Returning to learn after a concussion

Stage of recovery	Home activities	School activities	Goal
 Stage 1 First 1 to 3 days after injury 	 Relax at home with an adult present. Avoid activities that make symptoms worse. Limit screen time (like TV, computer, cell phone, tablet, social media and video games) to no more than 45 minutes each day for the first 3 days.* Allow as much sleep as needed. Give plenty of fluids to drink. Give small, frequent meals during the day and at bedtime. See your pediatrician for an exam and treatment recommendations. 	 Many children will need to stay home from school for the first 1 to 3 days after injury. Some children with mild symptoms may go to school sooner (see stages 2 and 3). 	 Avoid activities that make symptoms worse. See your pediatrician for assessment and treatment. Avoid long school absence*
 Stage 2 Part time school Need a lot of short term accommodations to manage symptoms Many students will be able to go back to school at stage 3 Some students will need a short time at stage 2 Your pediatrician can help determine whether to start at stage 2 or 3 based on your child's symptoms and their ability to go to a full day of school 	 Limit fun screen time (like TV, social media and videogames) until able to do all classroom activities, including tests and assignments.* Help your child with coping strategies. Avoid stress about missed schoolwork. Do homework in short periods. Try 20 minutes of work and then a few minutes of relaxation. Follow healthy sleep routine with regular sleep and wake times. Provide healthy meals and plenty of fluids. Do easy cardio exercise every day at a level that does not make symptoms worse. Try a 10 to 20 minute walk. Do this in a safe space where there is little chance of another head injury. Avoid intense exercise and strength training. 	 Return to school Some but not all children (see stage 3) need a few days of part time school attendance before they can do normal classroom activities. Attendance Ask for modified attendance, such as half days at school, only core classes or reduced time in some classes. Increase classroom attendance until your child is able to do full days at school. Accommodations Talk with the school about short term support, including: Postpone all tests and large assignments during this stage. Allow rest breaks at their desk or a quiet space outside the classroom. Allow less work at a time and delayed deadlines. Dim computer screens. Print notes and assignments. Allow sunglasses for light sensitivity. Avoid loud places like the cafeteria and assemblies. 	 Start at part time school days and work to return to full classroom attendance. Focus on being in the classroom and managing symptoms rather than completing tests and assignments on time. Allow smaller assignments to be done at your child's own pace. This may mean delayed deadlines.
Stage 3 • Full time school attendance	 Limit fun screen time (like TV, social media and videogames) until able to do all classroom activities, including tests and assignments.* 	 No risky activities in PE or recess until your child's provider say it is OK. Return to school Many children can go back to a full day of school shortly after the injury. 	 Start at full school days and work to return to full classroom participation.

 Stage 3 (continued) Need a lot of short term accommodations to manage symptoms Full time school attendance Need a lot of short term accommodations to manage symptoms 	 Help your child with coping strategies. Avoid stress about missed schoolwork. Encourage safe social activities with friends and family if they do not make symptoms worse. Follow healthy sleep routine with regular sleep and wake times. Provide healthy meals and plenty of fluids. Do easy to moderate cardio exercise every day at a level that does not make symptoms worse. Try a 10 to 20 minute walk or jog. Do this in a safe space where there is little chance of another head injury. Avoid intense exercise and weightlifting. 	 Some children need part time before full time school (see stage 2). Attendance Full days at school Accommodations Your child may still need some of the short term support listed in stage 2, especially rest breaks and light and noise adjustments. Continue to talk with the school about short term support, such as: Reduce or remove some missed work. Assign most important learning tasks only. Create a schedule to make up tests and assignments so your child has enough time to prepare. Limit the number of tests each day and reduce schoolwork. Allow extra time to complete tests and assignments. Consider tutoring or extra instruction for difficult subjects. No risky activities in PE or recess until your child's provider says it is OK. 	 Focus on completing missed tests and assignments in a reasonable timeframe.
 Stage 4 Full time school attendance Near normal classroom activity May still need occasional accommodations to manage mild symptoms. 	 Talk with the school about creating a plan for tests and assignments. They should provide a schedule that allows your child to learn the material and prepare for tests they missed. Your child may have close to normal home and social activities. They can return to normal screen time. Encourage safe social activities with friends and family if they do not make symptoms worse. Follow healthy sleep routine with regular sleep and wake times. Provide healthy meals and plenty of fluids. Do easy to moderate cardio exercise every day at a level that does not make symptoms worse. Try a 10 to 20 minute walk or jog. Do this in a safe space where there is little chance of another head injury. Avoid intense exercise and weightlifting. 	 Attendance Full days at school with a normal schedule Accommodations Your child should be close to normal classroom activity. They should take notes, complete assignments and take tests. Your child may still need extra time to make up missed work in a reasonable timeframe. They may still need some support to reduce symptoms, such as: Short rest breaks at their desk. Extra time to complete tests. Light and noise adjustments. Tutoring or extra instruction for classes missed during stages 1 to 3. Reasonable schedule to make up tests and assignments. No risky activities in PE or recess until your child's provider says it is OK. 	 Return to normal school attendance and normal classroom participation. Complete missed tests and assignments. Allow some support to reduce symptoms.

Stage 5	Your child returns to normal home and	• Full days at school with a normal schedule.	Return to normal
Full time school	social activities.	 Accommodations no longer needed. 	school attendance and
attendance	 Talk to your child's doctor about when it is 	 Your child needs a letter from their 	normal classroom
Normal classroom	safe to return to sports and other risky	provider before returning to regular PE,	activity.
activity	activities.	recess and sports.	
No symptoms			

What is the return to learn process? The return to learn process includes guidelines to help parents, students and school staff make sure students have a successful transition back to school after a concussion. The guidelines are not strict rules.

What would be helpful for me to know before sending my child back to school?

Attendance: Your child should have a short period of rest for the first 1 to 3 days after their injury. Some children may need a part time schedule when they first return to school. As their symptoms improve, your child should be able to:

- Attend full days of school.
- Return to normal class activities.
- Need less accommodations.

Short-term or temporary accommodations: Most students going back to school after a concussion need short-term supports and flexibility, also known as classroom and testing accommodations. Those listed in these guidelines are most often requested. There may be others that your child needs. Your pediatrician can help with this.

- The goal of the accommodations is to make the return to school process easier for your child and their school. They do not need to be permanent and are only required when your child is in the process of recovery from concussion.
- The school should keep accommodations the same until your child is ready to move to the next stage.
- Students who had 504 Plans, IEPs or similar supports before their concussion should continue to get the same accommodations throughout their return to learn process.

Symptoms: Your child may have mild increases in headaches or other symptoms during their return to learn process. The symptoms should not last long. This is safe and can be expected.

- If their symptoms increase a lot, your child should take a break from that activity. They can return to the activity after the symptoms lessen.
- Your child may have a bad day during recovery, but it would be unusual for a student to go backwards in their stage or activity level during this process.

Coping: Some children with concussions have changes in their emotions and thinking. It affects their ability to advocate for themselves. Your child should not be expected to ask for support for themselves. They may need help talking to specific teachers about support.

- The return to learn process can be very stressful for everyone. Your child's emotional well-being should be a priority during this time.
- Families are encouraged to find mental health support as needed. Go to <u>choa.org/medical-services/behavioral-and-mental-health</u> for a list of community resources.

What else is important to know?*

When scientists study students recovering from concussions, they find the following to be true:

- Longer time out of school does not improve recovery. More time away from school may cause full recovery to take longer in some people.
- Avoiding screens (like TV, computers, cell phones, tablets and videogames) during the first 3 days can help your child recover faster. Avoiding screens completely after 3 days may not improve recovery.
- Easy cardio exercise like walking or jogging starting 2 to 3 days after injury can improve recovery.
 - It should not make symptoms a lot worse.
 - It should be done in a safe space, so your child does not get reinjured.
 - It is not the same as the return to play and sports process.

Children should not return to regular sports, PE or recess until:

- They have returned to normal classroom activity without symptoms.
 - They have been cleared by a provider.
- They complete a return to play activity progression without symptoms.

This is general information only. Talk with your child's doctor or a member of your child's healthcare team about specific care of your child. In case of an urgent concern or emergency, call 911 or go to the nearest emergency department right away. For mental health crisis support, call the Georgia Crisis and Access Line (GCAL) at 1-800-715-4225 or text 988 for the Suicide & Crisis Lifeline.



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