

Summary and Agreement Statement of the 2nd International Conference on Concussion in Sport, Prague 2004

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Return to Play Protocol

As described above, the majority of injuries will be simple concussions and such injuries recover spontaneously over several days. In these situations, it is expected that an athlete will proceed rapidly through the stepwise return to play strategy. During this period of recovery in the first few days following an injury, **it is important to emphasise to the athlete that physical AND cognitive rest is required.** Activities that require concentration and attention may exacerbate the symptoms and as a result delay recovery.

The return to play following a concussion follows a step wise process:

1. No activity, complete rest. Once asymptomatic, proceed to level 2.
2. Light aerobic exercise such as walking or stationary cycling, no resistance training.
3. Sport specific exercise (eg, skating in hockey, running in soccer), progressive addition of resistance training at steps 3 or 4.
4. Non-contact training drills.
5. Full contact training after medical clearance.
6. Game play.

With this stepwise progression, the athlete should continue to proceed to the next level if asymptomatic at the current level. If any post concussion symptoms occur, the patient should drop back to the previous asymptomatic level and try to progress again after 24 hours. In cases of complex concussion, the rehabilitation will be more prolonged and return to play advice will be more circumspect. It is envisaged that complex cases should be managed by physicians with a specific expertise in the management of such injuries. An additional consideration in return to play is that concussed athletes should not only be symptom free but also should not be taking any pharmacological agents/medications that may effect or modify the symptoms of concussion. Where antidepressant therapy may be commenced during the management of a complex concussion, the decision to return to play while still on such medication must be considered carefully by the clinician concerned (see below). In professional sport, where there are team physicians experienced in concussion management as well as access to immediate (ie, sideline) neuro-cognitive assessment, return to play management is often more rapid however **must still follow the same basic principles; namely full clinical and cognitive recovery before consideration of return to play.**