EXERCISE PROGRESSION AFTER CONCUSSION

Each course of action will have to be adjusted to the student's individual needs.



STAGE OF REHABILITATION	GOALS	RECOMMENDED EXERCISES
		Walking, stretching, slow bodyweight squats (10-15 minute trials)
STAGE 1 Target Heart Rate: 30-40% of maximum exertion	Prevent deconditioning (prevent "sluggish, couch potato effect" from too much rest)	Upper extremity (UE) very light hand weights; resistive band rowing; lower extremity (LE) straight leg raises
Recommendations: Exercise in a quiet and safe area; no impact activities; may try very limited balance exercises if tolerated.	 Stretch and walk at least twice per day No running, no contact; exercise with movement in neutral planes (avoid fast head movements or bending over) 	Gentle neck range of motion; shoulder, pectoralis, hamstring, hip flexor, quadriceps, calf stretching ("top to bottom stretching" of all large muscle groups)
10-15 minutes of light cardio exercise trials. Multiple trials can be done if symptoms are not worsened.	Level of exercise: you can still breathe through your nose comfortably	Proceed to Stage 2 when you can attend full days at school (with academic adjustments if necessary) and symptoms are minimal
STAGE 2	Light to moderate aerobic conditioning, resistance training, stretching and balance	Stationary bike; light swimming; resistive band exercises (UE/LE); wall squats; lunges; step-up/down
Target Heart Rate: 40-60% of maximum exertion Recommendations: May use various exercise equipment. Some mild positional	Moderate balance activities; perform with minimal head position changes	Any Stage 1 stretching, active stretching as tolerated (lunge walks; side-to-side groin stretch; walking hamstring stretch)
changes and head movement introduced	Light/moderate work with resistance bands and light dumbbells Level of exercise: you have to breathe through your mouth but can talk without pausing to catch your breath	If muscular neck pain persists, continue to treat with massage, shoulder exercises, and gentle stretch
10-15 minutes of cardio exercise trials.		Proceed to Stage 3 when school is tolerated and you are symptom free
STAGE 3 Target Heart Rate: 60-80% of maximum exertion Recommendations: Any environment ok for exercise (indoor/outdoor); integrate strength, conditioning & balance exercises; can incorporate concentration challenges (counting exercises, visual games) Moderately aggressive aerobic and strength exercises. 20-30 minutes of cardio and strength training exercise trials.	Running, jumping, plyometrics (no contact) Exercise with head movements in all planes, including quickly bending forward if tolerated Challenging balance exercises, challenging positional changes Level of exercise: you have to breathe through your mouth and catching your breath impedes ability to talk continuously (exercise is not at the level of maximal exercise intensity)	Treadmill (jogging); stationary or outside bike; elliptical; resistive weight training including free weights; dynamic strength activities Half speed agility drills (zig-zag runs, side shuffle, ball toss, balance disc; squats & lunges on BOSU ball); OK for noncontact ice skating, stick handling, light ball kicking, batting cage Proceed to Stage 4 after several days of Stage 3 success and when academic adjustments are not needed (full academic success)
STAGE 4 Target Heart Rate: 80% of maximum exertion Recommendations: Continue to avoid contact activity, but resume aggressive training in all environments if symptoms are gone.	Full intensity NON-CONTACT physical training • Sport-specific activities and drills • Full aerobic and strength exercises Level of exercise: At the level of maximal intensity	Graded treadmill; sprint conditioning and interval training; sport-specific drills/training 35- to 45-minute trials Proceed to Stage 5 (contact activities) ONLY after evaluation and full clearance by your treating clinician
STAGE 5	Continue aggressive strength/conditioning exercises	Programs typically led by team athletic trainers or coaches
Target Heart Rate: Full exertion Recommendations: Initiate contact activities as appropriate to sport activity, full exertion for return to competition.	 Sport-specific activities and drills Consider isometric neck/periscapular strengthening and proprioception training to prevent future injuries 	Practice θ game intensity training Typically, at least two practices are completed before game play
DO NOT PROCEED TO CONTACT ACTIVITIES UNTIL CLEARANCE	Full contact activities only if symptoms do not return	Immediately report any return of symptoms

^{*}Max HR is (220-your age); Target Heart Rates calculated by Karvonen's equation: ((Max HR – Resting HR) X Target Percentage) + Resting HR



