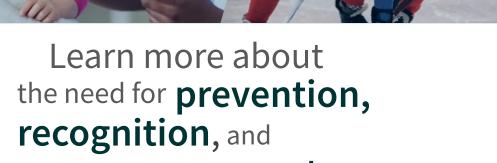
recognition, and management of concussion



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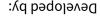




resources that are both printable and smartphone accessible. information. The website is updated frequently and includes online courses, videos, and and administrators with a comprehensive and up-to-date collection of concussion provides medical professionals, parents, players, coaches, and school professionals The free Concussion Awareness Training Tool (CTTA)

is crucial to the health and safety of our kids. The recognition, appropriate treatment, and management of a concussion

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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.

AT HOME			AT SCHOOL				
STAGE 1:	STA	GE 2:	STAGE 3:	STAGE 4:	STAGE 5:	STAGE 6:	
Physical & cognitive rest Basic board games, crafts, talk on phone Activities that do not increase heart rate or break a sweat Limit/Avoid: Computer, TV, texting, video games, reading No: School work Sports Work Driving until cleared by a health care professional	Start with light cognitive activity: Gradually increase cognitive activity up to 30 min. Take frequent breaks. Prior activities plus: Reading, TV, drawing Limited peer contact and social networking Contact school to create Return to School plan.	When light cognitive activity is tolerated: Introduce school work. Prior activities plus: • School work as per Return to School plan Communicate with school on student's progression.	Back to school part-time Part-time school with maximum accommodations. Prior activities plus: • School work at school as per Return to School plan No: • P.E., physical activity at lunch/recess, homework, testing, sports, assemblies, field trips Communicate with school on student's progression.	Part-time school Increase school time with moderate accommodations. Prior activities plus: Increase time at school Decrease accommodations Homework – up to 30 min./day Classroom testing with adaptations No: P.E., physical activity at lunch/recess, sports, standardized testing Communicate with school on student's	Full-time school Full days at school, minimal accommodations. Prior activities plus: Start to eliminate accommodations Increase homework to 60 min./day Limit routine testing to one test per day with adaptations No: P.E., physical activity at lunch/recess, sports, standardized testing	Full-time school Full days at school, no learning accommodations. • Attend all classes • All homework • Full extracurricular involvement • All testing No: • full participation in P.E. or sports until Return to Sport protocol completed and written medical clearance provided Full academic load	
	No: School attendance Sports Work		School work only	Increase school work, introduce homework,	Work up to full days at school, minimal learning accommodations		
Rest	Gradually add cognitive activity including school work at home		at school	decrease learning accommodations			
When symptoms start to improve OR after resting for 2 days max, BEGIN STAGE 2	Tolerates 30 min. of cognitive activity, introduce school work at home	Tolerates 60 min. of school work in two 30 min. intervals, BEGIN STAGE 3	Tolerates 120 min. of cognitive activity in 30-45 min. intervals, BEGIN STAGE 4	Tolerates 240 min. of cognitive activity in 45-60 min. intervals, BEGIN STAGE 5	Tolerates school full- time with no learning accommodations BEGIN STAGE 6	Return to School protocol completed; focus on RETURN TO SPORT	

Note: A student is tolerating an activity if symptoms are not exacerbated.

Adapted from the Return to Learn protocol by G.F. Strong School Program (Vancouver School Board), Adolescent and Young Adult Program, G.F. Strong Rehabilitation Centre.

BOTH TOOLS CAN BE USED IN PARALLEL; HOWEVER, RETURN TO SCHOOL SHOULD BE COMPLETED

BEFORE

RETURN TO SPORT IS COMPLETED

Return to Sport

This tool is a guideline for managing an individual's return to sport following a concussion and does not replace medical advice. Timelines and activities may vary by direction of a health care professional.

replace medical advice. Timelines and activities may vary by direction of a health care professional.								
STAGE 1:	STAGE 2:	STAGE 3:	STAGE 4:	STAGE 5:	STAGE 6:			
No sporting activity	Light aerobic exercise	Sport-specific exercise	Non-contact drills	Full-contact practice	Back in the game Normal game play			
Physical and cognitive rest until symptoms start to improve OR after resting for 2 days max.	Walking, swimming, stationary cycling. No resistance training. The pace of these activities should be at the point where you are still able to have a conversation.	Skating drills (ice hockey), running drills (soccer). No head-impact activities. Add movement	Progress to complex training drills (e.g. passing drills). May start resistance training. Exercise, coordination, cognitive load	Following medical clearance participate in normal training activities. Restore confidence; assess functional skills				
Symptoms improve or 2 days rest max? Yes: Move to stage 2 No: Continue resting Time & Date completed:	No new or worsening symptoms for 24 hours? Yes: Move to stage 3 No: Return to stage 1 Time & Date completed:	No new or worsening symptoms for 24 hours? Yes: Move to stage 4 No: Return to stage 2 Time & Date completed:	Symptom-free for 24 hours? Yes: Move to stage 5 No: Return to stage 3 Time & Date completed:	Symptom-free for 24 hours? Yes: Move to stage 6 No: Return to stage 4 Time & Date completed:	Note: Premature return to contact sports (full practice and game play) may cause a significant setback in recovery.			