



**HOCKEY
WALES**

Player Guidance

June 2020

Return to Play Following Concussion



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Why have I been given this document?

These guidelines are for players who have been diagnosed with a concussion, and who must undertake a graduated return to play (GRTP) process prior to returning to hockey.

A concussion **MUST** be taken seriously, and the guidelines given by your physiotherapist must be adhered to.

This document is designed as an overview of the GRTP process, however you will be in regular contact with your physiotherapist during this time who will guide your specific case. If you have any questions about this document or aren't sure about each step you should get in touch to gain further clarification.

What is a Concussion?

- Concussion is a mild traumatic brain injury caused by either direct or indirect forces to the head.
- Concussion typically results in the rapid onset of short-lived impairment of brain function.
- Loss of consciousness occurs in less than 15% of concussion cases and whilst a feature of concussion, loss of consciousness is not a requirement for diagnosis.
- Concussion results in a disturbance of brain function (e.g. memory disturbance, balance problems or symptoms) rather than damage to structures such as blood vessels, brain tissue or fractured skull.

What are the main symptoms?

Symptoms following concussion vary between each athlete, and the concussion you experience may be very different to that of your team-mate or friend.

Some common symptoms include:

- Headaches
- Nausea
- Sensitivity to noise and light
- Feeling 'in a fog'
- Difficulty concentrating

This list is not exhaustive, and there are many other symptoms you may experience either in combination or in isolation, and with varying severity.

How long is the recovery?

It is widely recognized that children or adolescents are more susceptible to concussion injuries, have more significant memory and mental processing issues, and may take longer to recover.

Concussion symptoms typically resolve spontaneously within 10-14 days, however some may take as long as a month. A small number will have prolonged symptoms beyond 4 weeks and may require onward referral to a specialist.

If your symptoms get progressively worse, you **MUST** contact your physiotherapist or seek further medical help.

A summary of the minimum rest period and different length GRTP stages depending on age is shown below:

Players up to (but not including) 18 years of age

- Minimum rest period 2 weeks and symptom free
- GRTP to follow rest, with each stage lasting 48 hours
 - Earliest return to play - Day 23 post injury

Adult - 18 years of age and over

- Minimum rest period 24 hours and free of symptoms
- GRTP to follow rest, with each stage lasting 24 hours
 - Earliest return to play - Day 6 post injury



A GRTP should only commence if the player:

- has completed the minimum rest period for their age
- is symptom free and off medication that modifies symptoms of concussion.

Medical or approved healthcare professional clearance is required prior to commencing a GRTP.

Graduated return-to-play (GRTP) strategy, (McCrory et al., 2017)

Stage	Aim	Activity	Goal of each step
1	Symptom-limited activity/ Rest Period- As prescribed by the player's age (see above)	Gentle daily activities that do not provoke symptoms- both physical and cognitive (studying and workplace engagement)	Gradual reintroduction of work/school activities only as symptoms do not worsen
2	Light aerobic exercise <70% max predicted heart rate	Walking or stationary cycling at slow to medium pace. No resistance training/ gym	Increase heart rate
3	Sport-specific exercise	Running drills. 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	Exercise, coordination and increased cognitive load/ 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	

Your physiotherapist will guide you through this GRTP process, and you should be in touch with them following each successful stage completion prior to moving onto the next stage. It is imperative that you only complete the level of activity specified at that stage. Do not be tempted to do more than discussed with your physiotherapist, as you may risk prolonging your return to play through the development of more severe symptoms.

A return to play can only be undertaken following the completion of this GRTP and clearance by your physiotherapist, or another medical professional decided upon by your physiotherapist.

References:

McCrory, P., Meeuwisse, W., Dvorak, J., Aubry, M., Bailes, J., Broglio, S., Cantu, R.C., Cassidy, D., Echemendia, R.J., Castellani, R.J., Davis, G.A., Ellenbogen, R., Emery, C., Engebretsen, L., Feddermann-Demont, N., Giza, C.C., Guskiewicz, K.M., Herring, S., Iverson, G.L., Johnston, K.M., Kissick, J., Kutcher, J., Leddy, J.J., Maddocks, D., Makdissi, M., Manley, G.T., McCrea, M., Meehan, W.P., Nagahiro, S., Patricios, J., Putukian, M., Schneider, K.J., Sills, A., Tator, C.H., Turner, M. and Vos, P.E., 2017. Consensus statement on concussion in sport-the 5th international conference on concussion in sport held in Berlin, October 2016. *British Journal of Sports Medicine*, 51(11), pp. 838-847.

