

Concussion Information Sheet for Students and Parents

The following recommendations are standard for all students who suffer from a head injury and are designed to help speed your recovery. Your careful attention to them can also prevent prolonged recovery and further injury. The typical recovery period for a concussion is 7 to 10 days.

- Avoid physical activity – you should not participate in physical education or sports participation until you are headache free for one week. This includes weight training, running, exercising and heavy lifting.
- Get lots of rest. Be sure to get enough sleep at night – no late nights. Keep the same bedtime on the weekdays and weekends.
- Drink lots of fluids and eat carbohydrates or protein to maintain appropriate blood sugar levels
- Take daytime naps or rest breaks if you feel fatigued or the onset of a headache
- Limit activities that require a lot of thinking or concentration. These activities can make your symptoms worse. This may include limiting class work, homework and job related activity.
- Avoid prolonged computer use, video gaming, television watching, text messaging, telephone use.
- During recovery, it is normal to feel frustrated and sad when you do not feel right and you cannot be as active as usual.
- Seek re-evaluation as your symptoms will help guide recovery.

Academic Participation

Because recovering from a concussion can be a gradual process and school work continues while recovery is taking place, it is necessary for students, parents and school personnel to be aware of and consider the following symptoms that a student may demonstrate during recovery:

- Increased difficulty 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
- Headaches and fatigue that worsens when doing school work

These symptoms are normal, to be expected, and temporary.

Physical Activity and Sport Participation

It is important to avoid all physical activity, in school and out of school, in particular any physical activity that carries a risk of head injury. The likelihood of sustaining a second head injury is greater during the recovery phase of a concussion. Rapid or early return to sports and play puts you at risk for Second Impact Syndrome which can lead to severe and possibly lethal outcomes. Therefore, it is necessary to follow these recommendations for returning to sports/play:

- You should NEVER return to play if you have any concussion symptoms (see above). This includes symptoms at rest and while doing any physical or mental activity. Be sure the PE teacher, coach and athletic trainer are aware of your injury and ongoing symptoms.
- It is normal to feel frustrated, sad and even angry because you cannot return to sports right away. As 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.

Requirements for Academic Accommodations during Recovery

1. Medical evaluation and side two of this form is completed by student's physician
2. Parental authorization for school nurse and medical advisor to exchange information with student's physician.
3. Student has not been cleared to resume game play (athletics) or other contact/strenuous physical activity.
4. Beyond three weeks, an assessment and recommendation(s) by a neurologist or neurosurgeon.

Acute Concussion Care Plan – Must be completed by student’s physician

Student Name _____

Date of Birth _____

Date of Injury _____

Today’s Date _____

Expected Date of Return to School _____

The above student requires the following short term academic supports for proper concussion management in school (checked items apply):

- No educational modifications (always applies when cleared for PE and sports/athletics)
- Shortened day or modified schedule, as indicated
- Extra time to complete coursework, assignments, tests - until review date below.
- No significant classroom testing or standardized testing - until review date below.
- Rest breaks throughout the day as needed at onset of headache. Consider Acetaminophen administration. Allow dismissal home if headache is above 3 on scale of 1-10 and doesn’t resolve after 20-30 minute of rest in quiet area (i.e. school health office).
- No outdoor or indoor recess where running and active or contact play are possible.

AND

The above student should adhere to the following recommendations regarding physical education (PE) and athletic participation (checked items apply):

- Is medically cleared** to participate in PE and sports/athletics
- May not return** to PE or sports/athletics until further notice
- May gradually return*** to physical activity under the supervision of an appropriate person (e.g. athletic trainer, coach or physical education teacher). Return to play should occur in gradual steps:
 1. Begin with aerobic exercise only to increase heart rate (walking, light jogging, stationary cycling, light weight lifting – low weight, higher reps, no bench, no squat)
 2. Work to increase heart rate with body/head movement (jogging, brief running, moderate intensity stationary biking, moderate intensity weightlifting – reduced time and reduced weight from typical routine)
 3. Move on to heavy non-contact physical activity (sprinting/running, high intensity stationary biking, regular weightlifting routine, non-contact sport specific drills (in 3 planes of movement)
 4. Return to full contact in controlled practice (before return to full contact in game play).
 5. Return to full contact in game play on or after _____.

***Students:** pay careful attention to your symptoms, including thinking and concentration skills, at each stage of activity. You should only move on to the next level of activity when you do not experience any symptoms during or after the activity for 2-3 days at the current level. If symptoms do return, please contact me for further medical advice.

These recommendations will be reviewed and updated on _____.
(Academic accommodations beyond three weeks require assessment by a neurologist or neurosurgeon).

Care Plan completed by _____ MD APRN PA
Signature

Printed Name _____ Telephone _____