



- An initial period of 24-48 hours of physical, cognitive and social rest should be completed before proceeding with the step-wise rehabilitation process.
- Each stage must take a minimum of 24 hours, but could last longer depending on the person and their specific situation.
- If the person experiences new or worsening symptoms at any specific stage, they should go back to the previous stage for at least 24 hours.
- The person may need to move back a stage more than once during their recovery process.

### INITIAL REST PERIOD

The objective of this stage is to ensure cognitive, physical and social rest for at least 24 hours

**Cognitive Rest** – includes avoiding all activities that require concentration and attention. (e.g., reading, texting, television, computer, video/electronic games).

**Physical Rest** – includes avoiding participation in activities that require physical effort (e.g., training, sports, recreational activities).

**Social Rest** – includes limiting social interactions that may elicit or worsen anxiety, nervousness, irritability, etc.

- Stay home in a quiet and calm environment and keep any social visits brief
- Acceptable exertion at this stage may include activities such as taking short phone calls, playing basic board games and completing simple arts and crafts projects.
- Avoid using alcohol, tobacco, caffeine and other stimulants
- Avoid driving until consulted by a healthcare professional



### RETURN TO WORK

#### A Light Activities at Home

- The person may be reintroduced to activities that do not increase their heart rate or break a sweat by gradually increasing periods of activity to up to 30 minutes.
- Acceptable activities at this stage may include drawing, easy reading and completing daily household tasks.
- Avoid using computers, texting or playing mobile games on any electronic device
- People should not go to work at this stage

#### B Preparation for a Return to Work

- Acceptable activities at this stage may also include limited texting or computer use.
- If possible, the person may also be reintroduced to cognitive activities by completing up to 2 hours of light work-related duties at home.
- Limit caffeine or other stimulant use.
- People should not go to work at this stage. However, it is recommended to contact the workplace to prepare a personalized return to work plan.

#### C Return to Work with Accommodations

- The person may proceed directly to Stage D, unless advised otherwise
- The person may attempt to return to work with a maximum usage of accommodations (e.g. wearing sunglasses, working in a quieter area or allowing for extended breaks).
- No carrying any heavy physical loads.

#### D Gradual Increase in Workload

- The person may return to work with continued usage of accommodations.
- Gradually increase the number of working hours per day as tolerated
- Avoid any high-risk job duties (e.g. operating heavy equipment, working from heights, driving)

#### E Elimination of Workplace Accommodation

- The person may proceed directly to Stage F, unless advised otherwise
- The person may attempt to gradually eliminate the use of accommodation at work as tolerated.
- Accommodations should be discontinued in trial periods to ensure that they are no longer needed.
- The person may resume regular working hours.
- Avoid possible overexertion

#### F Return to Unrestricted Work

- The person may resume their full work schedule without any accommodations.
- People should seek medical clearance before returning to higher-risk job duties that may have safety implications.



### 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 Physical Activity 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
- No full participation in physical education class.

#### 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

#### 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

**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).

### RECOMMENDED SEQUENCE FOR RESUMING ACTIVITIES AFTER A CONCUSSION

#### REST for at least 24 hours



#### RETURN TO WORK STRATEGY



#### RETURN TO SPORT/PHYSICAL ACTIVITY STRATEGY

#### A Light Activities at Home

#### B Preparation for a Return to Work

#### C Return to Work with Accommodations

#### D Gradual Increase in Workload

#### E Elimination of Workplace Accommodations

#### F Return to Unrestricted Work

#### 1 Symptom-limited activities

#### 2 Light Aerobic Activity

#### 3 Individual Physical Activity with No Contact

#### 4 No-contact Training Drills

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

Individuals should not have any symptoms at these stages

#### Important:

If needed, a return to unrestricted work (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

These steps can be completed in parallel

# RETURN TO WORK

## GUIDELINES FOLLOWING A CONCUSSION DIAGNOSIS



**NB Trauma Program**  
Programme de traumatologie du NB

*Be aware and take care*

The NB Trauma Program, and our injury prevention partners, would like to encourage you to learn more about how to avoid concussions in addition to knowing how to identify and manage concussion signs and symptoms through each stage of the recovery process.



For more information about the **Return to Work and Return to Sport/Physical Activity Strategies**, please consult our available concussion resources by visiting us at [www.NBTrauma.ca](http://www.NBTrauma.ca).

**NB Trauma Program**  
Programme de traumatologie du NB

Horizon Health Network / Réseau de santé Horizon | Vitalité Health Network / Réseau de santé Vitalité | Ambulance NB | New Brunswick Department of Health / Ministère de la santé du Nouveau-Brunswick

[NBTraumaProgram](https://www.facebook.com/NBTraumaProgram) | [@TraumaNB](https://twitter.com/TraumaNB)

## What is a concussion?

A concussion is a type of traumatic brain injury that can affect how your brain works. Concussions may happen because of a hit to the head, face, neck or somewhere else on the body. When such a hit takes place, the brain twists or moves back and forth inside the skull. If this sudden movement is hard enough, the brain can become injured and can cause a variety of signs and symptoms.

## When should I suspect a concussion?

A concussion can only be diagnosed by a physician or nurse practitioner. However, **ANYONE** may suspect a concussion if an injured person reports **ANY** symptoms or shows **ANY** signs after sustaining a hit to the head or body. For help in the identification of a suspected concussion, it is recommended that you use a concussion recognition tool such as the **Concussion Recognition Tool 5 (CRT5)** or the **Tool to Identify a Suspected Concussion**.

## What should I do once I return home from the hospital?



### Rest/Sleeping

Concussion symptoms tend to get worse with physical and mental exertion. This is why the most important initial treatment for a concussion is **REST**. The concussed person should not exercise, go to work or do any activities that may worsen symptoms, like riding a bike, texting or watching television for at least 24 hours. When symptoms start to improve or after resting for 2 days max, the person may begin symptom limited activity.

Sleep is important to the healing process, especially soon after the injury. It is recommended that any concussed person follow a good routine for sleep (Sleep Hygiene) in order to address this concern.

### Surveillance



Concussion signs and symptoms may only appear or worsen hours or days after the injury. It is recommended that someone monitor the concussed person for the first 24 to 48 hours following the incident in order to identify any new or worsening signs and symptoms.

It is not necessary to wake a person up periodically following a concussion. Interrupting this rest can make the recovery more difficult. However, if you have any concerns about the person's breathing or how they are sleeping, you may wake them up. Otherwise, you should let them sleep.

### Alcohol/Drugs



Do not use any recreational drugs. Alcohol, tobacco, caffeine and other stimulant use should also be avoided. Those substances may worsen signs and symptoms of concussion and interfere with the recovery process. In addition, you should not take any medications unless advised by your primary care provider.

## Consulting your primary care provider



It is recommended that you contact your primary care provider (family physician or nurse practitioner) as soon as possible after receiving a concussion diagnosis in order to schedule a follow-up appointment. Follow their guidelines and report any new or ongoing symptoms during your conversation.

**A concussed person should not drive or operate machinery without a medical clearance from their primary care provider.**

## When should I go back to seek immediate medical attention?

Sometimes serious problems may develop hours or days after a head injury. If you identify **ANY** new or worsening concussion signs or symptoms that are found in the list below, seek medical attention **IMMEDIATELY**.

### You see:

- Vomiting
- Seizure or convulsion
- Deteriorating conscious state
- Loss of consciousness
- Increasing restlessness agitation or combativeness

### The person complains of:

- Neck pain or tenderness
- Severe or increasing headache
- Double vision
- Weakness or tingling/burning in arms or legs

**RED FLAGS**

## When can I return to regular activities?

Most people will fully recover following a concussion. However, 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. Typically, concussion symptoms can last up to 4 weeks in youth under the age of 18 years old and 2 weeks in adults. Individuals may also need a longer time to proceed through each step of their progressive and individualized recovery strategy due to "modifying factors" of clinical recovery such as:

- Having had multiple concussions in the past
- Severity of initial symptoms in the first days
- History of mental health problems
- History of migraine headaches

## How can I help with efforts to return to work?

Returning to work after a concussion injury can be challenging. However, individuals are encouraged to make efforts towards their safe return to work as early as possible by following a stepwise **Return to Work Strategy**. This is especially important to progressively build tolerance to the physical and cognitive demands at the workplace. For some workers, modifications to job duties or hours of work may be necessary depending both on the type of concussion symptoms they experience and the nature of the individual's work. Prior to returning to work, individuals should determine which accommodations are required to help them tolerate their concussion symptoms at the workplace.

Good communication among all parties (the worker, the employer and the healthcare professional) is important during the recovery process to determine the most appropriate transition to work and to assess if the accommodations that were implemented are adequate. Good communication is also important to help identify possible solutions to manage any new or worsening symptoms. If an adult worker experiences any ongoing concussion symptoms one month after their injury, it is recommended that they follow a personalized sub-threshold activity program overseen by a multidisciplinary team of experienced healthcare professionals (e.g. physiotherapist, occupational therapist).



## Did you know?

A referral for further investigations or other diagnosis may be considered if an individual is unable to return to work after 3 months due to ongoing symptoms.

## How can I help with efforts to return to sport and/or physical activity?

It's important to remember that concussion symptoms may get worse with excessive physical and mental exertion. It is recommended that you follow a healthcare provider's advice for a progressive and gradual return to physical activities whether at the workplace, on the playing field or elsewhere.

The Return-to-Sport/Physical Activity Strategy provides information on each of the stages that are required for a gradual return to regular physical activities. It is important to remember that certain steps of the Return-to-Work and Return-to-Sport/Physical Activity Strategies can be done in parallel. However, the Return-to-Work Strategy should be completed before starting Stage 5 of Return-to-Sport/Physical Activity Strategy. For more information, please consult the Recommended Sequence for Resuming Activities after a Concussion on the reverse side for this handout.

## When can I return to my usual learning activities?

A worker who needs to spend part of their day studying should focus on returning to their usual ability to complete learning activities before concentrating on efforts to return to a pre-injury workplace performance level, if economically feasible. For those people, it is recommended to use the **Return-to-School Strategy** to help guide their return to cognitive exertion.

**For more information about each step of the Return to Work and Return to Sport/Physical Activity Strategy in addition to the Recommended Sequence for Resuming Activities, please consult the reverse side of this handout.**

## SIGNS AND SYMPTOMS OF CONCUSSION

| Possible Signs Observed   | Possible Symptoms Reported   |
|---|--|
| A sign is something that is observed by another person (e.g. teacher, coach, supervisor, peer).   | A symptom is something that the student reports.   |
| <b>Physical</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Slurred speech</li> <li><input type="checkbox"/> Poor coordination or balance</li> <li><input type="checkbox"/> Dazed or vacant look</li> <li><input type="checkbox"/> Motionless on the ground or slow to get up</li> <li><input type="checkbox"/> Grabbing or clutching of the head</li> </ul> <b>Cognitive</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Difficulty concentrating</li> <li><input type="checkbox"/> Easily distracted</li> <li><input type="checkbox"/> General confusion</li> <li><input type="checkbox"/> Slowed reaction time (e.g. answering questions)</li> </ul> <b>Emotional/Behavioral</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Strange or inappropriate emotions (e.g. laughing, crying, easily angered)</li> </ul> Other: _____ | <b>Physical</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Headache</li> <li><input type="checkbox"/> Ringing in the ears</li> <li><input type="checkbox"/> Sensitivity to light or noise</li> <li><input type="checkbox"/> Seeing stars, flashing lights</li> <li><input type="checkbox"/> Fatigue or feeling tired</li> <li><input type="checkbox"/> Balance problems or dizziness</li> <li><input type="checkbox"/> Difficulty seeing or blurry / loss of vision</li> <li><input type="checkbox"/> Feeling off / not right</li> </ul> <b>Cognitive</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Difficulty concentrating or remembering</li> <li><input type="checkbox"/> Slowed down, fatigue or low energy</li> <li><input type="checkbox"/> Dazed or "in a fog"</li> </ul> <b>Emotional/Behavioral</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Irritable, sad, more emotional than usual</li> <li><input type="checkbox"/> Nervous, anxious, depressed</li> </ul> Other: _____ |

**IF ANY OBSERVED SIGNS OR REPORTED SYMPTOMS WORSEN, SEEK MEDICAL ATTENTION**