

# Concussion Clearance

Name of Patient: \_\_\_\_\_

DOB: \_\_\_\_\_ Date Seen: \_\_\_\_\_

I, \_\_\_\_\_, MD/DO \_\_\_\_\_ (medical license #) have been trained in education and management of concussion. I saw patient \_\_\_\_\_ and have been managing care from \_\_\_\_\_ to \_\_\_\_\_. I certify that the patient has successfully completed the full 7 day return to play protocol. Which is in accordance with CIF guidelines. He/she is now symptom-free and cleared to return to full participation (Level IV).

\_\_\_\_\_(MD/DO Signature) Phone # \_\_\_\_\_

\_\_\_\_\_(MD/DO Printed Name) Address: \_\_\_\_\_

Date & Initials	Stage	Activity	Exercise Example	Objective of the Stage
	I	No physical activity	<ul style="list-style-type: none"> <li>No activities requiring exertion (weight lifting, jogging, P.E. classes, practice)</li> </ul>	<ul style="list-style-type: none"> <li>Recovery and elimination of symptoms</li> </ul>
		Light aerobic activity	<ul style="list-style-type: none"> <li>10-15 min of walking or stationary biking</li> </ul>	<ul style="list-style-type: none"> <li>Increase heart rate to ≤50% of perceived max. exertion (e.g., &lt; 100 beats per minute)</li> <li>Monitor for symptom return</li> </ul>
	II-B	Moderate aerobic activity <i>(Light resistance training)</i>	<ul style="list-style-type: none"> <li>20-30 min jogging or stationary biking</li> <li>Body weight exercises (squats, planks, push-ups), max 1 set of 10, ≤10 min total</li> </ul>	<ul style="list-style-type: none"> <li>Increase heart rate to 50-75% max. exertion (e.g., 100-150 bpm)</li> <li>Monitor for symptom return</li> </ul>
	II-C	Strenuous aerobic activity <i>(Moderate resistance training)</i>	<ul style="list-style-type: none"> <li>30-45 min running or stationary biking</li> <li>Weight lifting ≤ 50% of max weight</li> </ul>	<ul style="list-style-type: none"> <li>Increase heart rate to &gt; 75% max. exertion</li> <li>Monitor for symptom return</li> </ul>
	II-D	Non-contact training with sport-specific drills <i>(No restrictions for weightlifting)</i>	<ul style="list-style-type: none"> <li>Non-contact drills, sport-specific activities (cutting, jumping, sprinting)</li> <li>No contact with people, padding or floor/mat</li> </ul>	<ul style="list-style-type: none"> <li>Add total body movement</li> <li>Monitor for symptom return</li> </ul>
	III	Limited contact practice	<ul style="list-style-type: none"> <li>Controlled contact drills (no scrimmaging)</li> </ul>	<ul style="list-style-type: none"> <li>Increase acceleration, deceleration and rotational forces</li> <li>Restore confidence, assess readiness for return to play</li> <li>Monitor for symptom return</li> </ul>
		Full contact practice Full unrestricted practice	<ul style="list-style-type: none"> <li>Return to normal training, with contact</li> <li>Return to normal unrestricted training</li> </ul>	

**MANDATORY:** You must complete at least ONE contact practice before return to competition, or if non-contact sport, ONE unrestricted practice.  
*(If contact sport, highly recommend that Stage III be divided into 2 contact practice days as outlined above.)*

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**sportsmedicine@chla.usc.edu • 323.800.7700**

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