

Transition to Play (TTP) Progression

This progression is a guide to help assist the athlete in safe return to play. It will explain to the athlete, parents and coaches how to gradually progress back to 100% full competition in the desired sport while hopefully reducing risk of re-injury at the same time.

The program is a FOUR-phase progression that can begin at the instruction and/or supervision of the surgeon, physical therapist or athletic trainer. The duration of each phase is individualized and dependent on time from surgery, start date of the program, target date for return to play, and how well the athlete progresses through each phase.

EACH PHASE IS ASSOCIATED WITH A COLOR/WRISTBAND:

Red (Restricted)

Yellow (Caution)

Blue (Strengthening)

Green (Full Go)

As part of the MedStar "Go for Green!" wristband program, the athlete may receive and wear a wristband corresponding to each phase. This way the athlete, parents, coaches, teammates, and athletic trainer know what activities are currently allowed and safe.

Progression into Phase III (Blue Wristband) involves some return to sport participation and Phase IV (Green Wristband) is full return to competition. This progression requires clearance from the surgeon.

If there is an athletic trainer with the team, they will assist the athlete through the program. If not, please contact the sports physical therapist or surgeon with any questions or issues along the way.

The physical therapist or physician will advise the athlete when to begin each of the phases, and when to schedule a follow-up visit to re-evaluate in order to advance to the next phase.

Use of a functional brace during the TTP progression and for return to play is a decision that is made on a case by case basis by the athlete and surgeon together.



PHASE I: Introductory Phase

START DATE: _____

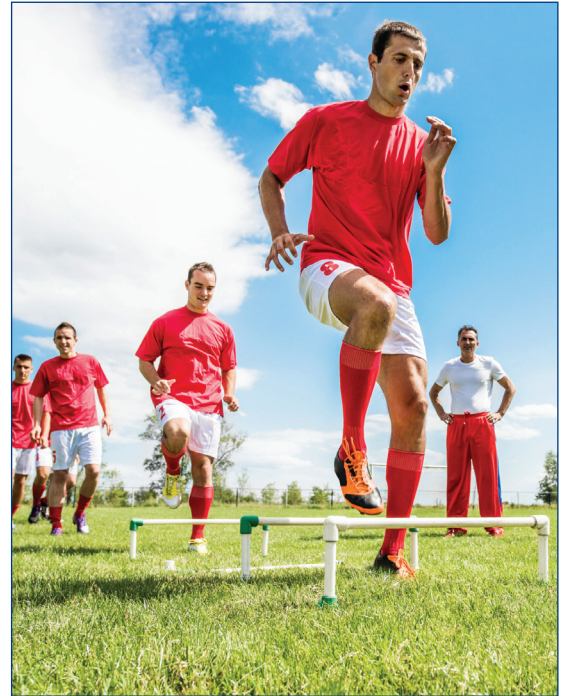
FOLLOW UP: _____

CRITERIA TO BEGIN PHASE I:

No pain, swelling or instability with rehabilitation exercises.
Clearance from MD, PT or ATC to begin transition to play progression.

GENERAL GUIDELINES

- Completely controlled environment (in the clinic or at practice)
- Planned tasks completed in a specific order with a definitive beginning/end to each task
- Single, discrete tasks or several discrete tasks purposefully sequenced together
- Each task performed with the athlete completely rested
- Tasks stopped before athlete becomes fatigued
- All movement done in isolation—no opposition (defense)
- All activity done at a pace that is comfortable for the individual athlete



RESTRICTIONS—NO SPRINTING, HARD CUTTING, CONTACT, OR LIVE PLAY

Allowed activities and drills:

- Participation in team conditioning (calisthenics, dynamic warm-up, stretching, jogging, etc.)
- Stationary drills (short distance passing, shooting, catching, throwing)
- Individual skill drills on the sideline (stick work, ball handling, agility drills, plyometrics, footwork with and without ball, cone/box/ladder/hurdle drills)
- Planned running tasks at partial speed (pre-planned routes, deceleration, acceleration, stop and go, careful change of direction)
- Emphasis on straight plane linear running activity without cutting
- Continue to improve cardiovascular endurance in preparation for return to sport (bike, elliptical, treadmill, etc)

See individual sport pages for detailed sport-specific activities.

PHASE II: Open Phase

START DATE: _____ FOLLOW UP: _____

CRITERIA TO BEGIN PHASE II:

No symptoms with Phase I activity.

GENERAL GUIDELINES

- Increased speed and intensity of practice; nearing game speed and intensity; may begin sprinting with adequate space for controlled deceleration
- Varied environments, however still predictable. This requires the athlete to adapt to environmental changes and respond
- Link multiple tasks together
- Decrease rest breaks; increased time of continuous activity
- Introduction of opposition (defense)
- Controlled cutting

RESTRICTIONS—NO LIVE PLAY, NO FULL SPEED CUTTING

Allowed activities and drills:

- All previous tasks from Phase I
- Shadow drills with controlled intensity
- Long distance passing and shooting
- May participate in offense with defense in play, defense with offense in play at half speed

See individual sport pages for detailed sport-specific activities.



PHASE III: Random Phase

START DATE: _____ FOLLOW UP: _____

CRITERIA TO BEGIN PHASE III:

Pass Return to Play OR receive clearance from MD.
NO difficulties with Phase II progression activities.

GENERAL GUIDELINES

- Tasks performed randomly
- Attempt all required sport activity at full speed
- Random environments, random sequence of tasks
- Begin LIVE PLAY

RESTRICTIONS—NO FULL competition game play.

Allowed activities and drills:

- May complete all tasks from Phase I and II
- Small sided live play games (2 vs. 2, 4 vs. 4, half court)
- Begin scrimmaging with limited playing time, increasing gradually, as tolerated
 - Begin with "friendly" scrimmages
 - Progress to full field/full court games at full speed toward the end of this phase

See individual sport pages for detailed sport-specific activities.



PHASE IV: Full Return to Participation

Athlete is cleared for full participation in all sport activities once they have completed each phase and participate at full speed without:

- Pain or swelling
- Hesitation or apprehension
- Limitation or restriction

Multi-sport athletes may be cleared for return to a lower-risk sport before for another higher-risk sport.



FOOTBALL

Phase I

- Route running at 50%
- Whistle drills (first 1 to 3 steps at hike)
- Burpees
- Positional foot drills
- Back pedal change direction
- Z cuts

Phase II (Helmets and Pants, NO SHOULDER PADS)

- Jump catch
- Jump catch run
- Catch turn and run
- WR tree up to 75% intensity
- Positional drills with shadow



Phase III (Dress Full Pads)

- Participation in walk through
- Contact drills
- Sled drills



LACROSSE

Phase I

- Wall ball
- Cradling drills
- Change of direction at 50% speed
- Z Cuts
- Defensive slides
- Burpees
- Back pedaling
- Suicides at 50 to 75%
- Shots on goal at 50 to 75%



Phase II

- Pass/Catch turn and run
- Positional drills with shadow
- Transitions/Breakout drills
- Fast break drills at 50 to 75% speed
- Defensive screens without opposition
- Face offs at 50 to 75% intensity



Phase III

- Contact drills
- Shoot around
- Full face offs
- Contested shots
- Man up/man down situations



BASKETBALL/COURT SPORTS

Phase I

- Free throws
- Ball handling
- Walk through plays
- Defensive slides
- Partner passing
- Suicides at 50 to 75%
- Individual post moves
- Shoot around



Phase II

- Lay up drills at 50 to 75%
- Fast break drills at 50 to 75%
- Rebound drills without opposition
- Transitions/breakout drills without opposition
- Defensive screens without opposition
- Full speed conditioning
- Post moves with stationary defense



Phase III

- Contested/opposition lay up drills
- Contact defense drills
 - Fast break
 - Rebounding
 - Ball skills/dribbling with opposition
- Post moves with moving defense
- Half court play
- 2 vs. 2, 3 vs. 3, 4 vs. 4



VOLLEYBALL

Phase I

- Serving (no jump serves)
- Wall passing/wall ball
- Approach with and without swing (no ball)
- Blocking without ball
- Pepper
- Stationary passing/setting



Phase II

- Hitting drills
- Blocking drills
- Jump serves
- Defensive movement/walk throughs at 50 to 75%
- Back row hitting/attack
- Controlled pass - set - hit drills
- Serve receive (no diving)



Phase III

- Chase drills
- Diving drills
- Full defense drills



SOCCER

Phase I

- Ball handling
- Wall ball
- Juggling
- Trapping
- Suicides at 50 to 75%
- Burpees
- Short distance target passing/shooting at 50 to 75%
- Goalie - simple drills, small movement laterally, jumping and catching



Phase II

- Long distance passing and shooting
- Jumping for headers
- Shadow drills with ball both offensive and defensive
- Penalty kicks



Phase III

- Short sided games
- Slide tackle drills
- Small games/drills
- Sprints

BASEBALL

INFIELD

Phase I

- Pepper
- Ball visualization
- Fielding within 10 feet
- Hitting off tee

Phase II

- Soft toss
- Front toss - hit - jugs

Phase III

- Sliding drills
- Full drills
- Full base running
- Base running at 50 to 75%



PITCHER/CATCHER (ALL INFIELD PLUS ...)

Phase I

- Pitcher fielding practice
- Flat surface pitching

Phase II

- Pitching drills with increased distance

Phase III

- Pitching from mound



OUTFIELD (ALL INFIELD PLUS ...)

Phase I

- Controlled pop flies
- No diving

Phase II

- Throws to home
- Controlled diving drills

Phase III

- Diving for pop flies



MEDSTAR ACL RETURN TO PLAY PROGRESSION

Patient Name: _____ Date: _____

Primary Diagnosis: _____ Comments: _____

Certified Athletic Trainer (if available): _____
Name, Location, Phone Number or Email

- Communication with MD, PT, Coach, Parents, etc.

Pre-Hab Evaluation and Treatment: _____
PT Name, Location, Phone Number or Email

- Physical Therapy 1-3x/wk to restore ROM, reduce edema, increase LE strength, normalize gait. (Minimize use of visits if insurance is limited!)

Post-Op Evaluation and Treatment: _____
PT Name, Location, Phone Number or Email

- Physical Therapy 1-3x/wk to restore all deficits and functional limitations. (Use criteria based protocol. Must meet goals at each stage to progress. Continue under SUPERVISION per protocol UNTIL Return to Play.)

Baseline Functional Testing at 3 to 4 months post-op: _____
PT Name, Location, Phone Number or Email

Testing Should Include:

1. Quadriceps Strength Index
2. Landing Error Scoring System (LESS)
3. Functional Hop Testing (single leg hop only)
4. Knee Outcome Survey

Sports Medicine Physical Therapist: _____
PT Name, Location, Phone Number or Email

- Plyometric Progression **MedStarSportsMedicine.org/Plyos**
 - Teach proper Jump-Landing Biomechanics
- Return to Running Progression (Alter-G, if needed)
- Begin gradual sport-specific training
- Explain Transition to Play (TTP) Progression

MEDSTAR ACL RETURN TO PLAY PROGRESSION

Functional Testing at 5-6 months post-op: _____
PT Name, Location, Phone Number or Email

Testing Should Include:

- | | |
|---|---------------------------|
| 1. Quadriceps Strength Index | 4. Functional Hop Testing |
| 2. Landing Error Scoring System (LESS) rating with video analysis | • Single leg hop test |
| 3. Knee Outcome Survey | • Cross over hop test |
| | • Triple hop test |
| | • Timed 6-meter hop test |

Strength and Conditioning Specialist: _____
PT Name, Location, Phone Number or Email

- Proper weightlifting technique, progress agility training, return to sprinting, cutting & deceleration

Full Return to Play Testing at > 6 months post-op: _____
PT Name, Location, Phone Number or Email

Testing Should Include:

- | | |
|---|---------------------------|
| 1. PRE-FATIGUE PROTOCOL followed by: | 5. Functional Hop Testing |
| 2. Quadriceps Strength Index | • Single leg hop test |
| 3. Landing Error Scoring System (LESS) rating with video analysis | • Cross over hop test |
| 4. Knee Outcome Survey | • Triple hop test |
| | • Timed 6-meter hop test |

Ask your MedStar Sports Medicine Physical Therapist for questions about the "Go for Green" Wristband Communication System.

If unable to complete any of these recommendations, please talk with your MedStar Physician, Therapist or Athletic Trainer.

Phone Number: _____

Physician Signature: _____

Patient Signature: _____

