



## **Concussion Recovery Plan**

### **Phase 1: Returning to Daily Activities**

1. Get lots of rest. Be sure to get enough sleep at night- no late nights. Keep the same bedtime weekdays and weekends.
2. Take daytime naps or rest breaks when you feel tired or fatigued.
3. **Limit physical activity as well as activities that require a lot of thinking or concentration. These activities can make symptoms worse.**
  - Physical activity includes PE, sports practices, weight-training, running, exercising, heavy lifting, etc.
  - Thinking and concentration activities (e.g., homework, classwork load, job-related activity).
4. Drink lots of fluids and eat carbohydrates or protein to maintain appropriate blood sugar levels.
5. **As symptoms decrease, you may begin to gradually return to your daily activities. If symptoms worsen or return, lessen your activities, then try again to increase your activities gradually.**
6. During recovery, it is normal to feel frustrated and sad when you do not feel right and you can't be as active as usual.
7. Repeated evaluation of your symptoms is recommended to help guide recovery.

### **Phase 2: Returning to School**

1. If you (or your child) are still having symptoms of concussion you may need extra help to perform school-related activities. As your (or your child's) symptoms decrease during recovery, the extra help or supports can be removed gradually.
2. Inform the teacher(s), school nurse, school psychologist or counselor, and administrator(s) about your (or your child's) injury and symptoms. School personnel should be instructed to watch for:
  - Increased problems paying attention or concentrating
  - Increased problems remembering or learning new information
  - Longer time needed to complete tasks or assignments
  - Greater irritability, less able to cope with stress
  - Symptoms worsen (e.g., headache, tiredness) when doing schoolwork

### **Recommended Academic Accommodations Post-Concussion**

A concussion is a mild traumatic brain injury that alters the way your brain functions. Effects are usually temporary but can include headaches and problems with concentration, memory, balance and coordination. School Nurse will monitor progress with the student and faculty.



**Testing:** extra time to complete tests, testing in quiet environment, allow testing across multiple sessions, reduce length of tests, eliminate tests when possible and reformat free response to multiple choice, or provide cueing (e.g., use of a notecard for helpful formulas).

**Reason:** Students with concussions have increased memory and attention problems. They will not be able to learn as effectively or quickly as before. Furthermore, highly demanding activities like testing can significantly raise symptoms (e.g. headache, fatigue) which can in turn make testing more difficult.

**Note Taking:** Allow student to obtain class notes or outlines ahead of time to aid organization and reduce multi-tasking demands. If this is not possible, allow the student photocopied notes from another student.

**Reason:** Note taking may be difficult due to impaired multi-tasking abilities and increased symptoms.

**Workload Reduction:** reduce overall amount of makeup work, class work, and homework (it is typically recommended to decrease load by 50-75%, though may vary by class) and shorten tests and projects.

**Reason:** It takes a concussed student much longer to complete assignments due to increased memory problems and decreased speed of learning. Recovery can be delayed when a student “pushes through” symptoms. Therefore, it is recommended that “thinking” or cognitive load be reduced just as physical exertion is reduced. Examples might be to reduce the length of essays, have the student do every other problem in a homework assignment, or highlight key concept areas for testing while eliminating testing on less important topics.

**Breaks:** Take breaks as needed to control symptom levels. For example, if headache worsens during class, the student should put his/her head on the desk to rest. For severe symptoms, he/she may need to go to the nurse’s office to rest prior to returning to class.

**Extra Time:** Allow student to turn in assignments late. Students may experience severe symptoms some days/nights and not others. With increased symptoms, students are advised to rest, and therefore may need to turn assignments in late on occasion.

**Attendance Restrictions:**

May need extended home time

Return part-time as tolerated

Return full- time when improved, as tolerated

Follow-up with physician as recommended



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## **Returning to School**

**Until you (or your child) have fully recovered, the following supports are recommended:** *(check all that apply)*

No return to school. Return on (date)

Return to school with following supports. Review on (date)

Shortened day. Recommend \_\_\_ hours per day until (date)

Shortened classes (i.e., rest breaks during classes). Maximum class length: \_\_\_\_\_ minutes.

Allow extra time to complete coursework/assignments and tests.

Lessen homework load by \_\_\_\_\_%. Maximum length of nightly homework: \_\_\_\_\_ minutes.

No significant classroom or standardized testing at this time.

Check for the return of symptoms when doing activities that require a lot of attention or concentration.

Take rest breaks during the day as needed.

Request meeting of 504 or School Management Team to discuss this plan and needed supports.



### **Phase 3: Returning to Sports**

1. **You should NEVER return to play if you still have ANY symptoms** – Be sure that you do not have any symptoms at rest and while doing any physical activity and/or activities that require a lot of thought.
2. Be sure that the PE teacher, coach, and/or athletic trainer are aware of your injury and symptoms.
3. It is normal to feel frustrated, sad and even angry because you cannot return to sports right away. With any injury, a full recovery will reduce the chances of getting hurt again. It is better to miss one or two games than the whole season.

### **The following are recommended at the present time:**

Do not return to PE class at this time

Return to PE class

Do not return to sports practices/games at this time

**Gradual** return to sports practices under the supervision of an appropriate health care provider.

•Return to play should occur in gradual steps beginning with aerobic exercise only to increase your heart rate (e.g., stationary cycle); moving to increasing your heart rate with movement (e.g., running); then adding controlled contact if appropriate; and finally return to sports competition.

•Move to the next level of activity only if you do not experience any symptoms at the each level. If your symptoms return, stop these activities and let your health care professional know. Once you have not experienced symptoms for a minimum of 24 hours and you receive permission from your health care professional, you should start again at the previous step of the return to play plan.

### **Gradual Return to Play Plan**

No physical activity

Low levels of physical activity. This includes walking, light jogging, light stationary biking, light weightlifting (lower weight, higher reps, no bench, no squat).

Moderate levels of physical activity with body/head movement. This includes moderate jogging, brief running, moderate-intensity stationary biking, moderate-intensity weightlifting (reduced time and/or reduced weight from your typical routine).

Heavy non-contact physical activity. This includes sprinting/running, high-intensity stationary biking, regular weightlifting routine, non-contact sport-specific drills (in 3 planes of movement).

Full contact in controlled practice.

Full contact in game play.