Mild head injury and concussion



Return-to-Learn Guidelines

| Stage of healing | Home activity | School activity | Physical activity |
|---|--|---|---|
| Stage 1– Your child still has many symptoms and problems. | Limited or minimal stimulation Allow as much sleep as possible Limit things that require your child to think, focus, reason or remember Remove any electronics and computers from your child's room Remove any activity planners and to-do lists from your child's room Give your child plenty of fluids to drink Feed small, frequent meals during the day and at bedtime Give your child plenty of carbohydrates to eat, such as whole grain breads and cereals, pasta and rice | Your child may not go to school. It is typical to rest for 24 to 48 hours and monitor if symptoms improve | See Stage 1 in next chart |
| Stage 2– Your child still has some symptoms and problems. | Slowly increase cognitive activity (thinking and remembering) as symptoms improve Allow for enough sleep—at least eight hours Allow your child to use TV, video games, texting, tweeting and email for a short time—less than two hours a day; for example, he might have 20 minutes of brain work followed by a one-hour brain break Help your child not to stress over missed schoolwork Continue with fluids, small frequent meals and carbohydrates, as in Stage 1 As your child has less symptoms, begin adding homework in short sittings to avoid falling behind | Return to school for half days Attend core classes only or have shortened class time Rest in the nurse's office between classes, as needed Your child may not take tests or quizzes Use pre-printed class notes Complete short homework assignments—work 20 minutes at a time with rest breaks in between Talk with the school nurse or teacher about academic accommodations from your doctor and create a plan Avoid very loud noises like music and noise in cafeterias, at PE and recess | See Stages 2-3 in next chart |
| Stage 3– Your child's symptoms and problems have gone away. | Slowly return to watching TV, playing video games and texting Allow family interactions again Continue with fluids, small frequent meals and carbohydrates, as in Stage 1 | Your child may gradually return to a full day of classes He may need to schedule make-up work, tests and quizzes He may take one test or quiz a day with extra time, as needed, to complete Tell the school nurse or teacher if any symptoms or problems return | See Stages 2-4 in next chart |
| Stage 4– Your child seems back to normal. | Your child may have near-normal home and social interactions | Your child may begin to complete past assignments and become caught up | See Stages 5 and 6 in next chart |
| Stage 5– Your child may return to full activities. | Your child may return to normal home and school interactions with five days of no symptoms | Your child may return to normal school function without the need for extra accommodations or restrictions | See Stage 7 in next chart |

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Return-to-Play and Sports Guidelines

| Stage of healing | Activity allowed | Examples of sports | Examples of other activities | Goal |
|------------------|---|---|--|--|
| 1 | No activity Complete cognitive and physical rest | Complete physical rest | Quiet time with rest Avoid groups, videos, reading, computers, video games, cellphones, noisy places | Brain rest and healing BE FREE OF SYMPTOMS |
| 2 | Light aerobic activity | 10 to 15 minutes of walking or stationary bike Light sweat on the brow Slight increase in breathing rate | Walk in park or neighborhoodAvoid group activities | Increase heart rate to 30-40% at most |
| 3 | Moderate aerobic activity Light resistance training | 20 to 30 minutes of jogging or stationary bike Arm curls, shoulder raises, or leg lifts with weights that can be comfortably lifted One set of 10 repetitions for each activity | Supervised play Low risk activities, such as dribbling a ball, playing catch, changing directions, jumping, side-to-side slides, chasing a ball or catching a ball on the run | Increase heart rate to 40-60% at most Add resistance Use eyes to track objects |
| 4 | Intense aerobic activity Moderate resistance training Sport-specific exercise | 40 to 60 minutes of running or stationary bike Same resistance exercises with weight for three sets of 10 reps Pre-competition warm-ups, such as passing a soccer ball, throwing a football or doing ladder drills | Supervised play Moderate risk activities, such as balance and agility drills No head contact activities Can sweat and breathe heavy | Increase heart rate to 60-80% at most Increase resistance Mimic the sport |
| 5 | Controlled-contact training drills | 60 to 90 minutes of time on the field, court or mat for specific drills Take part in normal practice session Contact that is normally part of the sport—only use items that do not hit back, such as a sled in football Recheck for symptoms or problems often | Free play Run and jump as able Full return to PE Recheck for symptoms or problems often | Mimic the sport or free play without the risk of head injury |
| 6 | Full-contact practice | After OK from the doctor, may take part in normal training activities | With parent or adult supervision, may take part in normal activities | Build confidence Assess skills |
| 7 | Return to play | Normal game play | Normal playtime and activities | No restrictions |