



Return-to-play guidelines following concussion

Stage	Activity	Cycling Specific Exercise	Objective
1	No physical activity	No activity	Recovery and elimination of symptoms. Return to school. Obtain medical clearance.
2	Light aerobic activity	10-15 min of walking, or STATIONARY bike	Add light aerobic activity and monitor for symptoms.
3	Moderate aerobic activity, light resistance training	20-30 min cycling on pavement, with minimal elevation change. Push-ups/core/body weight strength exercises	Increase aerobic activity, add resistance training and monitor for symptoms
4	Hard aerobic activity, coordination, increased resistance training	30-60 min cycling on uneven surfaces, include hills. Progressive resistance training if desired	Increased intensity and coordination, monitor for symptoms
5	Full practice	Normal training activities, return to singletrack	Restore confidence, increased processing, coaches assess skills/coordination, monitor for symptoms
6	Return to sport	Normal riding and racing	Return to activity without restrictions

- At least 24 hours for each step of the progression
- If any increase/return of symptoms, athlete should return to previous step until symptoms resolve
- Athlete should be completely symptom free at rest and during exertion prior to returning to full participation
- If symptoms persist, athlete should be referred back to physician/practitioner for further evaluation/referral

May KH, et al. Pediatric Sport Specific Return to Play Guidelines Following Concussion. *The International Journal of Sports Physical Therapy* (9)2; April 2015; 242-255.

McCroly P, Meeuwisse W, Dvorak J, et al. Consensus statement on concussion in sport – the 5th international conference on concussion in sport held in Berlin, October 2016. *Br J Sports Med* 2018; 838-847

Elbin RJ, et al. Removal From Play After Concussion and Recovery Time. *Pediatrics* 138 (3); September 2016.