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Last Reviewed:

# Concussion Guidelines & Return to Ride Policy

The Peterborough Cycling Club (PCC) is committed to ensuring the safety of those participating in the sport of cycling. The PCC recognizes the increased awareness of concussions and their long-term effects. It believes that prevention of concussions is paramount to protecting the health and safety of members.

This policy provides guidance in:

- Identifying common signs and symptoms of concussion;
- Protocol to be followed in the event of a possible concussion; and
- Guidelines to enable the concussed to return to riding safely.

Awareness of the signs and symptoms of concussion and knowledge of how to properly manage a concussion is critical to recovery. This awareness will help to ensure the individual is not returning to physical activities too soon, thereby risking further complications.

## WHAT IS A CONCUSSION?

A concussion is an injury to the brain caused by a bump, blow or jolt to the head, or by a hit to the body that causes the head and brain to move rapidly back and forth. It requires a clinical diagnosis by a physician. The injury can cause brain swelling and other complications, and because the injury is internal, professionals need to rely on mental, physical, and emotional symptoms to diagnose it. A RIDER DOES NOT HAVE TO EXPERIENCE A DIRECT IMPACT TO THE HEAD OR LOSE CONSCIOUSNESS TO HAVE A CONCUSSION.

## SIGNS & SYMPTOMS

It is important to recognize and understand the symptoms that may result from a concussion. They may appear immediately after the injury or within hours or days. Also, they can be different for everyone. Some common signs and symptoms include, but are not limited to:

- Nausea
- Poor concentration
- Amnesia
- Fatigue
- Sensitivity to light or noise
- Irritability
- Poor appetite
- Decreased memory
- Poor balance
- Slowed reaction time



## WHAT TO DO?

**If a member is unconscious or seriously injured** – Initiate the “Serious/Critical” emergency action plan by calling 911, and then:

- Contact the member’s emergency contact to inform them of the injury and that the member will be attended to by Emergency Medical Services and/or possibly transported to a hospital;
- Stay with the member until Emergency Medical Services or their emergency contact arrives; and
- Monitor and document any physical, emotional and/or cognitive changes.

**If the member is conscious and has a non-critical injury** – Follow the “Non-Critical Injury” emergency action plan by removing the member from the activity immediately and then:

- Contact the member’s emergency contact;
- Arrange a ride home for the participant;
- Reduce external stimulus (noise, other people, etc.);
- Remain with the participant until he or she can be taken home;
- Monitor and document any physical, emotional and/or cognitive changes; and
- Encourage the participant to consult a physician.

## WHEN TO RETURN TO RIDING?

Medical recommendation for step procedure:

- The member should consult with a physician throughout the return to riding process and provide proof of medical clearance if necessary. The PCC will comply with all directions provided by the physician that may supersede this policy.
- The member must remain asymptomatic throughout the steps. If they experience symptoms they must revert to the previous step.
- The member should be symptom-free for 24 hours before progressing to the next step.

### STEP 1: Complete Cognitive and Physical Rest

The member should rest until asymptomatic (physical/mental rest). He or she should limit physical exertion as much as possible, including normal daily activities. The member should not have to focus or concentrate on any given task (including computer and/or video games) or incur any stress at all. If the member experiences any strain or exertion, that task should be stopped immediately.

### STEP 2: Light Aerobic Exercise

The member may become lightly active including using a trainer, stationary bike or walking.

### **STEP 3: Sport-Specific Exercise**

The Member may choose to participate in flat, low-stress road riding, not in a pace line.

They may also participate in MTB/CX rides with no technical features, i.e. wide, hard-packed, flat trails.

### **STEP 4: Training Drill and Resistance Training with Increased Intensity**

This may include road riding featuring climbs and intervals.

For MTB/CX, rides may include training drills, low/moderate technical skills and intervals.

### **STEP 5: Full Participation**

Members will be permitted to rejoin regular group rides.

MTB/CX riders may participate in regular CX courses or technical MTB riding.

### **STEP 6: Ride Well/ Smile Often**

## **MEDICAL CLEARANCE**

If a member is showing signs of concussion and/or has been clinically diagnosed as concussed, the ride leader and/or the board will prevent the member from participating until a medical clearance has been provided.

## **NON-COMPLIANCE**

Failure to abide by any of the guidelines and/or protocols contained within this policy may result in disciplinary action in accordance with the PCC's *Discipline and Complaints Policy*.