

Sports Injury Recovery Plan

Date: [Insert Date]

To: [School Sports Administration]

From: [Coach/Physician Name]

Subject: Sports Injury Recovery Plan for [Athlete's Name]

Dear [Recipient's Name],

I am writing to inform you about the recovery plan for our student-athlete, [Athlete's Name], who sustained a [describe injury] during [event/game/practice]. In order to facilitate a safe return to sports, we have developed the following recovery plan:

Injury Details

- **Injury Type:** [Injury Type]
- **Date of Injury:** [Injury Date]
- **Initial Assessment:** [Describe initial assessment and diagnosis]

Recovery Goals

- Reduce pain and inflammation.
- Restore full range of motion.
- Rebuild strength and endurance.
- Prepare for safe return to activity.

Rehabilitation Schedule

The following rehabilitation schedule has been established:

- **Phase 1:** [Description and duration]
- **Phase 2:** [Description and duration]
- **Phase 3:** [Description and duration]

Medical Oversight

[Physician's Name] will oversee the rehabilitation process and monitor [Athlete's Name]'s progress. Regular assessments will be documented, and adjustments to the recovery plan will be made as needed.

Return to Play Criteria

[Athlete's Name] will be allowed to return to play upon meeting the following criteria:

- Cleared by a medical professional.
- No pain or discomfort during activity.
- Demonstrated functional ability.

Thank you for your attention to this matter. We are committed to ensuring a safe and effective recovery for [Athlete's Name] so that they can continue to participate in school sports.

Best regards,

[Your Name]

[Your Position]

[School Name]

[Contact Information]