



# 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 sport or other physical activity 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-SPORT / PHYSICAL ACTIVITY

	STEP 1	STEP 2	STEP 3	STEP 4	STEP 5	STEP 6	
<b>NAME &amp; GOAL OF EACH STEP</b>	<b>Activities of daily living and relative rest</b> Gradual reintroduction of typical activities as tolerated	<b>2A: Light effort aerobic activity</b> Increase heart rate	<b>2B: Moderate effort aerobic activity</b> Increase heart rate	<b>Individual sport-specific activities</b> Increase the intensity of aerobic activities and introduce low-risk sport specific movements	<b>Non-contact training drills and activities</b> Resume usual intensity of exercise, coordination, and activity-related cognitive skills	<b>Return to all non-competitive activities</b> Restore confidence and assess functional skills by coaching staff	<b>Return to game play and/or competition</b> Continued assessment of athletic performance
<b>ACCEPTABLE ACTIVITIES</b>	Doing activities at home that do not result in more than mild* and brief** worsening of symptoms such as: • Social interactions • Light walking • Preparing meals • Housework • Simple board and/or card games	• Exercising up to approx. 55% of max heart rate • Resuming light resistance training • Engaging in light aerobic exercise such as: o Walking/jogging o Stationary cycling	• Gradually increasing tolerance and intensity of aerobic activities • Exercising up to approx. 70% of max heart rate • Taking breaks and modifying activities as needed	Practicing sport-specific drills individually and supervised by a teacher/coach/parent • Skating drills (hockey) • Running drills (soccer) • Shooting drills (basketball) • Change of direction drills • Individual activities in physical education class	• Participating in recess activities and physical education class with no body contact • Progressing to higher intensity activities • Progressing to more challenging drills and activities such as: o Passing drills o Multi-player training	Progressing to higher risk activities such as: • Typical training activities • Full-contact sport practices • Full participation in physical education class activities	Full participation in any physical activity, practice, game, or sport competition.
<b>ACTIVITIES TO BE AVOIDED</b>	• Minimize screen time • No alcohol, tobacco, caffeine, and no other stimulant use Avoid driving during the first 24-48 hours after a concussion	• No heavy resistance training that may result in more than mild* and brief** worsening of symptoms • No training drills or team/group practice • No physical activities which involve using sporting equipment	• No high-risk recess activities such as: o Dodgeball • No activities involving head impacts such as: o Heading soccer balls	• No full participation in physical education class and intramural activities • No activities involving body contact. o Hockey, football, or rugby o Judo/wrestling	• No participation in any competitive activity		
<b>TIMELINE</b>	After a maximum of 24-48 hours after the injury, <b>Begin STEP 2</b>	Able to tolerate moderate aerobic activities for 24 hours? <b>No: Reattempt STEP 2</b> <b>Yes: Begin STEP 3</b>	Able to complete the Return-to-school Strategy and tolerate individual sport specific activities without any symptoms for 24 hours? <b>No: Reattempt Step 3</b> <b>Yes: Obtain a medical clearance</b>	ALL STUDENTS ARE REQUIRED TO OBTAIN A MEDICAL CLEARANCE BEFORE MOVING TO STEP 4 Able to tolerate usual intensity of non-contact training drills and activities for 24 hours with no return of symptoms? <b>No: Return to Step 3</b> <b>Yes: Begin Step 5</b>	Able to tolerate non-competitive, high-risk activities for 24 hours with no return of symptoms? <b>No: Return to Step 3</b> <b>Yes: Begin Step 6</b>	Able to tolerate competitive activities for 24 hours with no return of symptoms? <b>No: Return to Step 3</b> <b>Yes: The Return-to-Sport / Physical Activity Strategy is completed</b>	

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 during Steps 1-3, 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 1-10-point symptom severity scale. \*\*Brief exacerbation of symptoms: Worsening of symptoms for up to 1 hour. Students experiencing concussion symptoms after their medical clearance (e.g., during Steps 4 to 6) should return to Step 3 to establish full resolution of symptoms with exertion before engaging in at-risk activities.

# 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 cognitive exertion, consult the Return-to-School Strategy.

This strategy along with other available concussion-related resources can be found online at [www.nbtrauma.ca](http://www.nbtrauma.ca).

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. Early symptoms, signs and history is critical information to licensed health care providers with relevant training.

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MAXIMUM DURATION OF EACH STEP	STEP A	STEP B	STEP C	STEP D	STEP E
<b>RETURN-TO-SCHOOL</b>	<b>STEP A</b> Activities of daily living and relative rest	<b>STEP B</b> School work as tolerated	<b>STEP C</b> Back to school part-time as an observer	<b>STEP D</b> Part-time or full days at school with accommodations	<b>STEP E</b> Return to school full-time
<b>ACCEPTABLE ACTIVITIES</b>	During activities of daily living that do not result in repeat symptoms or a headache: - Normal waking and sleeping - Light reading - Listening to music - Watching TV - Playing board games - Playing video games	- Reading, completing homework, or other light cognitive activities on paper or on a tablet - Taking breaks and getting outside - Eating meals on a regular schedule - Showering, grooming, and personal hygiene - Attending school activities - Attending to schoolwork - Attending to schoolwork on a tablet or computer - Attending to schoolwork on a tablet or computer	- Attending school part-time as an observer with appropriate accommodations - Attending to schoolwork on a tablet or computer - Attending to schoolwork on a tablet or computer	- Gradually participating in schoolwork and school environment one hour at a time - Gradually increasing schoolwork with accommodations as tolerated - Communicate with the school on an "observer" progression.	- Attending all classes - Attending to the school environment - Participating in schoolwork - Resuming full participation in schoolwork - Resuming full participation in schoolwork
<b>ACTIVITIES TO BE AVOIDED</b>	- Activities that cause repeat symptoms - No homework - No reading, watching, or listening to music - Avoid driving during the first 24-48 hours after concussion	- A complete absence from the school environment for more than one week - Loud caffeine	- No physical effort - No homework - No assigned tests	- No standardized tests	- No change of any learning environment
<b>TRIGGER</b>	After a maximum of 24 hours after the injury Begin STEP A	After 24 hours after the injury Yes: Begin STEP B No: Begin STEP C or contact a provider	After 24 hours after the injury Yes: Begin STEP C No: Begin STEP D	After 24 hours after the injury Yes: Begin STEP D No: Begin STEP E	After 24 hours after the injury Yes: Begin STEP E No: Begin STEP F

Small text at bottom of table: This tool is a guideline for managing a student's return to school following a concussion and does not replace medical advice. Early symptoms, signs and history is critical information to licensed health care providers with relevant training.

## PARALLEL STEPS FOR RESUMING ACTIVITIES AFTER A CONCUSSION



**RETURN TO SCHOOL STRATEGY**



**RETURN TO SPORT/PHYSICAL ACTIVITY STRATEGY**

- A** Activities of daily living and relative rest
  - B** School activities as tolerated
  - C** Back to school part-time as an observer
  - D** Part-time or full days at school with accommodations (as needed)
  - E** Return to school full-time
- 1** Activities of daily living and relative rest
  - 2** Light to moderate effort aerobic activity
  - 3** Individual sport-specific activities
  - 4** Non-contact training drills and activities
  - 5** Return to all non-competitive activities
  - 6** Return to game play and/or competition

## 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.

## MEDICAL CLEARANCE

It is dangerous for the brain to be injured again if it has not recovered from the first concussion. A repeat concussion may slow the recovery process and increase the likelihood of serious long-term consequences such as Post-Concussion Syndrome (PCS), Second Impact Syndrome (SIS) and Chronic Traumatic Encephalopathy (CTE). Therefore, ALL students are required to obtain a medical clearance before they are allowed to return to activities with risk of contact or fall (Step 4 of the Return-to-Sport/Physical Activity Strategy).

Students must confirm to school administration and their coach that a medical doctor or nurse practitioner has personally evaluated their recovery and has cleared them to return to higher risk activities. This can be done by providing a signed copy of the Return-to-Sport/Physical Activity Documentation form (Appendix C-7) or a Medical Clearance Letter.