Return to Play Protocol

As set forth by 641—54.2(280), the Iowa High School Athletic Association and Iowa Girls High Schools Athletic Union are responsible for developing and disseminating the return to play protocol following a sport related concussion.

Following an initial period of relative rest (approximately 24-48 hours after injury), students should follow a gradual, stepwise and symptom based return to play protocol under the guidance and supervision of a licensed healthcare provider. Each step of the return to play protocol should be separated by a minimum of 24 hours and completion of the protocol must be a minimum of 7 days. Each student's recovery timeline will be individualized with some requiring a delayed protocol. Students should continue to follow a return to learn progression to reintegrate back to academics. Final return to play clearance will occur once a student is fully back to the classroom and has completed the return to play protocol.

Step	Activity	Goal
Step 1 (approx. 24-48 hours after injury) Symptom limited activity	Daily activities that do not exacerbate symptoms (e.g walking, more controlled environment)*	Gradual re-introduction to school and work
Step 2: Aerobic Exercise • 2a Light Exercise (up to 55% maxHR) • 2b moderate exercise (up to 70% maxHR)	Stationary cycle or walking at slow-medium pace at 55% to 70% of Maximum heart rate. * Light resistance training if more than mild/brief increase in symptom severity *	Increase heart rate
Step 3 Individual sport specific exercise	Sport specific training away from team environment (running, individual skill drills). No activities at risk of head impact*	Add movement, change direction
*Steps 1-3 may be completed while symptomatic with no more than 0-2 point increase in symptoms on a 10 point scale for less than an hour Steps 4-6 can be done only if no concussion related symptoms are present and the student has returned to pre-injury cognitive activities and school without accommodations		
Step 4 Non-contact training drills	Exercise to high intensity including more challenging drills (passing, multiplayer training). This can be integrated into a team environment	Usual intensity of exercise, coordination and thinking
Step 5 Unrestricted contact practice	Participate in normal training activities (e.g contact practice)	Restore confidence and assess functional skills
Step 6 Return to sport	Normal game play	

Steps 1-3 may be started while the student is still symptomatic and being monitored by a licensed healthcare provider. Steps 4-6 must be done with the student fully returned to academics and demonstrating no symptoms. Ensure that students are reintegrating into the classroom through a return to learn plan. Using a stepwise approach to returning back to academics in essential to recovery.