

Township High School District 113

Deerfield High School Highland Park Highland



Return to Learn (RTL): Concussion Care Protocol

General Information:

A student's best chance of full recovery from a concussion involves individualizing a student's cognitive and physical stimuli to one's symptoms and avoiding activities that exacerbate the symptoms.

Cognitive stimulation includes, but is not limited to:

<u>Academics</u>: reading, writing, studying, keyboarding, test-taking, labs, visual and applied arts, extracurriculars.

<u>Loud, bright environments</u>: chorus, orchestra, band, acting, tech theater, cafeteria <u>Physical exertion</u>: PE, dance, marching band, extracurriculars, athletics, strength or cardiovascular conditioning

<u>Screen time</u>: computers, whiteboards, in class/homework movies and videos <u>Recreational screen time</u>: cell phone use, texting, social media, video, TV, online viewing <u>Driving</u>:driving can be difficult for students with symptomatology. If a student is taking Behind the Wheel (BTW), the nurses will work with the student's practitioner to determine protocol. The driver's education teacher will be notified by the nurse when the student is cleared.

These stimuli should be limited, or regulated for a period of time during recovery from a concussion. Some students are quite sensitive to any physical and cognitive exertion, and others are not.

It is recommended that this protocol is shared with the student's health care provider during the initial visit.

Stages of Concussion Recovery and Academic Participation:

Stage 1: Limit stimulation as tolerated by the student (Options for modified daily class schedule)

Stage 2: Limited school work (Options for modified daily class schedule)

Stage 3: Moderate academic work

Stage 4: Full Curricular (Academic) Participation

Points of Emphasis:

• It is important to note that the recovery from a concussion is a very

individualized process. Caution must be taken not to compare students with concussions as they progress through the recovery process.

- The information below is provided to teachers/support staff/sponsors/coaches, parents/guardians/guardians, and students as a guide to assist with concussion recovery.
- For the concussion care protocol to be initiated, the student must first be evaluated by a healthcare provider and documentation of that visit must be given to the school nurse. An emergency room/acute care note is only temporary and will retain the student at Stage 1 until the student is seen by the health care provider within one week. School nurses will work with families to provide resources to healthcare providers when needed.
- The student's missed academic work will be reviewed and extra time to complete will be granted, in conjunction with the health care provider's recommendations, counselor/case manager, and school nurse guidance.
- As the student's recovery progresses through Stage 1-3, teachers should identify essential academic work in each subject and collaborate with the department supervisors, as needed, to determine potential reduction in coursework.
- The teacher has the option of assigning the student a grade of incomplete for the progress report/quarter grade, final exam, and/or semester grade.
- High school students are often very busy. Many students are enrolled in advanced classes and have one or more extracurricular activities. Therefore, prioritizing activities in the student's learning plan and reducing overall demands becomes especially important in order to reduce concussion symptoms.
- If the student remains in any stage or recovery longer than anticipated, the school nurse will request that the parent/guardian consult with the healthcare provider.
- It is important upon return to school that the student report to the school nurse that day (and athletic trainer if school athlete and in season) to monitor symptoms and determine progression to the next stage within the concussion care protocol.

Four Stage Progression to Full Return to Extracurricular (Activity and Athletic) Participation

Some students may progress through or skip stages depending on symptomatology.

Stage 1: Adjustments to physical and cognitive rest as tolerated: Return to School (Options for modified daily class schedule)

Characteristics:

- May have severe symptoms at rest
- Symptoms may include but are not limited to:
 - Headache or pressure in the head, dizziness, nausea, light and/ or noise sensitivity, inability to focus/concentrate, memory loss/lack of recall, feeling mentally "foggy", unusual changes in mood, fatigue
 - Student may complain of intense and continuous/frequent headaches

Curricular Interventions: (including but not exclusive)

-<u>Initial evaluation</u> by healthcare provider

Attendance:

- Attendance as directed by symptoms
- Modified activity based on student's symptoms
- Student will rest as needed in Health Services

Academics:

- As the student recovers through stages 1-3, teachers should be prepared to apply "mastery learning" criteria within their subject matter.
- No tests, quizzes or homework;
- Provide students with copies of class notes
- No assigned computer or other screen time
- No PE
- Obtain "five-minute pass" from the school nurse to avoid noisy, crowded hallways between class periods, as necessary

School Nurse:

- School nurse will email the Return To Learn (RTL) plan to student's teachers and appropriate staff
- If the student remains in stage 1 for longer than one week, the school nurse will ask the parent/guardians to consult with the health care provider when needed.
- School nurse will update email to appropriate staff as student is progressed in the protocol stages.

Progress to Stage 2 when:

- Decreased sensitivity to light and/or noise.
- Decreased intensity and frequency of headaches and dizziness.
- Decreased feeling of "fogginess or confusion"; increased ability to focus, memory/recall.

Stage 2: Limited school work (Options for modified daily class schedule)

Characteristics:

• Mild symptoms at rest, but increasing with mental and physical activity.

Curricular Interventions: (including but not exclusive)

Attendance:

Partial or full days as symptoms warrant

Academics:

- As the student recovers through stages 1-3, teachers should be prepared to apply "mastery learning" criteria within their subject matter.
- No test, quizzes, homework
- Provide to student copies of class notes
- Limit computer work, video/movie clips in class
- Obtain "five-minute pass" from the school nurse to avoid noisy, crowded hallways between class periods, as necessary.
- Divide up work into smaller portions (15-20 minutes at a time)

School Nurse:

- The school nurse will determine a plan with the Student for checking in to health services on a case-by-case basis.
- Student will rest in Health Services office as needed for breaks in attending academic classes
- School nurse will update email to appropriate staff as updated medical notes received and/or student is advanced in the protocol stages

PE:

 Based on symptoms, student may participate in light, non-contact exercise while staying under the sub-symptom threshold (i.e. stationary bike, elliptical or light conditioning/ weights). No running or jumping advised at this point.

Progress to Stage 3 when:

- School activity does not increase symptoms
- Overall symptoms continue to decrease

Stage 3: School attendance with increasing academic work

Characteristics:

- Symptom-free at rest
- Mild to moderate symptoms with cognitive and school day activity

Curricular Interventions: (including but not exclusive)

Attendance: full school day attendance with rest as needed in Health Services

Academics:

- As the student recovers through stages 1-3, teachers should be prepared to apply "mastery learning" criteria within their subject matter.
- Provide to student copies of class notes, as needed
- Limit computer work, video/movie clips in class, as needed
- Obtain "five-minute pass" from the school nurse to avoid noisy, crowded hallways between class periods, as needed
- Divide up work into smaller portions (15-20 minutes at a time), as needed Progress to limited homework, tests, quizzes (may provide alternative testing accommodations (i.e. tests given in smaller sections, one page at a time, breaks as needed).
- Limit one test per day

Limited to no PE:

- Student may report to PE teacher(DHS)/ PE study hall (HPHS) as symptoms warrant
- If ordered by healthcare provider, student may participate in light, non-contact exercise while staying below symptom threshold (i.e. stationary bike, elliptical or light conditioning/ weights). No running or jumping advised at this point.

School Nurse:

- The school nurse will determine a plan with the Student for checking in to health services on a case-by-case basis
- School nurse will update email to appropriate staff as updated medical notes are received or student is progressed in the protocol stages.

Progress to Stage 4 when:

- Symptom-free with cognitive and physical activity
- Student should report any return of symptoms with cognitive or school day activity immediately to school nurse
- Written concussion clearance by health care provider to school nurse for return to full academic participation

Stage 4: Full Academic and Athletic Participation

Characteristics:

Asymptomatic with academic/cognitive and physical activity

Curricular Interventions: (including but not exclusive)

Attendance:

• full days

Academics:

- Student may resume full academic responsibilities once symptoms have resolved completely as determined by the health care provider.
- Create plan for possible modifications and gradual completion for required make-up work. The plan will include input from counselor, teacher, case manager and student based on the student's need.
- Teachers have the discretion to identify essential academic work for their class.

<u>PE:</u>

- Students are not required to make up missed PE classes due to concussion.
- More than one quarter out may result in a medical waiver.
- Written clearance to full participation from health care provider to the school nurse will be sent to PE teacher.
- PE teacher will consult with PE Dept. Chair regarding appropriate return to full participation within current PE scheduled activity. Some agility work could be included prior to full participation.
- Returning to PE Steps:
 - Step 1: Light aerobic activity
 - Step 2: Increased aerobic activity
 - Step 3: Agility training activity
 - Step 4: Scheduled class activity as tolerated

School Nurse:

- Student shall report to the school nurse with clearance note
- Student shall return to Health Services as needed based on symptoms and nursing assessment
- School nurse shall send clearance email to student's teachers and appropriate staff

For additional questions, please contact the School Nurse, Activities Director or Athletic Trainer

Deerfield High School:

Job Title	Name	Phone	Email
School Nurse	Sharon Urban	224-632-3201	surban@dist113.org
School Nurse	Alison McTague	224-632-3203	amctague@dist113.org

Athletic Director	Nate Flannery	224-632-3111	nflannery@dist113.org
Athletic Trainer	Gabriella Cimino	224-632-3115	gcimino@dist113.org
Athletic Trainer	Karl Lindblad	224-632-3117	klindblad@dist113.org
Activities Dept. Chair	Brian Verisario	224-632-3020	bverisario@dist113.org

Highland Park High School:

Job Title	Name	Phone	Email
School Nurses	Suzy Spychala Alexandra Powell,		sspychala@dist113.org
		224-765-2200	apowell@dist113.org
Athletic Trainer	Brieanna Montmarquette	224-765-2112	bmontmarquette@dist113.org
Athletic Director	Paul Harris	224-765-2321	pharris@dist113.org
Activities Dept. Chair	Lesa Friedrich	224-765-2370	lesafriedrich@dist113.org

Physician: Dr. Nicole Reams

School Administrator:Roslyn Martin

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