

## PACIFIC NORTHWEST AMATEUR HOCKEY ASSOCIATION CONCUSSION EVALUATION AND RETURN TO SPORT PROTOCOL



This form is a resource. A healthcare provider is not required to use it; an official medical release with the necessary information is acceptable.

This form is adapted from the following sources:

USA Hockey Concussion Management Program (June 2017):

http://assets.ngin.com/attachments/document/0042/6418/USA Hockey Concussion Management Program 2017.doc; as well as the Acute Concussion Evaluation (ACE) care plan on the CDC website

(https://www.cdc.gov/headsup/index.html).

Athlete's Name:			
Athlete's Date of Birth:	Date of Su	spected Injury:	Date of Evaluation:
Cause/Location of Suspec	ted Injury:		
This athlete: HAS	HAS NOT rece	eived a diagnosis of	concussion.
Accepted evaluators are the scope of his or her p	-	ed in the evaluation a	nd management of concussions, acting within
An official medical relea	se form is an acceptable alte	ernate to the use of th	is form to return an athlete to participation.
Evaluator's Name:			
Evaluator's Licensed Medica	l Designation:	Signature:	
Evaluator's Address:			
Office Phone:		Fmail:	



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## **Graduated Return-to-Sport Strategy**

http://assets.ngin.com/attachments/document/0042/6418/USA Hockey Concussion Management Program 2017.doc

Stage	Aim	Activity	Goal of each step
1	Symptom- limited activity	Daily activities that do not provoke symptoms	Gradual reintroduction of work/school activities
2	Light aerobic exercise	Walking or stationary cycling at slow to medium pace. No resistance training	Increase heart rate
3	Sport-specific exercise	Running or skating drills. No head impact activities	Add movement
4	Non-contact training drills	Harder training drills, eg, passing drills. May start progressive resistance training	Exercise, coordination and increased thinking
5	Full contact practice	Following medical clearance, participate in normal training activities	Restore confidence and assess functional skills by coaching staff
6	Return to sport	Normal game play	

- After a brief period of rest (24–48 hours after injury), patients can be encouraged to become
  gradually and progressively more active as long as these activities do not bring on or worsen their
  symptoms.
- There should be at least 24 hours (or longer) for each step of the progression. If any symptoms worsen during exercise, the athlete should go back to the previous step.
- Resistance training should be added only in the later stages (stage 3 or 4 at the earliest).