

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.

Name of Student- Athlete: ______ Male/Female Male/Female

DOB: _____ Date of Injury: _____ Date Concussion Diagnosed: _____

STAGE	EXERCISE	GOAL	DATE COMPLETED	COMMENTS	MONITORED BY
1	20-30 min of cardio activity: walking,	Perceived			
	stationary bike.	intensity/exertion:			
		Light Activity			
2	30 min of cardio activity: jogging at	Perceived			
	medium pace. Body weight resistance	intensity/exertion:			
	exercise (e.g. push-ups, lunge walks)	Moderate Activity			
	with minimal head rotation x 25 each.				
3	30 minutes of cardio activity: running	Perceived			
	at fast pace, incorporate intervals.	intensity/exertion:			
	Increase repetitions of body weight	Hard Activity,			
	resistance exercise (e.g. sit-ups, push-	changes of			
	ups, lunge walks) x 50 each. Sport-	direction with			
	specific agility drills in three planes of	increased head and			
	movement.	eye movement			
4	Participate in non-contact practice	Perceived			
	drills. Warm-up and stretch x 10	intensity/exertion:			
	minutes. Intense, non-contact, sport-	High/Maximum			
	specific agility drills x 30-60 minutes.	Effort Activity			
First	If the RTP Protocol has been monitored by a First Responder (FR) then the FR must sign below attesting that they have reviewed the				
Responder Verification	progress of this student-athlete (S-A) through stage 4 electronically, by phone, or in person with the Licensed Health Care Provider (LHCP)				
verification	and that the S-A was cleared by the LHCP to complete stage 5.				
	FR Signature: Date:				te:
5	Participate in full practice. If in a contact sport, controlled				
	contact practice allowed.				
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