



## Graduated Return to Physical Education Note

Date: \_\_\_\_\_ Student: \_\_\_\_\_ Date of Injury: \_\_\_\_\_

The concussion management team is notifying you that the student above is ready for a change in activity status. We are requesting that you partner with us in the management and recovery of this student.

Each concussion is unique and may cause multiple symptoms. Some symptoms will appear immediately, whereas others may develop over the coming days or weeks. Symptoms might be subtle and are often difficult to fully recognize. It will be necessary for you to monitor the student and report any worsening symptoms. It is impossible to predict the duration of the student's symptoms; however, most will be better within 2-3 weeks. A few students will take several months to recover. Please refer to the staff notification letter for information on signs and symptoms.

**An athlete may begin participating in PE once symptom free at rest and exertion and cleared by the athletic trainer, providing the student and teacher are able to modify class activities that mirror those in the return to activity.** Athletes will be advanced through the steps in the graduated return to play by the athletic trainer. We will keep in contact with you informing you of their current activity status. Should an athlete miss an evaluation day or fail to produce a new note, they must stay at the previous level. Teachers & coaches will not advance athletes through the return to play progression.

**PE Class Recommendations:** Athlete can participate at Stage: \_\_\_\_ as long as they are symptom free.

Stage	Objective	Exercise
<b>Stage 1:</b> No activity	Complete rest until symptom free to aid recovery. This stage could take days or weeks.	Consider having the student sit in a spot where he/she is not at risk for being hit by other students or sporting equipment. You may wish to send student to the library/ study hall/ health room to rest during PE.
<b>To Progress to Stage 2:</b> Athlete must be symptom free at rest and exertion, attending school full time, off all academic accommodations, and participating in full homework activities.		
<b>Stage 2:</b> Light aerobic exercise	Increase heart rate without attention or concentration.	10-15 mins of light cardio: Walking or Stationary Bike.
	Gentle strengthening/stretching	Quad Set/Straight Leg Raise, Ham Sets, Theraband, Cat/Cow, Prayer, Pecs, Hamstring, Hip Flexor, Adductor, Piriformis, Quad, & Calf Stretching.
<b>Stage 3:</b> Sport specific exercise	Light to moderate aerobic conditioning, adding movement with increased attention and coordination.	20-30 mins of moderate cardio. Running, passing drills, dribbling in basketball/soccer, swinging a bat, etc. No head impact activities, helmet or other equipment.
	Lightweight strengthening/active stretching	Light weight machine strength exercise ie. Nautilus, wall squats, walking lunges, step ups/downs, side to side groin stretch, & walking hamstring stretch.
<b>Stage 4:</b> Non contact	Moderately aggressive aerobic exercise, progressing to training with higher cognition & coordination.	25-30 mins of moderately aggressive cardio including incline running on treadmill/intervals. Non contact training drills in full equipment, participating in all aspects of practice minus contact.
	All forms of strength training, agility, & Plyometrics	Squat, cleans, snatch, bench press. Zig zag/fig 8 running, side shuffle/defensive slides, jumping, etc.
<b>Stage 5:</b> Full contact REQUIRES MEDICAL CLEARANCE	Restore athlete's confidence & allows assessment of functional skills by coaching staff.	Full un-restricted contact practice at game intensity
<b>Stage 6:</b> Return to competitive play with no restrictions, normal game play.		

**If symptoms recur at any stage, stop activity. Once athlete is symptom free for 24 hours they may return to previous asymptomatic stage.**

Keep in mind most activities may be modified to be non-contact. For example, if the class is playing basketball, the concussed athlete may not participate in games or scrimmage, but may practice individual shooting or dribbling, which would not pose a risk for contact.

If you have any questions or concerns, contact school's athletic trainer, student's physician, or Shelly Jones, ATC at: [Shelly@rugbyoregon.com](mailto:Shelly@rugbyoregon.com)