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Return to Play: A Common Sense Guide For Coaches



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Return to Play

Injuries are a common occurrence for those who exercise. Whether it be an overuse problem (tendinitis) or an acute traumatic injury (fracture or sprain), many injuries require restriction of and/or change in your exercise program.

The amount of time away from exercise varies according to the type of injury, severity of injury, body part involved, and other situational factors. Although there are steps to promote healing, it still takes time.

Injuries involve dysfunction or disruption of some component of the musculoskeletal system. Depending on the type and severity of the injury, these may cause pain, swelling, stiffness, weakness, or decreased range of motion. Improvement in these symptoms occurs with the healing process, but this does not necessarily mean the injury is completely healed..

Actions You Can Take to Decrease or Control the Initial Symptoms

Protect: Protect the affected area from further injury.

Rest: Initially resting and protecting the injured part will result in less swelling and a more rapid recovery.

Ice: Ice packs on the affected area decrease swelling and help control pain. This is especially helpful in the first 48 to 72 hours after injury, but can continue to be used to minimize discomfort.

Compression: Wrapping or bracing of the injured part allows for control of initial swelling and decreases motion.

Elevation: Elevation of the injured part, especially if it is kept above the heart, helps decrease swelling and pain.

Healing Time

As stated before, healing time depends on site, severity and type of injury. For example, a mild ankle sprain may heal in two to four weeks, while a fracture of the leg may take eight to 12 weeks. However, healing usually proceeds in certain stages.

- Swelling and pain decreases or disappears in the first 24 to 72 hours.
- Discoloration (bruising) usually subsides within ten to 14 days.
- Range of motion increases over seven to 14 days, although stiffness and weakness may persist.

When an injury occurs, it may result in weakness due to tissue damage and disuse, in addition to decreased control over the damaged body part. Regaining strength and coordination of the injured body part should be considered part of the rehabilitation and healing process, and an injury should not be considered healed until this process is accomplished. Attempting to return to an activity before proper healing of the injury puts you at risk for reinjury or an additional injury. Consultation with a sports medicine professional may aid in the initial treatment and rehabilitation, and the determination of when to return to play.

Guidelines for Return to Play

- Pain-free full range of motion: the injured body part should have full movement and flexibility with little or no discomfort.
- Return of strength: the injured body part should be approximately equal (90-95 percent) to the opposite side before returning to full activity.
- Minimal pain or swelling: some mild discomfort, stiffness and/or swelling during or after exercise is to be expected during the initial return to activity. This responds well to ice therapy.
- Functional retraining: you should be able to perform the specific motions and actions required for your sport effectively before returning to activity. For example, retraining a lower-extremity injury in basketball should

involve the ability to run, stop, change directions, and jump.

- Progressive return to activity: consider starting at 50 percent of normal activity and progress up as tolerated. An informal guideline you can use is to progress activity 10-15 percent increase per week if the previous level of activity does not result in increased symptoms during exercise or the day after exercise.
- Continue general conditioning with cross-training: using an alternative exercise allows maintenance of general cardiovascular fitness while not interfering with the healing of an injury. For example, ankle and knee injuries may do well with bicycling or swimming.
- Mental confidence in ability to do exercise: you must feel that you and your injury are ready to perform at the level required for your particular activity.

If you have any questions about how the above guidelines apply to your particular injury, consultation with a sports medicine professional would be advisable.

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