

Attachment C  
**DCAYFL Progressive Return to Play Protocol**

**Athlete's Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

Following a concussion, an athlete should return to sports practices under the supervision of an appropriate health care professional. When available, be sure to work closely with your team's certified athletic trainer.

DCAYFL follows a 5 step return to play protocol that begins after the athlete presents with written clearance from his/her physician and is completely symptom free. Each step takes 1 full day. On days 1-3, the athlete does not wear football equipment and these activities can be done at home with parental supervision. If at any point in the process, the athlete reports any concussion symptoms at all (ex: headache, sensitivity to light, etc.) they are to return home and rest until they are completely symptom free. They stay on that Day, until they can pass it. Please write in the athlete's response, note the date and either the coach or parent supervising the athlete initials the form.

**Day 1:** Are you experiencing any concussion symptoms now? \_\_\_\_\_, Date \_\_\_\_\_.

Coach/parent initials \_\_\_\_\_.

If, "No.", then proceed with the Day 1 protocol of light aerobic activity, 5-10 minutes of low impact activity such as an exercise bike or walking. No weightlifting at this point.

**Day 2:** Are you experiencing any concussion symptoms now? \_\_\_\_\_, Date \_\_\_\_\_.

Coach/parent initials \_\_\_\_\_.

If, "No.", then proceed with the Day 2 protocol of moderate intensity exercise, moderate jogging, brief running, moderate intensity weightlifting, for example.

**Day 3:** Are you experiencing any concussion symptoms now? \_\_\_\_\_, Date \_\_\_\_\_.

Coach/parent initials \_\_\_\_\_.

If, "No.", then proceed with the Day 3 protocol of heavy non-contact physical activity, such as sprinting/running, high-intensity stationary biking, regular weightlifting routine, non-contact football drills in all 3 planes of movement.

**Day 4:** Are you experiencing any concussion symptoms now? \_\_\_\_\_, Date \_\_\_\_\_.

Coach/parent initials \_\_\_\_\_.

If, "No.", then proceed with the Day 4 protocol of a return to controlled contact in practice. Use a quick whistle and limited full contact drills to allow the athlete to return comfortably to play.

**Day 5:** Are you experiencing any concussion symptoms now? \_\_\_\_\_, Date \_\_\_\_\_.

Coach/parent initials \_\_\_\_\_.

If, "No.", then proceed to full contact practice drills, scrimmage and game play.

**The athlete has now returned to full play.**

After the athlete returns to full play, the coach and parents need to continuously communicate with the athlete and each other through the remainder of the season to ensure that no concussion symptoms return.

If any concussion symptoms recur, the athlete should see their personal physician again.