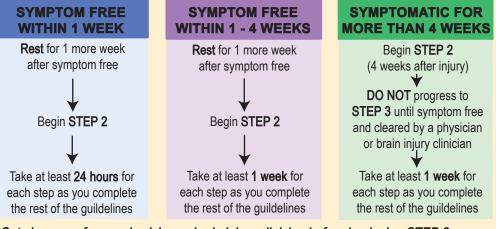
CONCUSSION MANAGEMENT Return to Activity Guidelines for Children & Youth

These guidelines should be followed in discussion with a physician or brain injury clinician.

STEP 1: No Activity and Complete Rest

NO physical activity if symptomatic

Which symptom group are you in: BLUE, PURPLE, or GREEN?



*Get clearance from a physician or brain injury clinician before beginning STEP 2

STEP 2: Light Exercise

STOP If symptoms return, rest for at least 24 hours and then go back to the previous step

 NO resistance training or weight lifting • 10-15 minutes light exercise, maximum twice a day

e.g., walking, stationary cycling, light jogging, freestyle swimming

STEP 3: Individual Sport-Specific Activity

- NO body/head contact, spins, dives, jumps, high speed stops, hitting a baseball with a bat, or other jarring motions
- 20-30 minutes general conditioning, maximum twice a day. e.g., skating, running, throwing

STEP 4: Sport-Specific Practice with Team, NO CONTACT

- NO checking, heading the ball, tackling, live scrimmages
- · Begin activities with one other teammate and then by the end of this step progress to full team practice, with NO contact.

e.g., ball drills, shooting/passing drills, or other non-contact activities

· Begin resistance training and 'beginner level' sport-specific skills. Increase skill level over time.

*Get clearance from a physician or brain injury clinician before beginning STEPS 5 and 6

STEP 5: Sport-Specific Practice with Team and CONTACT

· Participate in normal training activities. If no symptoms, you are ready to return to competition!

STEP 6: Return to Activity, Sport or Game Play

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CONCUSSION MANAGEMENT Return to School Guidelines for Children & Youth

These stages are designed to strike a balance between the importance of returning to school and brain recovery. Work with your school to put these recommendations into place.

STAGE 1: Brain Rest - NO SCHOOL

No school for at least one week

· Lots of cognitive rest (NO TV, video games, texting, reading)

• When symptom free, move to STAGE 2

*If symptoms persist past 2 weeks, move to STAGE 2

STAGE 2: Getting Ready to Go Back

 Begin gentle activity guided by symptoms (walking, 15 minutes of screen time twice daily, begin reading). If symptoms worsen, reduce activity.

• When symptom free, move to STAGE 3

*If symptoms persist, stay in this stage for a maximum of 2 weeks and discuss moving to STAGE 3 with your physician or brain injury clinician

STAGE 3: Back to School/Modified Academics

- This stage may last for days or months depending on rate of recovery
- · Go to bed early and get lots of sleep. Have a quiet retreat space in school Academic Modifications:
- Timetable/attendance: Start by going for one hour, half days or every other day
- · Curriculum: Attend less stressful classes, no tests, homework in 15 minute blocks up to a maximum of 45 minutes daily
- · Environment: Preferential seating, avoid music class, gym class, cafeteria, taking the bus, carrying heavy books

 Activities: Limit screen/TV time into 15 minute blocks for up to 1 hour daily • When symptom free, move to STAGE 4

*If symptoms persist past 4 weeks \rightarrow A recovery Individualized Education Plan (IEP) may be needed

STAGE 4: Nearly Normal Routines

- · Back to full days of school, but can do less than 5 days a week if needed
- Complete as much homework as possible and a maximum of 1 test per week

• When symptom free, move to STAGE 5

STAGE 5: Fully Back to School

· Gradually return to normal routines including attendance, homework, tests and extracurricular activities

SYMPTOMS OF CONCUSSION

McMaster		SYMPTOMS OF CONCUSSION	
University	 Sleep disturbances or drowsiness Sensitivity to light or noise 		
A A A A A A A A A A A A A A A A A A A	 Headache 	 Mentally foggy 	
CanChild	 Nausea and vomiting Diffic 	culty concentrating/ remembering	
Centre for Childhood Disability Research	 Poor balance or coordination 	Irritability	
www.canchild.ca	 Dizziness 	Sadness	
	 Visual problems 	 Nervousness 	