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When can a player safely return to play following a concussion?

Why is it so important to return to play at the appropriate time?

Returning too soon following a concussion may have serious short and long term consequences including:

- More serious brain injury and even death
- Prolonged symptoms lasting weeks or months
- Greater risk of further concussions
- Interference with studies (school and university) and work
- Poor performance on the Rugby field
- Long term, permanent brain effects including memory loss and emotional disturbances.

Mandatory rest periods

Unless advised by a medical doctor with expertise in concussion management, the following minimum rest periods are prescribed for players suspected of suffering a concussion in Rugby:

Players 15 years old and younger – rest from all exercise for a minimum of 2 weeks, followed by an 8 day period of graduated return to play (GRTP, see protocol below)

Players aged 16-19 years old – rest from all exercise for a minimum of 2 weeks, followed by a 4 day period of GRTP.

Players aged 20 years old and over – rest from all exercise for a minimum of 1 day followed by a 4 day GRTP.

These minimum periods only apply if the player no longer has **ANY** symptoms of concussion.

Note: It is recommended that, in all cases of suspected concussion, the player is referred to a medical professional

The Graduated Return to Play (G RTP) Protocol

G RTP Protocol – each Stage AFTER the stand-down period is a minimum of 24 hours for *players 16 years old and above* and 48 hours in *players 15 years old or younger*

Stage	Rehabilitation	Objective	Exercise Allowed
1	Minimum age-appropriate rest period	Recovery	<ul style="list-style-type: none"> Complete body and brain rest without symptoms
2	Light aerobic exercise	Increase heart rate	<ul style="list-style-type: none"> Light jogging for 10-15 minutes, swimming or stationary cycling at low to moderate intensity. No resistance training. Symptom free during full 24/48-hour period.
3	Sport-specific exercise	Add movement	<ul style="list-style-type: none"> Running drills. No head impact activities
4	Non-contact training drills	Exercise, coordination, and cognitive load	<ul style="list-style-type: none"> Progression to more complex training drills, e.g. passing drills. May start progressive resistance training. Player MUST be medically cleared at the end of this Stage before going to Full-contact training or Stage 5
5	Full Contact Practice	Restore confidence and assess functional skills by coaching staff	<ul style="list-style-type: none"> Normal rugby training activities If player remains sign and symptom-free for the full 24/48 hours, they then move onto Stage 6
6	Return to Play	Recover	<ul style="list-style-type: none"> Player rehabilitated and can be progressively re-introduced into full match play

Notes:

- ***a player may only start the G RTP process once cleared by a medical doctor and all symptoms have cleared***
- ***a player may only progress to the next stage if no symptoms occur during or after exercise in each stage***
- ***a player must again be cleared by medical doctor before starting full-contact training***

Summary of Return to Play Criteria for Rugby

AGE GROUP	COMPULSORY REST PERIOD POST CONCUSSION		G RTP		NUMBER OF MISSED FULL WEEKS
Players aged 15 or younger	2 weeks and symptom free	Caution! Return to play protocol should be started only if the player is symptom free and off medication that modifies symptoms of concussion	4 Stage G RTP with progression every 48 hours if no symptoms. Total G RTP days = 8 days.	Caution! Contact Sport should be authorized only if the player is symptom free and off medication MEDICAL CLEARANCE REQUIRED	<u>Earliest Return to play</u> = 2 weeks rest post injury + 8 days G RTP (Play - Day 23 post injury)
Players aged 16, 17, 18 & 19	2 weeks and symptom free		4 Stage G RTP with progression every 24 hours if no symptoms. Total G RTP days = 4 days.		<u>Earliest Return to play</u> = 2 weeks rest post injury + 4 days G RTP (Play - Day 19 post injury)
Players aged 20 & over	1 day and symptom free		4 Stage G RTP with progression every 24 hours if no symptoms. Total G RTP days = 4 days.		<u>Earliest Return to play</u> = 1 day rest post injury + 4 day G RTP (Play - Day 6 post injury)
 <p>Any player with a second concussion within 12 months, a history of multiple concussions, players with unusual presentations or prolonged recovery should be assessed and managed by health care providers (multidisciplinary) with experience in sports-related concussions. It is recommended that if this expertise is unavailable then as a minimum the player should be managed using the protocol from the lower age group i.e. 1. 'Players 20 and over' uses the 'Players 16-19' protocol 2. 'Players 16-19' uses the 'Players 15 and younger' protocol 3. For 'Players 15 and younger' the minimum rest period should be <u>doubled</u>. However, the medical doctor clearance is non-negotiable and must always be provided before entering the G RTP and before starting full-contact training, regardless of who is available to manage or monitor the G RTP process.</p>					

REFERENCES

1. Purcell L. What are the most appropriate return-to-play guidelines for concussed child athletes? *Br J Sports Med* 2009; 43 (Suppl 1): i51-i55
2. Schneider KJ et al. The effects of rest and treatment following a sports related concussion: a systematic review of the literature. *Br J Sports Med* 2013; 47: 304-307
3. McCrory P et al. Consensus Statement on Concussion in Sport 3rd International Conference on Concussion in Sport, Zurich. *Clinical J Sports Med* 2009; 19: 185-200

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