

Decision-Making Pathway for Concussions

Steps and Responsibilities: Identifying a Suspected Concussion



Student:

- Receives a blow to the head, face, neck or a blow to the body that transmits a force to the head.
- As a result, the responsible adult (e.g., teacher/coach/supervisor) suspects a concussion

Teacher/Coach/Supervisor

- Stops student participation.
 Initiates Emergency Action Plan (Use the school's Emergency Action Plan)

Teacher/Coach/Supervisor

· Check for RED FLAG sign(s) and/or symptom(s) (Use the Tool to identify a suspected concussion or the Concussion Recognition Tool 5).

Is this a medical emergency?

Teacher/Coach/Supervisor

Remove the student from the current activity or game if the student can be safely moved.

Is a licensed healthcare professional present?

No ¬

Medical doctor/nurse practitioner

Complete a sideline medical assessment. (Use the Sport Concussion Assessment Tool 5 (SCAT5) or the Child-SCAT5).

Teacher/Coach/Supervisor

Check for other concussion sign(s) and/or symptom(s) (Use the Tool to identify a suspected concussion or the Concussion Recognition Tool 5).

Is a concussion suspected?

₩ No

Yes -

- A concussion is NOT suspected (No concussion sign(s) and/or symptom(s) are observed or reported).
- May not resume physical activity for at least 24 hours even if the student states that they are feeling better.

- A concussion is suspected (Concussion sign(s) and/or symptom(s) are observed and/or reported)
- Require urgent medical assessment from a medical doctor or nurse practitioner.

Teacher/Coach/Supervisor

Yes

- Call 911 for emergency medical assessment and immediate ambulance transport to the nearest emergency department for further medical assessment
- The student must not be left alone until emergency medical services arrive.
- Provide a copy of the completed Tool to identify a suspected concussion to emergency medical services.
- Follow the other RED FLAG Procedures.

Teacher/Coach/Supervisor

- Contact the parent/guardian in order to provide information about the incident and the importance of continued monitoring.
- Student can attend school but must not return to physical activity for 24 hours as signs and/or symptoms can take hours to days to emerge.
- Inform principal of the incident.

Teacher/Coach/Supervisor

- Contact the parent/guardian in order to provide information about
- Provide information to parent/guardian about the need to come and pick up the student for a medical assessment as soon as possible.
- Monitor and document any changes in the student's presenting sign(s) and/or symptom(s) until their parent/guardian arrive
- Provide a completed copy of the Tool to identify a suspected concussion along with a copy of the Documentation of medical examination form.
- Inform principal of suspected concussion.

Teacher/Coach/Supervisor

- Contact parent/guardian and provide information about the incident and name of hospital.
- Inform principal of suspected concussion.

Parent/guardian/school

Continue monitoring the student for at least 24 hours for the emergence of delayed sign(s) and/or symptom(s).

Principal/Designate

Inform school staff of suspected concussion.

Parent/guardian/ school

- Student is permitted to resume physical activity if no signs or symptoms emerge after 24
- **Medical Clearance** is not required.

Parent/guardian/ school

If sign(s) and/or symptom(s) emerge, the student needs a medical assessment as soon as possible on that day.

Medical doctor/nurse practitioner

Complete a Medical Assessment (Use the Sport Concussion Assessment Tool 5 (SCAT5) or the Child-SCAT5).

- Complete the Documentation of medical examination form.
- Report to the principal the outcome of the Medical Assessment.
- Schedule an appointment with the student's primary care provider (family physician or nurse practitioner) to ensure a continuous medical follow-up during their progressive Return-to-School and Return-to-Sport/Physical Activity Strategy.

A concussion has been diagnosed by a medical doctor or nurse practitioner.

Student Parent/Guardian





CONTINUED ON OTHER SIDE



Decision-Making Pathway for Concussions

Steps and Responsibilities: Diagnosed Concussion



Begins the medically supervised gradual Return-to-School and Return-to-Sport/Physical Activity Strategy.

Principal/Designate

- Inform all school staff who works with the concussed student of the diagnosis
- Establish the collaborative team along with a designated lead
- Meet with the parent/guardian to:

 - Receive a completed copy of the Documentation of Medical Examination form. Explain the importance of completing home preparations before returning to school.
 - Provide a copy of the Return-to-School Strategy, Return-to-Sport Strategy and Return of Symptoms forms.

Student

Begins medically supervised gradual Return to School and Return to Sport/Physical Activity Strategy.

Parent/guardian

- Contact the principal/designate once the student has:

 Completed Stage A and Stage B of the Return to School Strategy and;

 Completed at least Stage 1 of the Return to Sport/Physical Activity Strategy.

Principal/Designate

- Meet with the parent/guardian to:
- Explain the school's role in supporting the student's progression through each step of the Return-to-School and Return-to-Sport/Physical Activity Strategy.
- Provide a copy of the Individualized Learning Accommodations Following a Concussion form.
- Inform them of the Collaborative Team participants and the parent/guardian role on the team.
- Encourage open communication to help complete the remaining steps with a Collaborative Team approach.

- Returns to school.
- Conference with the designate to identify which learning accommodations are required based on post-concussion symptoms.

Return-to-School - Stage C

The student attends school part-time as an observer with maximum usage of learning accommodations

The student may proceed directly to Stage D, unless advised otherwise.

Return-to-School - Stage D

- The student attends school part-time with moderate usage of learning accommodations.
- The student may gradually increase their academic activities.

Return-to-School - Stage E

The student may work towards a full day at school with minimal usage of learning accommodations

The student may proceed directly to Stage F, unless advised otherwise.

Return-to-School - Stage F

- The student attends school full-time with no learning accommodations.
- The student may gradually resume their regular academic activities and catch up on missed school work.
- The Return-to-School Strategy is complete.

Student

Continues to progress gradually through the remaining stages of the Return to Sport/Physical Activity Strategy.

Return-to-Sport/Physical Activity - Stage 2

The student may complete individual light aerobic physical activity to increase their heart rate.

Return-to-Sport/Physical Activity - Stage 3

The student may complete individual sport-specific physical activity to add movement.

Return-to-Sport/Physical Activity - Stage 4

The student may complete non-contact training drills to add coordination and increased cognitive load.

Principal/Designate

Report to a parent/guardian the student's completion of Return to School - Stage F and Return to Sport/Physical Activity - Stage 4.

Parent/guardian
Provide the principal with a Return-to-Sport/Physical Activity
Strategy form with the Medical Examination section signed by a parent/guardian.

Return-to-Sport/Physical Activity - Stage 5

The student may engage in full participation in physical activity (physical education, intramurals or interschool) during contact practice and/or non-contact sport competition.

Return-to-Sport/Physical Activity - Stage 6

- The student may fully participate in any physical activity, practice or sport competition with or without contact
- The Return-to-Sport Strategy is complete.

- The student is monitored for any new or worsening signs and/or symptoms by both school and parent/guardian.
- The student is monitored for any deterioration of work habits or academic performance by both school and parent/guardian.
- If the student is unable to tolerate recommended activities at any specific stage, they should go back to the previous stage for at least 24 hours.
- The student may need to move back a stage more than once during their recovery process.
- The student's progress is documented with results shared between school and home at the completion of each stage.

If the student exhibits or reports any new or worsening signs or symptoms, the student must obtain a Medical Clearance reassessment.

page 2