# Return to Academics Protocol After Concussion/mild TBI

When a concussion occurs, a child looks normal, and teachers might be unaware of a student's cognitive difficulties during recovery. Rest is needed for the brain to recover from a concussion. Taxing the brain with academic activity can impede or prolong recovery. Most students will recover fully in days or weeks, but some will take longer to heal. Each child and each brain injury is different. If full recovery is not evident in three months, an IEP may be helpful to meet the specific learning challenges.

Not all students will need academic accommodations following concussion; consult with each student's healthcare provider. All steps in this academics protocol must be completed before a student-athlete is ready to proceed to a return-to-play protocol.

Step 1. **Total** rest.

 No mental exertion (computer, texting, video games, or homework), stay at home, no driving.

Step 2 Light mental activity.

- ullet Up to 30 minutes of mental exertion, but no prolonged concentration, stay at home, no driving.
- Progress to next level when able to handle up to 30 minutes of mental exertion without worsening of symptoms.

Step 3. **Part**time School.

- Maximum accommodations (shortened day/schedule, built-in breaks, provide quiet place for mental rest, no significant classroom or standardized testing, modify rather than postpone academics, provide extra time, extra help, and modified assignments).
- Progress to next level when able to handle 30–40 minutes of mental exertion without worsening of symptoms.

Step 4. **Part**rtime School.

- Moderate accommodations (no standardized testing, modified classroom testing, moderate decrease of extra time, help, and modification of assignments).
- Progress to next level when able to handle 60 minutes of mental exertion without worsening of symptoms.

Step 5. Fulltime School.

- Minimal accommodations (no standardized testing, but routine testing ok; continued decrease of extra time, help, and modification of assignments; may require more supports in academically challenging subjects).
- Progress to next level when able to handle all class periods in succession without worsening of symptoms AND medical clearance for full return to academics.

Step 6. Fulltime School

Full academics with no accommodations (attends all classes, full homework).

Should symptoms continue beyond 3–4 weeks, prolonged in-school support is required. Request a 504 meeting to plan and coordinate. If you have questions, contact Oregon's TBI coordinator at 1-877-872-7246.

#### REMEMBER

Progression is individual. Every concussion is different. Student may start at any step as symptoms dictate and remain at each step as long as needed. Return to previous step if symptoms worsen. No return-to-play protocol should be implemented until after the student has returned to full academics.



Class/Period:	
Instructor:	

### **Classroom Concussion Assessment Form**

Name:					]	Date: Time:			
Instructions to the Student: Read the symptoms in the left-hand column. For each symptom, circle one answer in the center column. Be honest and do not skip any questions. Then, answer the question at the bottom of this page. Give the sheet to your educator once complete.				Instructions to the Educator:  Use the student's responses to the following questions to devise in-class, symptom-based accommodations. Refer back to Concussions in the Classroom for more specific explanations of the accommodations.					
Symptoms	Circle ONE in each row					: Accommodations			
Headache				lerate severe		:			
Dizziness/balance problems			mode			- Mild/moderate: Allow			
Feeling sick to stomach (nausea)			mode			classroom participation - Avoid symptom triggers			
Tiredness/drowsiness			mode			- If severe, refer to nurse/parent			
		••••••		• • • • • • •					
Symptoms	Circle	ONE				Accommodations			
Sensitivity to light	no	yes				- Move away from windows			
			•			- Dim lights/draw shades			
						- Allow sunglasses/hat in class			
Sensitivity to noise	no	yes				- Remove from loud environments - Reduce classroom noise			
						- Avoid headphones and loud music			
Feeling mentally foggy	no	yes				- Give breaks between tasks - Simplify tasks			
Difficulty concentrating on choolwork	no	yes				- Shorten task duration			
-						- Give breaks between tasks			
Difficulty paying attention o teacher	no	yes				- Front room seating - Work/test in quiet room			
Difficulty remembering	no	yes				- Provide class notes			
						- Provide memory aids - Use alternative testing methods			
Pifficulty staying organized	no	yes				- Use agenda/planner for schedule ar due dates - Check comprehension of instructio - Use "to-do" lists and checklists			





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# Post-Concussion Symptom Checklist

structions: For each item pleas <b>Symptom</b>	None		Wild		Moderate		Seve
Headache	0	1	2	3	4	5	6
Nausea	0	1	2	3	4	5	6
Vomiting	0	1	2	3	4	5	6
Balance problems	0	1	2	3	4	5	6
Dizziness	0	1	2	. 3	4	5	, , 9,
Visual problems	0	1	2	3	4	5	, 6
Fatigue	0	1	2	3	4	5	6
Sensitivity to light	0	1	2	3	4	5	6
Sensitivity to noise	0	1	2	3	4	5	<del>5</del> 6
Numbness/tingling	0	1	2	3	4	5	6
Pain other than headache	0	1	2	3	4	5	<b>0</b> 6
Feeling mentally foggy	0	1	2	3	4	5	6
Feeling slowed down	0	1	2	3	4	5	6
Difficulty concentrating	0	1 1	2	3	4	5	6
Difficulty remembering	0	1	2	3	4	5	<del></del>
Drowsiness	0	1	2	3	4	5	6
Sleeping less than usual	0	1	2	3	4	5	6
Sleeping more than usual	0	1	2	3	4	5	<u>-</u> 6
Trouble falling asleep	0	1	2	3	4	5	<del></del> 6
Irritability	0	1	2	3	4	5	6
Sadness	0	1	2	3	4	5	6
Nervousness	0	Puri.	2	3	4	5	6
Feeling more emotional	0	1	2	3	4	5	6
ion: Do these symptoms wors Physical Activity	en with: Yes	No	Notana	. l: 1			
Thinking/Cognitive Activity	Yes	No	Not applicable Not applicable				
all Rating: How different are y	ou acting co	ompared to	O your usual	self?			
Same as Usual 0 1	2 3				y Different		

The emphasis in managing a concussed student in the classroom is to allow the student to participate and learn without worsening symptoms (which may delay healing).

As the student improves, gradually increase demands on the brain by increasing either:

- A. the amount of work
- B. the length of time spent on the work
- C. the type or difficulty of work
- \*\*\* IMPORTANT NOTE: Change only ONE of these things at a time.

Below is a decision-making flow chart of what to do if increasing cognitive demand worsens symptoms.

## Increase cognitive demand

Symptoms increase or worsen

No change in symptoms

Discontinue activity
Complete cognitive rest
for 20 minutes

Continue gradually increasing cognitive demands



Symptoms improve with 20 minutes of rest

Symptoms do not improve with 20 minutes of rest

Re-start activity at or below the same level that produced symptoms Discontinue activity and resume when symptoms have lessened (such as next day)

