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 freqent 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 confidenceAssess skills
7	• Return to play	Normal game play	Normal playtime and activities	No restrictions