

PRIORITY LEVEL



Moderate Priority

A workable recovery window — apply Level 2 modalities where the context below justifies them.

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Foundation Strategies

- **Sleep (8–10h)** — Sleep (8–10h): the single highest-yield recovery intervention regardless of context.
- **Nutrition & Energy Availability** — Nutrition & Energy Availability: glycogen resynthesis, protein intake and total energy availability underpin every other strategy on this list.
- **Hydration** — Hydration: individualised fluid and electrolyte replacement, guided by sweat-rate rather than fixed volumes.

Recommended Recovery Modalities

- **Massage** — High evidence for reducing soreness and perceived fatigue. Standard for high-exposure players in a congested run of fixtures.
- **Foam Rolling** — Scalable, low-cost squad-wide option for perceived soreness. Reasonable supportive option with a 48–72h window.
- **Cold Water Immersion** — Moderate–high evidence for soreness when the calendar is tight. Congested schedule is the clearest indication for Level 2 modalities.
- **Compression Garments** — Supports repeated short-turnaround match exposure.

Optional Methods

Methods to Avoid

- **General principle** — Do not replace training or the foundational strategies with passive recovery modalities alone.

Monitoring Priorities

Not Available (Equipment)

Coach Notes

Priority for this player is reducing soreness, with 48–72 hours until the next match. Full recovery investment is justified — this player accumulated the most match load. The congested schedule pushes Level 2 modalities up the priority list for this player specifically.

Scientific Rationale

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This plan is generated from a fixed set of decision rules derived from the accompanying review article (Nédelec et al., 2013; Fullagar et al., 2015; Dupuy et al., 2018; Van Hooren & Peake, 2018; Peake et al., 2017; Julian, Page & Harper, 2021; Den Hollander et al., 2025; Liu, Li & Han, 2026; Thomas et al., 2016; Kerkick et al., 2017; Walsh et al., 2021). It supports — and does not replace — the judgement of qualified medical and performance staff.