



ECU CRW Post Concussion Treatment Plan

You have been flagged as someone who has suffered a hit to the head and need to be evaluated by the CRW Athletic Trainers. Please schedule your evaluation and read this document for further instructions.

What Now?

Participants suspected of having a Sport Related Concussion (SRC) or other Traumatic Brain Injury (TBI) will be referred for evaluation to a sports medicine professional with concussion evaluation experience. They will be suspended from IM Leagues, facility access and will not be allowed to start the return to play progression until they provide the ECU CRW Athletic Trainers (ATs) with documentation of clearance to start the return to play progression from a sports medicine physician. The injured participant needs to follow up with the AT regularly to monitor symptoms. If the participant does not follow treatment plan accordingly, they put their club at risk for a 1-year suspension. See Club Sports Handbook for more details.

Return to Play Progression

After sustaining a concussion, members will be required to go through the return to play (RTP) progression while supervised by an ECU CRW AT.

After a brief period of rest during the acute phase (24–48 hours), they can be encouraged to become gradually and progressively more active while staying below their cognitive and physical symptom-exacerbation thresholds (i.e., activity level should not bring on or worsen their symptoms) under the supervision of their AT. It is reasonable for participants to avoid vigorous exertion while they are recovering. There should be at least 24 hours (or longer) for each step of the progression. If any symptoms worsen during exercise, the participant should go back to the previous step. Closely monitored active rehabilitation programs involving controlled sub-symptom-threshold, submaximal exercise has been shown to be safe and may be of benefit in facilitating recovery. Resistance training should be added only in the later stages (stage 3 or 4 at the earliest). Refer to Figure 1 for more information.

Figure 1: Graduated Return to Sport/Play Strategy

Table 1 Graduated return-to-sport (RTS) strategy			
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	

Reinstatement

After the RTP has been completed, the AT deems the participant safe to return to activity, and the physician has not requested a follow up before their return, the AT will unsuspend the participant from IM Leagues and the membership portal. This will allow them to participate in intramural sports and regain access to the facilities. Only the ATs can give them this access again when the suspensions are due to injuries.

Contact the CRW Athletic Trainers at crwathletictraining@ecu.edu with comments, questions or concerns