



TCYFL Protocol for Return to Play after a Suspected Head Injury

Background: Since 2012, in line with State Laws, The Chicagoland Youth Football League (TCYFL) has established playing rules regarding potential head injuries. The rule requires “any player who exhibits signs, symptoms, or behaviors consistent with a concussion (such as loss of consciousness, headache, dizziness, confusion, or balance problems) shall be immediately removed from the game and shall not return to play until cleared by an appropriate health care professional.” In applying that rule, it has been determined that only certified athletic trainers and physicians licensed to practice medicine in all its branches can clear an athlete to return to play the day of a contest in which the athlete has been removed from the contest for a suspected head injury.

Policy: In cases when an athlete is not cleared to return to play the same day as he/she is removed from a contest or practice following a possible head injury (i.e., concussion), the athlete shall not return to play or practice until the athlete is evaluated by and receives written clearance from a licensed health care provider to return to play.

For the purposes of this policy, licensed health care providers consist of physicians licensed to practice medicine in all its branches in Illinois/Wisconsin and certified athletic trainers working in conjunction with physicians licensed to practice medicine in all its branches in Illinois/Wisconsin.

Once the athlete has received a written letter identifying clearance from a licensed health care provider, they may return to play. **The Player clearance letter must be sent to Dave Jacobs at jacobsdave@comcast.net.** A parent’s consent is not a sufficient means for an athlete to return to participation. Athletes who have not been cleared to participate cannot be in a uniform for any games.

Rehabilitation Stage	Functional Exercise at each stage of rehabilitation	Success Goal of Each Stage
1. No activity	Complete physical and cognitive rest	Recovery (Symptom free at rest)
2. Light aerobic exercise	Walking, swimming or stationary cycling keeping intensity <70% Maximum Predicted Heart Rate. No resistance training	Increase heart rate without symptoms
3. Sport-specific exercise	Running keeping intensity <70% Maximum Predicted Heart Rate.	No head impact activities. Add movement
4. Non-contact training drills	Progression to more complex training drills (e.g. passing drills). May start progressive resistance training.	Increase exercise, coordination, cognitive load without symptoms.



5. Full contact practice	Following medical clearance, participate in normal training activities.	Restore confidence, assessment of functional skills by coaching staff
6. Return to play	Normal game play	

** Protocol established from: "Consensus statement on concussion in sport – The 3rd International Conference on concussion in sport, held in Zurich, November 2008." *Journal of Clinical Neuroscience*. (2009)

Return to Play: It is determined that a player is able to return to play when they are symptom free at rest and at exertion and have been evaluated and cleared to return. Additionally if one of the concussion management tools made available have been utilized in the player's evaluation and the player has returned to a baseline state of the tests they were administered prior to sustaining the injury. **An athlete will not return to participation the same day as a concussion event. When returning athlete to play, they will follow the six step symptom-limited program outlined above.** Steps 2 (Light aerobic exercise) and step 3 (Sport-specific exercise) of the symptom-limited program may best be performed/evaluated by a trained medical professional (i.e. Physical Therapist or Certified Athletic Trainer).

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