# NCHSAA Concussion Return to Play Protocol

*The NCHSAA Concussion Return to Play (RTP) Protocol is REQUIRED to be completed in its entirety for any concussed student-athlete before they are released to resume full participation in athletics. A step-by-step progression of physical and cognitive exertion is widely accepted as the appropriate approach to ensure a concussion has resolved, and that a student-athlete can return to athletics safely. The NCHSAA Concussion (RTP) Protocol has been designed using this step-by-step progression.*

*The NCHSAA Concussion (RTP) Protocol can be monitored by any of the following Licensed Health Care Providers (LHCP): Licensed Physician (MD/DO), Licensed Athletic Trainer, Licensed Physician Assistant, Licensed Nurse Practitioner, or a Licensed Neuropsychologist. A First Responder may monitor the RTP Protocol if a LHCP is unavailable.*

*After monitored completion of each stage without provocation/recurrence of signs and/or symptoms, a student-athlete is allowed to advance to the next stage of activity. The length of time for each stage is at least 24 hours.*

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Name of Student-Athlete: ________________________________ Sport: ________________________________ Male/Female

DOB: __________________ Date of Injury: __________________ Date Concussion Diagnosed: _________________

<table>
<thead>
<tr>
<th>STAGE</th>
<th>EXERCISE</th>
<th>GOAL</th>
<th>DATE COMPLETED</th>
<th>COMMENTS</th>
<th>MONITORED BY</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>20-30 min of cardio activity: walking, stationary bike.</td>
<td>Perceived intensity/exertion: Light Activity</td>
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<td>2</td>
<td>30 min of cardio activity: jogging at medium pace. Body weight resistance exercise (e.g. push-ups, lunge walks) with minimal head rotation x 25 each.</td>
<td>Perceived intensity/exertion: Moderate Activity</td>
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<tr>
<td>3</td>
<td>30 minutes of cardio activity: running at fast pace, incorporate intervals. Increase repetitions of body weight resistance exercise (e.g. sit-ups, push-ups, lunge walks) x 50 each. Sport-specific agility drills in three planes of movement.</td>
<td>Perceived intensity/exertion: Hard Activity, changes of direction with increased head and eye movement</td>
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<td>4</td>
<td>Participate in non-contact practice drills. Warm-up and stretch x 10 minutes. Intense, non-contact, sport-specific agility drills x 30-60 minutes.</td>
<td>Perceived intensity/exertion: High/Maximum Effort Activity</td>
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</tbody>
</table>

**First Responder Verification**

If the RTP Protocol has been monitored by a First Responder (FR) then the FR must sign below attesting that they have reviewed the progress of this student-athlete (S-A) through stage 4 electronically, by phone, or in person with the Licensed Health Care Provider (LHCP) and that the S-A was cleared by the LHCP to complete stage 5.

FR Signature: __________________________________________ Date: ______________

**LHCP signs RTP Form**

The LHCP overseeing the student-athlete’s (S-A) care is notified that the S-A remained asymptomatic after stage 5 was completed. The Return to Play (RTP) Form MUST be signed before the S-A is allowed to resume full participation in athletics. If signs or symptoms occur after stage 5 the S-A MUST return to the LHCP overseeing the S-A’s care.

The individual who monitored the student-athlete’s (RTP) Protocol MUST sign and date below when stage 5 is successfully completed.

By signing below, I attest that I have monitored the above named student-athlete’s return to play protocol through stage 5.

Signature of Licensed Physician, Licensed Athletic Trainer, Licensed Physician Assistant, Licensed Nurse Practitioner, Licensed Neuropsychologist, or First Responder (Please Circle) ____________________________ Date ______________

Please Print Name ____________________________ Approved for 2019-20 School Year