ACSM Information On...

Return to Play – A Coach's Guide

Injuries are a common occurrence for those who exercise. Whether it is tendinitis or an acute traumatic injury, 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. Depending on the type and severity of the injury, you may experience pain, swelling, stiffness, weakness or decreased range of motion.

A COMPLETE PHYSICAL ACTIVITY PROGRAM

A well-rounded physical activity program includes aerobic exercise and strength training exercise, but not necessarily in the same session. This blend helps maintain or improve cardiorespiratory and muscular fitness and overall health and function. Regular physical activity will provide more health benefits than sporadic, high intensity workouts, so choose exercises you are likely to enjoy and that you can incorporate into your schedule.

ACSM's physical activity recommendations for healthy adults, updated in 2011, recommend at least 30 minutes of moderate-intensity physical activity (working hard enough to break a sweat, but still able to carry on a conversation) five days per week, or 20 minutes of more vigorous activity three days per week. Combinations of moderate- and vigorousintensity activity can be performed to meet this recommendation.

Examples of typical aerobic exercises are:

- Walking
- Running
- Stair climbingCycling
- Rowing
- Cross country skiing
- Swimming.

In addition, strength training should be performed a minimum of two days each week, with 8-12 repetitions of 8-10 different exercises that target all major muscle groups. This type of training can be accomplished using body weight, resistance bands, free weights, medicine balls or weight machines.

CONTROLLING THE INITIAL SYMPTOMS (PRICE)

- **Protect:** Protect the affected area from further injury.
- **Rest:** Rest and protect the injured part at first to experience less swelling and a more rapid recovery.
- Ice: Put ice on the affected area to decrease swelling and help control pain. This is especially helpful in the first 48 to 72 hours after injury.
- **Compression:** Wrap or brace the injured part to allow for control of initial swelling and to decrease motion.
- Elevation: Elevate the injured part, especially if it is kept above the heart, as this helps decrease swelling and pain.

HEALING TIME

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 and bruising usually subsides within ten to 14 days.
- Range of motion increases over seven to 14 days, though stiffness and weakness may persist.



When an injury occurs, it may result in weakness, due to tissue damage and disuse, and 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. Attempting to return to an activity before proper healing of the injury puts you at risk to reinjure yourself.



GUIDELINES FOR RETURN TO PLAY

You should have 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. Ice can be used to alleviate these symptoms.
- Functional retraining: You should be able to effectively perform the specific motions and actions required for your sport 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 as tolerable. An informal guideline you can use is to progress activity 10-15 percent 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: Doing 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, please consult with a sports medicine professional.

STAYING ACTIVE PAYS OFF!

Those who are physically active tend to live longer, healthier lives. Research shows that moderate physical activity – such as 30 minutes a day of brisk walking – significantly contributes to longevity. Even a person with risk factors like high blood pressure, diabetes or even a smoking habit can gain real benefits from incorporating regular physical activity into their daily life.

As many dieters have found, exercise can help you stay on a diet and lose weight. What's more – regular exercise can help lower blood pressure, control blood sugar, improve cholesterol levels and build stronger, denser bones.

THE FIRST STEP

Before you begin an exercise program, take a fitness test, or substantially increase your level of activity, make sure to answer the following questions. This physical activity readiness questionnaire (PAR-Q) will help determine if you're ready to begin an exercise routine or program.

- Has your doctor ever said that you have a heart condition or that you should participate in physical activity only as recommended by a doctor?
- Do you feel pain in your chest during physical activity?
- In the past month, have you had chest pain when you were not doing physical activity?
- Do you lose your balance from dizziness? Do you ever lose consciousness?
- Do you have a bone or joint problem that could be made worse by a change in your physical activity?
- Is your doctor currently prescribing drugs for your blood pressure or a heart condition?
- Do you know of any reason you should not participate in physical activity?

If you answered yes to one or more questions, if you are over 40 years of age and have recently been inactive, or if you are concerned about your health, consult a physician before taking a fitness test or substantially increasing your physical activity. If you answered no to each question, then it's likely that you can safely begin exercising.

PRIOR TO EXERCISE

Prior to beginning any exercise program, including the activities depicted in this brochure, individuals should seek medical evaluation and clearance to engage in activity. Not all exercise programs are suitable for everyone, and some programs may result in injury. Activities should be carried out at a pace that is comfortable for the user. Users should discontinue participation in any exercise activity that causes pain or discomfort. In such event, medical consultation should be immediately obtained.



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