE BIKE (SLOW TO MEDIUM PACE)

3. SPORT SPECIFIC EXERCISE

» RUNNING DRILLS (NO CONTACT ACTIVITIES)

4. NON-CONTACT TRAINING DRILLS

» PROGRESS TO MORE COMPLEX TRAINING DRILLS E.G PASSING AND LIGHT RESISTANCE TRAINING

» DOCTORS CLEARANCE REQUIRED BEFORE PROGRESSING TO STAGE 5

5. FULL CONTACT TRAINING

» COACHES TO CHECK TACKLING TECHNIQUE

6. RETURN TO SPORT



» NORMAL GAME/MATCH PLAY

EACH STAGE SHOULD TAKE AT LEAST 24 HOURS FOR ADULTS AND 48 HOURS FOR CHILDREN AND ADOLESCENTS. IF ANY SYMPTOMS WORSEN OR DEVELOP DURING ANY STAGE THEN STOP, WAIT FOR SYMPTOMS TO RESOLVE AND REST FOR 24 HOURS BEFORE STARTING AT THE PREVIOUS STAGE

For more info please see playrugbyleague.com/concussion











