RETURN TO PLAY for PATHWAYS PLAYERS

APPENDIX 3 - RETURN TO PLAY FOR PATHWAY PLAYERS

AC Concussion RTP Process		
Stage	Activity	Progress timelines and rationale
Stage 1	On day of concussion - relative inactivity rest of the next 24 hours (physical/cognitive)	24 hours relative inactivity (physical/cognitive) – no training / work / school etc. Can progress to stage 2 once symptoms resolve, and after a minimum of 24 hours.
Stage 2	Light aerobic exercise e.g. walk or light stationary bike	If symptoms remain resolved after Stage 2 – progress to Stage 3 activity. Progression to the next stage should not be until 48 hours later (earliest).
Stage 3	Cricket specific exercise with very low risk of head impact such as catching or ground fielding drills, batting to low risk throwdowns.	If symptoms remain resolved after Stage 3 – progress to Stage 4 activity. Progression to the next stage should not be until 72 hours later (earliest).
Stage 4	Higher intensity exercise with low risk of head impact (e.g. High intensity cardio / resistance training, batting to spin only)	If symptoms remain resolved after Stage 4 - progress to Stage 5 activity. Progression to the next stage should not be until 72 hours later (earliest).
Stage 5	Return to full unrestricted training	If symptoms remain resolved after Stage 5 and Cognigram returned to baseline – can be cleared to RTP only after doctor review. RTP should be no sooner than Day 14.
Stage 6	Earliest possible RTP = Day 14	Must remain asymptomatic for 12 consecutive days before returning to play. The temporary exacerbation of mild symptoms with exercise is acceptable, as long as the symptoms quickly resolve at the completion of exercise, and as long as the exercise-related symptoms have completely resolved before resumption of cricket specific training,