



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 Step 4 of the Return-to-Sport / Physical Activity Strategy.

This tool is a guideline for managing a student's return to school following a concussion and does not replace medical advice. Every concussion is unique, and recovery is different for each student. Timelines and activities may vary based on direction from a doctor, nurse practitioner, or licenced health care professional with relevant training.

FOR MORE INFORMATION ABOUT THE RECOMMENDED STEPS FOR RESUMING ACTIVITIES AFTER A CONCUSSION, PLEASE CONSULT THE REVERSE SIDE OF THIS DOCUMENT.

RETURN TO-SCHOOL

	STEP A	STEP B	STEP C	STEP D	STEP E
NAME & GOAL OF EACH STEP	Activities of daily living and relative rest Gradual reintroduction of typical activities as tolerated	School activities as tolerated Increase tolerance to cognitive work and connect socially with peers	Back to school part-time as an observer Reintroduction to the school environment with accommodations	Part-time or full days at school with accommodations (as needed) Gradual increase in academic activities	Return to school full-time Return to full academic activities without restrictions
ACCEPTABLE ACTIVITIES	Doing activities at home that do not result in more than mild* and brief** worsening of symptoms such as: <ul style="list-style-type: none"> Social interactions Light walking Preparing meals Housework Simple board and/or card games Inform the school administration of the results of the medical examination.	<ul style="list-style-type: none"> Reading, completing homework, or other light cognitive activities at home) Taking breaks and adapting activities if they result in more than mild* and brief** worsening of symptoms Screen time may be gradually resumed, as tolerated Returning to school as soon as possible (as tolerated) is encouraged Contact school to prepare for the student's return to classroom environment.	<p>Note: The student may proceed directly to STEP D, unless advised otherwise</p> Attending school part-time as an observer with maximum usage of concussion-related accommodations. <ul style="list-style-type: none"> Building to a half day of cognitive activities Starting with 30-45min intervals 	<ul style="list-style-type: none"> Gradually reintroducing schoolwork Building tolerance to the classroom and school environment over time Allowing for classroom tests with adaptations Gradually reducing the use of accommodations as tolerated Communicate with the school on student's progression.	<ul style="list-style-type: none"> Attending all classes. Resuming routine schoolwork/homework Resuming all standardized tests Resuming full extracurricular involvement for non-sport activities (e.g., debating club, drama club, chess club)
ACTIVITIES TO BE AVOIDED	<ul style="list-style-type: none"> Minimize screen time No schoolwork No alcohol, tobacco, caffeine, and no other stimulant use Avoid driving during the first 24-48 hours after a concussion.	<ul style="list-style-type: none"> A complete absence from the school environment for more than one week is not generally recommended Limit caffeine use 	<ul style="list-style-type: none"> No music class No homework No adapted tests 	<ul style="list-style-type: none"> No standardized tests 	<ul style="list-style-type: none"> No usage of any learning accommodations
TIMELINE	After a maximum of 24-48 hours after the injury, Begin STEP B	Able to tolerate school activities for 24 hours? No: Reattempt STEP B Yes: Begin STEP D (or Begin Step C if advised)	Able to tolerate a half day at school as an observer for 24 hours? No: Reattempt STEP C Yes: Begin STEP D	Able to tolerate full days without concussion-related accommodations for 24 hours? No: Reattempt STEP D Yes: Begin STEP E	Able to tolerate full academic workload without accommodations for 24 hours? No: Reattempt STEP E Yes: The Return-to-School Strategy is completed

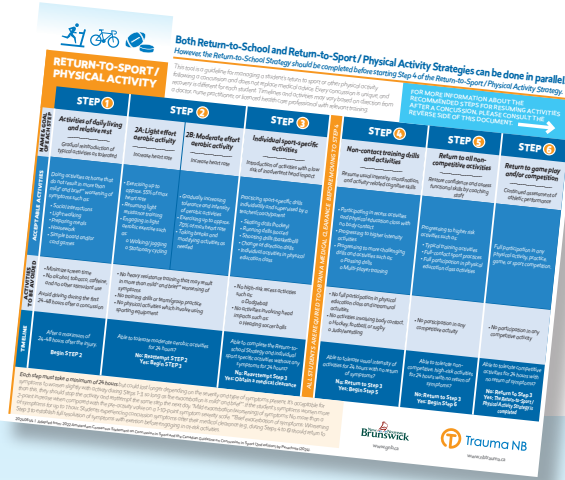
Each step must take a minimum of 24 hours but could last longer depending on the severity and type of symptoms present. It's acceptable for symptoms to worsen slightly with activity, so long as the exacerbation is mild* and brief**. If the student's symptoms worsen more than this, they should stop the activity and reattempt the same step the next day. *Mild exacerbation (worsening) of symptoms: No more than a 2-point increase when compared with the pre-activity value on a 0-10-point symptom severity scale. **Brief exacerbation of symptoms: Worsening of symptoms for up to 1 hour.

CONCUSSION MANAGEMENT

All students diagnosed with a concussion should follow a Return-to-School Strategy and a Return-to-Sport/Physical Activity Strategy to help guide their return to usual daily activity. It's important to note that both strategies begin at the same time, can be done in parallel and the first step of both is the same.

Medical clearance is not required to return to school, except for full participation in school-based sport and physical activity. For more information about each of the recommended steps for a gradual return to usual physical exertion, consult the Return-to-Sport/Physical Activity Strategy.

This strategy along with other available concussion-related resources can be found online at www.nbtrauma.ca.



INDIVIDUALIZED LEARNING ACCOMMODATIONS

Students do not need to be symptom-free to return to school and complete absence from school of more than one week is not recommended. Therefore, knowing the signs and symptoms and how to properly manage a diagnosed concussion is critical in a student's recovery. It may be important to use concussion-related accommodations at school to support the student's progression through certain steps of the Return-to-School Strategy. For more information about specific accommodations that could best support the student's tailored Return-to-School plan, we encourage you to consult the Individualized Learning Accommodations Following a Concussion (Appendix C-6).

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)

PARALLEL STEPS FOR RESUMING ACTIVITIES AFTER A CONCUSSION



A Activities of daily living and relative rest

1 Activities of daily living and relative rest

B School activities as tolerated

2 Light to moderate effort aerobic activity

C Back to school part-time as an observer

3 Individual sport-specific activities

D Part-time or full days at school with accommodations (as needed)

E Return to school full-time

MEDICAL CLEARANCE

IMPORTANT:

If the student experiences concussion symptoms after medical clearance (i.e., during steps 4 to 6), they should return to STEP 3 to establish full resolution of symptoms.

Medical clearance will be required again before progressing to STEP 4.

4 Non-contact training drills and activities

5 Return to all non-competitive activities

6 Return to game play and/or competition