

Graded Return-to-Participation Documentation

Athlete's name: _____ Date of birth: ___ / ___ / ___

Date of injury: ___ / ___ / ___ Today's date ___ / ___ / ___

Dear coach,

This athlete was evaluated and determined to have sustained a concussion. Please see next steps for gradual return to play below. Thank you.

Additional information can be found at: cdc.gov/headsup/providers.

Oregon state law states that a youth athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time. A youth athlete who has been removed from play may not return to play until the athlete is evaluated by a licensed health care provider trained in the evaluation and management of concussion and receives written clearance to return to play from that health care provider.

RETURNING TO SPORTS

Caution: If the athlete experiences a recurrence of **ANY** post-concussion symptoms during or after exerting, he or she should cease activity immediately and rest. He or she may resume activity at a lower level the following day if symptom-free, beginning the progression again. Athlete must be symptom-free during and after physical and cognitive exertion before returning to full participation.

GRADUATED, STEP-WISE RETURN-TO-PARTICIPATION PROGRESSION (Minimum of 24 hours between steps)

These steps should be completed as recommended by your medical team and may vary by athlete.

Step 1. No activity. Symptom-limited physical and cognitive rest.

Step 2. Light aerobic exercise. Walking or light stationary bike riding, light jogging, no weight lifting or resistance training.

Step 3. Moderate sport-specific activity with head and body movement, moderate weightlifting, moderate jogging, brief running drills, no head-impact activities.

Step 4. Heavy, non-contact activity. Begin more complex, sport-specific training drills, regular weightlifting or resistance training, no head-impact activities.

Physician release must be obtained before progressing to Step 5.

Step 5. Full-contact practice. Participate in normal training activities.

Step 6. Unrestricted return-to-participation/full competition.

* Adapted from the 2012 American Medical Society for Sports Medicine, Zurich Consensus statements and the CDC Heads-up Program.

THIS SECTION TO BE COMPLETED BY PHYSICIAN

- This athlete **may NOT return** to any sport activity until medically cleared.
- Athlete should **remain home from school** to rest and recover until next follow-up with physician on _____ (date).
- Please **allow classroom accommodations**, such as extra time on tests, a quiet room to take tests and a reduced workload when possible. Additional recommendations: _____
- Athlete **may begin a graduated return at the stage circled above.**
- Athlete **must return for clearance before proceeding to Step 5.**
- Return to this office _____ Follow-up _____

Physician's signature: _____ Date: _____

Physician's name (print) _____ Phone: _____