



VOLLEYBALLBC

# Return to Play Guidelines

Please note that this process is to be guided by a medical professional who will progress to the next stage based on re-evaluation, time, and symptoms present. If symptoms reoccur, an athlete will be moved back a stage



	TITLE	DESCRIPTION	DO	DO NOT	GOALS
<b>1</b>	<b>SYMPTOM - LIMITED PHYSICAL ACTIVITY</b>	Encourage light physical and cognitive activities that do not provoke symptoms to a significant degree or place you at risk for hitting your head. Remain here until symptom-free for 24-48 hours and then attempt Stage 2. If you are having trouble with Stage 2, consult your healthcare provider.	Light walks (15- 20 mins). Household chores. Limit screen time.	Physical or cognitive activities that make your symptoms worse or risk a hit to your head.	Gradual reintroduction of light exercise and activities of daily living.
<b>2</b>	<b>LIGHT PHYSICAL ACTIVITY</b>	You should be evaluated by your healthcare provider with a graded exercise test (eg. Buffalo Concussion Treadmill test) to determine your exercise tolerance. Once completed your healthcare provider can provide recommendations for you.	Light walking, jogging or weight training.	Physical activity that makes symptoms worse, risk another hit to the head, or sport specific activities.	Increase heart rate to allow brain to adapt to increase in blood flow. Test will determine pre-symptom heart rate to set the exercise level.
<b>3</b>	<b>SPORT SPECIFIC ACTIVITY</b>	You can return to non-contact practice. This is the first step to safely returning to sport. Focus on light individual drills or exercises. Avoid contact, increasing your heart rate too much, or continuing if you have symptoms.	Standing Serving. Passing. Setting. Standing hitting drills.	Scrimmages. Pepper. Hitting drills w/ full approach. Blocking drills. Defensive drills. Sprinting. Resistance training.	Start to add movements that mimic what the athlete will do in their sport.
<b>4</b>	<b>NON-CONTACT TRAINING DRILLS</b>	Higher intensity, non-contact practice with the team. Still avoiding drills that could cause hit to head or that have contact. Resistance training can begin. Gradually increase intensity and start to push yourself.	Serving. Passing. Setting. Hitting drills with full approach. Sprinting or agility drills. Individual blocking drills.	Do not engage in contact or drills with a chance for contact. Do not continue if you develop symptoms	Higher intensity drills, higher heart rate, more cognitive involvement.
<b>5</b>	<b>MEDICAL CLEARANCE STAGE</b>	Should be overseen by your health care professional. Should only be attempted once you have successfully returned to school/work with no restrictions and are completely asymptomatic with physical and cognitive activity.	Should involve intensive dynamic physical exertion testing and/or pre-injury baseline testing to ensure no lingering issues.	Do not continue if you develop symptoms. Stop and notify your healthcare professional.	Return to full practices. No longer at risk of second impact syndrome
<b>6</b>	<b>FULL RETURN</b>	You are now cleared to return to full contact activity.	Participate in at least 1 full practice before a game.	Do not continue if you develop symptoms.	Pre-concussion functioning at full capacity.