



Return-to-School

Both Return-to-School and Return-to-Sport / Physical Activity Strategies can be done in parallel. However, the Return-to-School Strategy should be completed before starting Stage 5 of the Return-to-Sport / Physical Activity Strategy.

Each stage must take a minimum of 24 hours, but could last longer depending on the student and their specific situation. **If the student experiences new or worsening symptoms at any specific stage, they should go back to the previous stage for at least 24 hours.** The student may need to move back a stage more than once during their recovery process.

For more information about the recommended sequence for resuming activities after a concussion, please consult the reverse side of this document →

	AT HOME			AT SCHOOL			
	REST	STAGE A	STAGE B	STAGE C	STAGE D	STAGE E	STAGE F
Objective of each stage	Cognitive, physical and social rest for at least 24 hours	Daily Activities at Home Gradually return to typical activities for at least 24 hours	School Work at Home Increase tolerance to cognitive work for at least 24 hours	Back to School Part-time as an Observer Return to school with maximum usage of learning accommodations for at least 24 hours	Return to School Part-time Gradually increase academic activities with moderate usage of learning accommodations for at least 24 hours	Gradual Elimination of Accommodations Work towards a full day at school with minimal usage of learning accommodations for at least 24 hours	Return to School Full-time Gradually resume full academic activities and catch up on missed school work for at least 24 hours
Acceptable activities	Stay home in a quiet and calm environment and keep any social visits brief Activities: • Short phone calls • Short and basic board and/or card games • Crafts Inform the school administration of the results of the medical examination	Adding activities during the day that do not provoke symptoms • Start with 5 to 15 minutes at a time and gradually build to 15 to 30 minute sessions Activities from previous stage plus: • Limited TV • Drawing or building blocks • Board and/or card games • Easy reading	• Build to the equivalent of 1 hour of school-type work in 30 minute increments Activities from previous stage plus: • Limited computer, laptop or tablet use • Limited texting or games with cell phone Contact school to prepare for the student's return to school part-time	Note: The student may proceed directly to Stage D, unless advised otherwise Attend school part-time as an observer with maximum usage of accommodations • Build to a half day of cognitive activity • Start with 30-45 min. intervals	Gradually decrease the use of learning accommodation as tolerated • Build towards 45-60 min. intervals of school work • Allow for classroom tests with adaptations Homework Build to 30 min. of homework per day	Note: The student may proceed directly to Stage F, unless advised otherwise Gradually eliminate the use of learning accommodations as tolerated Homework Build to 1 hour per day as tolerated	Return to full days at school with no learning accommodations • Attend all classes • Resume routine schoolwork / homework • Resume all standardized tests • Resume full extracurricular involvement for non-sport activities (e.g. debating club, drama club, chess club)
Activities to be avoided	• No school work or reading • No physical exertion / sports • No TV or video games • No computer, laptop, tablet or cell phone use (texting) • No alcohol, tobacco, caffeine and no other stimulant use No driving until consulted by a healthcare professional	• No school or homework • No computer, laptop or tablet use • No texting or games with cell phone • No alcohol, tobacco, caffeine and no other stimulant use	• No school attendance • Limited caffeine use	• No music class • No homework • No adapted tests • No standardized tests • No carrying heavy physical loads (e.g. backpacks)	• No standardized tests	• No more than one adapted evaluation per day • No standardized tests	• No usage of any learning accommodations • No participation in competitive sports or physical activities until the student has been given medical clearance
Timeline	When symptoms start to improve or after resting for 2 days max: Begin STAGE A	Able to tolerate 30 min. of cognitive activity without a break? No: Return to Rest Yes: Begin Stage B	Able to tolerate 1 hour of cognitive tasks in 2-3 increments? No: Return to Stage A Yes: Begin Stage C	Able to tolerate a half day at school as an observer? No: Return to Stage B Yes: Begin Stage D	Able to tolerate a half day of school work with moderate usage of learning accommodations? No: Return to Stage C Yes: Begin Stage E	Able to tolerate a full day with minimal usage of learning accommodations? No: Return to Stage D Yes: Begin Stage F	Able to tolerate a full academic workload? No: Return to Stage E Yes: The Return-to-School Strategy is completed

This tool is a guideline for managing a student's return to school following a concussion and does not replace medical advice. Timelines and activities may vary by direction of a health care professional. Contact your primary healthcare provider or seek medical help as soon as possible if symptoms persist or worsen. Persistent concussion symptoms occur when they last more than 2 weeks for adults or more than 4 weeks for youth under the age of 18.

Adapted from: 2016 Berlin Consensus Statement on Concussion in Sport and the Protocol for Return to Learn after a concussion by Parachute (2017). 201905V3



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It's important to remember that the necessary recovery time following a concussion is different for each person and can vary from days to weeks to months. When symptoms start to improve or after resting for two days maximum, you may begin a step-wise process to gradually increase cognitive and physical activity since both **Return-to-School** and **Return-to-Sport/Physical Activity Strategies** can be done in parallel. We encourage you to consult the Return-to-Sport/Physical Activity Strategy and the Recommended Sequence for Resuming Activities after a Concussion in order to better understand the gradual progression through the necessary steps for recovery.



RETURN TO SPORT/PHYSICAL ACTIVITY STRATEGY

1 Symptom-limited Activities

- The objective of this stage is to ensure a gradual reintroduction of daily activities that do not provoke symptoms
- The person may resume certain activities such as walking at a slow to medium pace and daily household tasks (e.g. meal preparation, doing dishes, doing the laundry) for short periods of time (15 to 20 minutes).
- Avoid intense physical exertion or sports

2 Light Aerobic Activity

- The objective of this stage is to increase the person's heart rate
- The person may resume certain activities such as jogging or stationary cycling at a slow to medium pace for short periods of time (up to 30 minutes).
- Avoid all resistance or weight training

3 Individual Sport or Activity-specific Exercise with No Contact

- The objective of this stage is to add movement to complete training drills individually.
- The person may progressively increase the intensity and duration of their workout (up to 60 minutes) with activities such as
 - Skating drills in hockey
 - Running drills in soccer
 - Shooting drills in basketball
- Avoid activities involving head impacts or jarring motions

4 Non-contact Training Drills

- The objective of this stage is to resume more complex training drills requiring greater coordination and an increased cognitive load (e.g. passing drills)
- The person may start progressive resistance training
- The person may participate in activities which involves high speed stops or sprinting
- Avoid activities involving body contact

A medical clearance is required before allowing for participation in unrestricted practice during full contact team practice or with activities involving a risk of collision and fall (moving to stage 5).

5 Unrestricted Practice

- The objective of this stage is to restore the person's confidence and assess their functional skills during practices
- The person may proceed with a full return to training (with or without teammates) which may include activities involving risks of collision, fall or contact.
- Avoid participation in any competitive activity

6 Return to Game-play and/or Competition

- The objective of this stage is to provide a continued assessment of the person's athletic performance
- The person may proceed with a full participation in any physical activity, practice, game or sport competition
- Avoid disrespecting the rules of the sport and bad sportsmanship

INDIVIDUALIZED LEARNING ACCOMMODATIONS

The use of learning accommodations that support the student as they move through the stages of the Return-to-School Strategy is critical for their recovery. For more information, we encourage you to consult the **Individualized Learning Accommodations Following a Concussion** form in order to help identify what other accommodations would support the student's Return-to-School Strategy.

Post-Concussion Symptoms	Impact on Learning	Potential Strategies and/or Approaches
Headache and fatigue	Difficulty concentrating, paying attention or multitasking	<ul style="list-style-type: none"> Keep distractions to a minimum Allow the student to take frequent breaks and/or rest in a quiet area Provide alternative assessment opportunities
Difficulty remembering or processing speed	Difficulty remembering new information, instructions and learned information	<ul style="list-style-type: none"> Consider the use of a daily organizer Divide assignments into smaller tasks Provide extra time to complete non-standardized assessments
Difficulty paying attention and/or concentrating	Limited ability to focus on schoolwork	<ul style="list-style-type: none"> Repeat instructions and check with the student frequently for comprehension Facilitate the use of a peer note taker or preprinted notes Reduce and/or prioritize homework and assignments
Light and/or noise sensitivity	Difficulty working in a classroom environment	<ul style="list-style-type: none"> Reduce the brightness and exposure to smart boards, computers and television screens Allow the student to wear sunglasses or use earplugs as needed Arrange strategic seating (i.e. proximity to teacher, away from window or talkative peers)

RECOMMENDED SEQUENCE FOR RESUMING ACTIVITIES AFTER A CONCUSSION

REST for at least 24 hours



RETURN TO SCHOOL STRATEGY

A Daily Activities at Home

B School Activities at Home

C Back to School Part-time as an Observer

D Return to School Part-time

E Gradual Elimination of Accommodations

F Return to School Full-time



RETURN TO SPORT/PHYSICAL ACTIVITY STRATEGY

1 Symptom-limited activities

2 Light Aerobic Activity

3 Individual Physical Activity with No Contact

4 No-contact Training Drills

Students should not have any new or worsening symptoms at these stages

Students should not have any symptoms at these stages

These steps can be completed in parallel

Important:

If needed, a return to school full-time (Stage F) and a return to no-contact training drills (Stage 4) must be completed without any signs or symptoms of concussion before requesting a medical clearance to proceed to unrestricted practice (Stage 5).

Medical Clearance

5 Unrestricted Practice

6 Return to Game-play and/or Competition